

**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)  
**MARY A. BISHOP**

Mailing Address **239 W SABAL PALM PL**

City **LONGWOOD** State **FL** Zip Code **32779-3651**

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 ▼  
**335.00**

**Transaction ID : SA17.179795**

Date of Receipt  
M M / D D / Y Y Y Y  
**12 / 30 / 2015**

**CONTRIBUTION**

Amount of Each Receipt this Period  
**50.00**

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT J. BISHOP**

Mailing Address **628 WEST RD**

City **NEW CANAAN** State **CT** Zip Code **06840-2513**

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

Name of Employer **IMPALA** Occupation **PRINCIPAL**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**2700.00**

**Transaction ID : SA17.162845**

Date of Receipt  
M M / D D / Y Y Y Y  
**10 / 17 / 2015**

**CONTRIBUTION**

Amount of Each Receipt this Period  
**2700.00**

Memo Item

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

Mailing Address **628 WEST RD**

City **NEW CANAAN** State **CT** Zip Code **06840-2513**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**2700.00**

**Transaction ID : SA17.162844**

Date of Receipt  
M M / D D / Y Y Y Y  
**10 / 17 / 2015**

**CONTRIBUTION**

Amount of Each Receipt this Period  
**2700.00**

Memo Item

**Subtotal Of Receipts This Page** (optional)..... **5450.00**

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