

SCHEDULE A-P **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

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<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)

LINDSEY GRAHAM 2016

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

MR. DANIEL BAYLY

Mailing Address 5000 GASPARILLA RD

City	State	Zip Code
BOCA GRANDE	FL	33921-

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 ▼

5400.00

Transaction ID : SA17.75213B

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		06		2015

CONTRIBUTION

Amount of Each Receipt this Period

-2700.00

[MEMO ITEM]

REDESIGNATION TO GENERAL

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

MR. DANIEL BAYLY

Mailing Address 5000 GASPARILLA RD

City	State	Zip Code
BOCA GRANDE	FL	33921-

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 ▼

5400.00

Transaction ID : SA17.75557

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		06		2015

CONTRIBUTION

Amount of Each Receipt this Period

2700.00

[MEMO ITEM]

REDESIGNATION FROM PRIMARY

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

MRS. PAMELA C. BAYLY

Mailing Address 5000 GASPARILLA RD

City	State	Zip Code
BOCA GRANDE	FL	33921-

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 ▼

5400.00

Transaction ID : SA17.75212

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		29		2015

CONTRIBUTION

Amount of Each Receipt this Period

2700.00

[MEMO ITEM]

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

0.00

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