

**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)
MR. ROBERT G. STEINER

Mailing Address **600 W BROADWAY
STE 2600**

City **SAN DIEGO** State **CA** Zip Code **92101-3372**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Transaction ID : SA17.172358

Date of Receipt
M M / D D / Y Y Y Y
12 / 01 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR. TODD J. STEIN

Mailing Address **3355 BLACKBURN ST
APT 9402**

City **DALLAS** State **TX** Zip Code **75204-4510**

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

Name of Employer **BRAESIDE CAPITAL, L.P.** Occupation **FINANCIAL ANALYST**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.166333

Date of Receipt
M M / D D / Y Y Y Y
11 / 10 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MRS. CHRISTINA STENSTROM

Mailing Address **710 HARBOR DR**

City **KEY BISCAYNE** State **FL** Zip Code **33149-1710**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3200.00

Transaction ID : SA17.161603

Date of Receipt
M M / D D / Y Y Y Y
10 / 20 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional)..... **1000.00**

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