

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 1023 / 2007

<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)**

**MRS. NORMA A. WAGNER**

Mailing Address 3300 SAN DOMINGO ST

City	State	Zip Code
CLEARWATER	FL	33759-3338

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17.182440**

Date of Receipt

**01 / 07 / 2016**

**CONTRIBUTION**

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

**DR. RICHARD E. WAINERDI**

Mailing Address 12135 MAPLE ROCK DR

City	State	Zip Code
HOUSTON	TX	77077-2530

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 ▼

2700.00

**Transaction ID : SA17.189467**

Date of Receipt

**01 / 28 / 2016**

**CONTRIBUTION**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

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

**CHRIS WALKER**

Mailing Address 36 SURFSIDE RD

City	State	Zip Code
SCITUATE	MA	02066-1633

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

HARBOURVEST PARTNERS

PRINCIPAL

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17.187538**

Date of Receipt

**01 / 20 / 2016**

**CONTRIBUTION**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

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

5600.00

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