

**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)

**Chris Christie for President, Inc.**

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

**MARY CARPENTER**

Mailing Address 23 OLD COACH ROAD

City State Zip Code  
BASKING RIDGE NJ 07920-2511

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
NOT AT THIS TIME HEALTHCARE ADMINISTRATOR

Receipt For: 2016  
 Primary  General  
 Other (specify)   
Election Cycle-to-Date

**Transaction ID : SA17.33600**

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 01 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period

Memo Item

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

**PETER CARPENTER**

Mailing Address 1301 DOVE ST.

City State Zip Code  
NEWPORT BEACH CA 92660-2412

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
ALLIANT INSURANCE COO

Receipt For: 2016  
 Primary  General  
 Other (specify)   
Election Cycle-to-Date

**Transaction ID : SA17.38653**

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period

Memo Item

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

**BRIAN R. CARR**

Mailing Address

City State Zip Code  
NEW YORK NY 10028-

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
HIGH BROOK INVESTMENT MGT FINANCE

Receipt For: 2016  
 Primary  General  
 Other (specify)   
Election Cycle-to-Date

**Transaction ID : SA17.39500**

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period

Memo Item

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

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