

SCHEDULE A-P **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

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<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)

RickPerry.org, Inc

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

MR. VERNON N. REASER III

Mailing Address 5208 BEECH STREET

City	State	Zip Code
BELLAIRE	TX	77401-3329

FEC ID number of contributing federal political committee.

C

Name of Employer
TEXAS TEACHERS

Occupation
PRESIDENT

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Transaction ID : SA17.91856B

Date of Receipt

M M / D D / Y Y Y Y
09 / 19 / 2011

CONTRIBUTION

Amount of Each Receipt this Period

-2500.00

[MEMO ITEM]

REATTRIBUTION TO SPOUSE

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

MRS. AVIGAIL RECHNITZ

Mailing Address 143 N. FORMOSA AVENUE

City	State	Zip Code
LOS ANGELES	CA	90036-2817

FEC ID number of contributing federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
ATTORNEY

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Transaction ID : SA17.98995

Date of Receipt

M M / D D / Y Y Y Y
09 / 19 / 2011

CONTRIBUTION

Amount of Each Receipt this Period

2500.00

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

MR. SHLOMO RECHNITZ

Mailing Address 102 W. ALTA VISTA BLVD.

City	State	Zip Code
LOS ANGELES	CA	90036-2826

FEC ID number of contributing federal political committee.

C

Name of Employer
BRIUS HEALTHCARE

Occupation
C.E.O.

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Transaction ID : SA17.98994

Date of Receipt

M M / D D / Y Y Y Y
09 / 19 / 2011

CONTRIBUTION

Amount of Each Receipt this Period

2500.00

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

5000.00

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