

**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. TY COBB

Mailing Address **2 OCEAN COURSE DR**

City State Zip Code
KIAWAH ISLAND SC 29455-5900

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

Name of Employer Occupation
HOGAN LOVELLS US L.L.P. ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5400.00

Transaction ID : SA17.115431

Date of Receipt
M M / D D / Y Y Y Y
06 25 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
MR. TY COBB

Mailing Address **2 OCEAN COURSE DR**

City State Zip Code
KIAWAH ISLAND SC 29455-5900

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

Name of Employer Occupation
HOGAN LOVELLS US L.L.P. ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5400.00

Transaction ID : SA17.115431B

Date of Receipt
M M / D D / Y Y Y Y
08 10 2015

CONTRIBUTION

Amount of Each Receipt this Period
-2700.00

[MEMO ITEM]
REDESIGNATION TO GENERAL

C. Full Name (Last, First, Middle Initial)
MR. TY COBB

Mailing Address **2 OCEAN COURSE DR**

City State Zip Code
KIAWAH ISLAND SC 29455-5900

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

Name of Employer Occupation
HOGAN LOVELLS US L.L.P. ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5400.00

Transaction ID : SA17.138478

Date of Receipt
M M / D D / Y Y Y Y
08 10 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

Subtotal Of Receipts This Page (optional)..... **0.00**

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