

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

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

FOR LINE NUMBER: PAGE 20 OF 26

(check only one)

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

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NAME OF COMMITTEE (In Full)

Polsinelli PAC

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

A. Polsinelli, James, A., ,

Mailing Address 1213 W 58th St

City
Kansas City

State
MO

Zip Code
64113-1146

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Polsinelli Shughart PC

Occupation (for Individual)
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : C7121848

Amount of Each Receipt this Period

200.00

☐ Memo Item

* Payroll Deduction: \$200 monthly

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

B. Reimers, Timothy, J., ,

Mailing Address 517 Coolidge Dr

City
San Gabriel

State
CA

Zip Code
91775-2211

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Polsinelli Shughart LLP

Occupation (for Individual)
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : C7121859

Amount of Each Receipt this Period

100.00

☐ Memo Item

* Payroll Deduction: \$100 monthly

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

C. Ross, Frank, J., , Jr.

Mailing Address 3005 W 117th St

City
Leawood

State
KS

Zip Code
66211-2924

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Polsinelli Shalton Flanigan Suelthaus

Occupation (for Individual)
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4166.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : C7121840

Amount of Each Receipt this Period

416.66

☐ Memo Item

* Payroll Deduction: \$416.66 monthly

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

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

716.66