

**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)  
**JOHN CUTLER**

Mailing Address 12101 PLANTATION BLVD

City State Zip Code  
GOSHEN KY 40026-9573

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

Name of Employer Occupation  
NEW GRID EXECUTIVE

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
476.00

**Transaction ID : SA17.191348**

Date of Receipt  
M M / D D / Y Y Y Y  
01 / 30 / 2016

**CONTRIBUTION**

Amount of Each Receipt this Period  
25.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**MR. JOSEPH T. CUTRONO**

Mailing Address 13327 MORAN DR

City State Zip Code  
TAMPA FL 33618-3011

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 ▼  
600.00

**Transaction ID : SA17.189510**

Date of Receipt  
M M / D D / Y Y Y Y  
01 / 29 / 2016

**CONTRIBUTION**

Amount of Each Receipt this Period  
100.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MR. HARRY J. DABAGIAN**

Mailing Address 8710 MIDNIGHT PASS RD  
APT 400B

City State Zip Code  
SARASOTA FL 34242-2845

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 ▼  
250.00

**Transaction ID : SA17.182745**

Date of Receipt  
M M / D D / Y Y Y Y  
01 / 08 / 2016

**CONTRIBUTION**

Amount of Each Receipt this Period  
100.00

Memo Item

**Subtotal Of Receipts This Page** (optional).....▶ 225.00

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