

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)

JEB 2016, INC.

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

MRS. KIMBERLY FROST

Mailing Address 10150 DOUGLAS AVE

City
PLAINWELL

State Zip Code
MI 49080-9662

FEC ID number of contributing
federal political committee.

C

Name of Employer
GREAT LAKES MARKETING SERVICES INC.

Occupation
MANAGEMENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

Transaction ID : SA17.156851B

Date of Receipt

11 / 24 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item
REDESIGNATION TO GENERAL

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

MRS. KIMBERLY FROST

Mailing Address 10150 DOUGLAS AVE

City
PLAINWELL

State Zip Code
MI 49080-9662

FEC ID number of contributing
federal political committee.

C

Name of Employer
GREAT LAKES MARKETING SERVICES
INC.

Occupation
MANAGEMENT

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

Transaction ID : SA17.174105

Date of Receipt

11 / 24 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

2700.00

☒ Memo Item
REDESIGNATION FROM PRIMARY

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

MR. ROBERT G. FRUCHT

Mailing Address 33 CEDAR RD

City
EAST NORTHPORT

State Zip Code
NY 11731-4031

FEC ID number of contributing
federal political committee.

C

Name of Employer
RIKER DANZIG

Occupation
LAWYER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

Transaction ID : SA17.177409

Date of Receipt

12 / 21 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

2700.00

☐ Memo Item

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

2700.00

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