

**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)

**Marco Rubio for President**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JOSEPH S. ELLIS**

Mailing Address 3205 N. MARIETTA AVENUE  
APT B

City State Zip Code  
MILWAUKEE WI 53211-3133

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 ▼  
2600.00

**Transaction ID : SA17.750501**

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 11 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. JOSEPH S. ELLIS**

Mailing Address 3205 N. MARIETTA AVENUE  
APT B

City State Zip Code  
MILWAUKEE WI 53211-3133

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 ▼  
2600.00

**Transaction ID : SA17.766472**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 19 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 31113 BALLARD ROAD

City State Zip Code  
MALIBU CA 90265-2681

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

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 ▼  
2700.00

**Transaction ID : SA17.766281**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 19 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
2700.00

**Subtotal Of Receipts This Page** (optional).....▶ 4200.00

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