

**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)
ROMNEY FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
BRUCE LEISING

Mailing Address 11621 PAGANICA WAY,NE

City State Zip Code
ALBUQUERQUE NM 87111-7509

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
COASTSIDE LLC MANAGING PARTNER

Receipt For: 2012
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1500.00

Transaction ID : SA17.3443688

Date of Receipt
M M / D D / Y Y Y Y
10 / 14 / 2012

CONTRIBUTION

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
JEFF LEIST

Mailing Address 1150 N. GLEBE RD.

City State Zip Code
ARLINGTON VA 22201-4739

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
U.S. DEPARTMENT OF JUSTICE ATTORNEY

Receipt For: 2012
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
300.50

Transaction ID : SA17.3125638

Date of Receipt
M M / D D / Y Y Y Y
10 / 04 / 2012

CONTRIBUTION

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MR. KEITH LEISTIKOW

Mailing Address 4745 ROSE CREEK PARKWAY S.

City State Zip Code
FARGO ND 58104-6842

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED FARMER

Receipt For: 2012
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.3475163

Date of Receipt
M M / D D / Y Y Y Y
10 / 11 / 2012

CONTRIBUTION

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 1000.00

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