

**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)  
**LINDSEY GRAHAM 2016**

**A.** Full Name (Last, First, Middle Initial)  
**THOMAS JOYCE**

Mailing Address 142 GOODWIVES RIVER RD

City State Zip Code  
DARIEN CT 06820-5807

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

Name of Employer Occupation  
ARXIS CAPITAL EXECUTIVE

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

**Transaction ID : SA17.71896**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 17 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period  
2700.00

**B.** Full Name (Last, First, Middle Initial)  
**MRS. JOLEEN JULIS**

Mailing Address 1880 CENTURY PARK E. #1600

City State Zip Code  
LOS ANGELES CA 90067-1661

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 : SA17.67151**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 10 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period  
2700.00

**C.** Full Name (Last, First, Middle Initial)  
**MR. MITCHELL JULIS**

Mailing Address 2000 AVENUE OF THE STARS., FL. 11

City State Zip Code  
LOS ANGELES CA 90067-4732

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

Name of Employer Occupation  
CANYON PARTNERS LLC INVESTMENT MANAGER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

**Transaction ID : SA17.67117**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 10 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period  
2700.00

**Subtotal Of Receipts This Page** (optional).....▶ 8100.00

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