

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kamala Harris for the People

**A.** Full Name (Last, First, Middle Initial)

Harkins, Gary, , ,

Mailing Address 2950 Brookside Ave SE

City

Albany

State

OR

Zip Code

97322-5821

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Not Employed

Receipt For: 2020



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1012.83

**Transaction ID : 1541862**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	1		2	0	1	9

Amount of Each Receipt this Period

12.83

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)

Harkins, Gary, , ,

Mailing Address 2950 Brookside Ave SE

City

Albany

State

OR

Zip Code

97322-5821

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Not Employed

Receipt For: 2020



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1012.83

**Transaction ID : 1505451**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	5		2	0	1	9

Amount of Each Receipt this Period

250.00

☐ Memo Item

\* Earmarked Contribution: See Below

**C.** Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2020



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

9206840.34

**Transaction ID : 1505451E**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	1		2	0	1	9

Amount of Each Receipt this Period

250.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

**Subtotal Of Receipts This Page** (optional).....

262.83

**Total This Period** (last page this line number only) .....