

**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)  
**HARRIET BURKE**

Mailing Address 76 ISLAND DR

City State Zip Code  
RYE NY 10580-4306

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

**Transaction ID : SA17.125540**

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 02 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period  
2700.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. SPENCER B. BURKE**

Mailing Address 121 N HANLEY RD

City State Zip Code  
CLAYTON MO 63105-3835

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
ST. LOUIS TRUST COMPANY VP

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

**Transaction ID : SA17.150060**

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 22 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
**WILLIAM BURKE**

Mailing Address 9751 LARCHCREST DR  
STE 4150

City State Zip Code  
DALLAS TX 75238-2112

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
450.00

**Transaction ID : SA17.125315**

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 10 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period  
100.00

**Subtotal Of Receipts This Page** (optional).....▶ 4800.00

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