

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Marco Rubio for President

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

JWAYNE EDENS

Mailing Address 333 5TH AVE

City	State	Zip Code
INDIALANTIC	FL	32903-4267

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

Name of Employer	Occupation
SELF EMPLOYED	INSURANCE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2500.00

Transaction ID : SA17.870530

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			11			2015			

CONTRIBUTION

Amount of Each Receipt this Period

_____	2500.00
-------	---------

IN KIND: CATERING

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

JAMES EDGE

Mailing Address 3808 CHAUCER CT.

City	State	Zip Code
BRYAN	TX	77802-4902

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

Name of Employer	Occupation
U.S. HOUSE OF REPRESENTATIVES	REGIONAL DIRECTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 595.00

Transaction ID : SA17.861755

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2015			

CONTRIBUTION

Amount of Each Receipt this Period

_____	100.00
-------	--------

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

JAMES EDGE

Mailing Address 3808 CHAUCER CT.

City	State	Zip Code
BRYAN	TX	77802-4902

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

Name of Employer	Occupation
U.S. HOUSE OF REPRESENTATIVES	REGIONAL DIRECTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 595.00

Transaction ID : SA17.875009

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			11			2015			

CONTRIBUTION

Amount of Each Receipt this Period

_____	100.00
-------	--------

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

_____	2700.00
-------	---------

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

-------	--