

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1955 / 4949

<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)**

**GWEN MELLOR**

Mailing Address **2 WASHINGTON CIR**

City	State	Zip Code
ALEXANDRIA	VA	22305-1306

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**PODESTA GROUP**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17.149197**

Date of Receipt

**09 / 18 / 2015**

**CONTRIBUTION**

Amount of Each Receipt this Period

**1000.00**

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

**ROSCOE MELLOR**

Mailing Address **300 MERCER ST**  
**APT 4H**

City	State	Zip Code
NEW YORK	NY	10003-6724

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**UBS**

Occupation  
**INVESTMENT ADVISOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17.152026**

Date of Receipt

**09 / 27 / 2015**

**CONTRIBUTION**

Amount of Each Receipt this Period

**250.00**

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

**ROSCOE MELLOR**

Mailing Address **300 MERCER ST**  
**APT 4H**

City	State	Zip Code
NEW YORK	NY	10003-6724

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**UBS**

Occupation  
**INVESTMENT ADVISOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

**Transaction ID : SA17.153638**

Date of Receipt

**09 / 29 / 2015**

**CONTRIBUTION**

Amount of Each Receipt this Period

**250.00**

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

**1500.00**

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