

**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)  
**JEB 2016, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**MR. TERRY S. ARNETT**

Mailing Address 14484 CAMINITO LAZANJA

City State Zip Code  
SAN DIEGO CA 92127-3632

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
TSA CONTRACTING INC. PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17.135812**

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 07 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**MR. DANIEL C. ARNOLD**

Mailing Address 1001 FANNIN ST  
STE 720

City State Zip Code  
HOUSTON TX 77002-6707

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17.137359**

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 17 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**MR. JAMES ARNOLD**

Mailing Address 7317 AUTUMN LAKE DR

City State Zip Code  
SUMMERFIELD NC 27358-9185

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
XPO LOGISTICS EXECUTIVE

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17.140536**

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 21 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period

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

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