

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 25 OF 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Arnold & Porter Kaye Scholer LLP (APKS) Partners Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Lee, James, K., ,**

Mailing Address 777 South Figueroa St  
44th Floor

City  
Los Angeles

State  
CA

Zip Code  
90017

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Arnold & Porter Kaye Scholer

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
06 / 30 / 2019

Transaction ID : SA11AI.19939

Amount of Each Receipt this Period

250.00

☐ Memo Item

Individual Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Lee, Ronald, , Mr.,**

Mailing Address 8810 Altimont Lane

City

Chevy Chase

State

MD

Zip Code

20815

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Arnold & Porter Kaye Scholer

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
06 / 30 / 2019

Transaction ID : SA11AI.19940

Amount of Each Receipt this Period

100.00

☐ Memo Item

Individual Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Levine, Jonathan, , ,**

Mailing Address 250 West 55th Street

City

New York

State

NY

Zip Code

10019

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Arnold & Porter Kaye Scholer

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
06 / 30 / 2019

Transaction ID : SA11AI.19941

Amount of Each Receipt this Period

250.00

☐ Memo Item

Individual Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

600.00