

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)

ROMNEY FOR PRESIDENT, INC.

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

MRS. BETH LEVINE

Mailing Address **34 BEACH AVENUE**

City

LARCHMONT

State

NY

Zip Code

10538-4002

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Transaction ID : SA17.551414

Date of Receipt

10 / 26 / 2011

CONTRIBUTION

Amount of Each Receipt this Period

2500.00

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

MR. BRIAN LEVINE

Mailing Address **34 BEACH AVENUE**

City

LARCHMONT

State

NY

Zip Code

10538-4002

FEC ID number of contributing
federal political committee.

C

Name of Employer

GOLDMAN SACHS

Occupation

FINANCE

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Transaction ID : SA17.551433

Date of Receipt

10 / 26 / 2011

CONTRIBUTION

Amount of Each Receipt this Period

2500.00

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

CAROLINE LEVINE

Mailing Address **39 SEARS ROAD**

City

BROOKLINE

State

MA

Zip Code

02445-7409

FEC ID number of contributing
federal political committee.

C

Name of Employer

LEVINE ASSOC.

Occupation

**CAROLINE C. LEVINE CHARITABLE
FOUNDATION**

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Transaction ID : SA17.587464

Date of Receipt

12 / 06 / 2011

CONTRIBUTION

Amount of Each Receipt this Period

2500.00

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

7500.00

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