

**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)

**Marco Rubio for President**

**A.** Full Name (Last, First, Middle Initial)  
**JANET H CHOLIN**

Mailing Address 4476 COGAN HOUSE ROAD

City	State	Zip Code
TROUT RUN	PA	17771-9359

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
CHOLIN CORP., INC.	SMALL BUSINESS OWNER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17.813489**

Date of Receipt

M M / D D / Y Y Y Y
08 / 28 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="100.00"/>
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**B.** Full Name (Last, First, Middle Initial)  
**JANET H CHOLIN**

Mailing Address 4476 COGAN HOUSE ROAD

City	State	Zip Code
TROUT RUN	PA	17771-9359

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
CHOLIN CORP., INC.	SMALL BUSINESS OWNER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17.823311**

Date of Receipt

M M / D D / Y Y Y Y
09 / 23 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="100.00"/>
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**C.** Full Name (Last, First, Middle Initial)  
**DR. ATUL LUCKY CHOPRA**

Mailing Address 16 CRESTWOOD DRIVE

City	State	Zip Code
HOUSTON	TX	77007-7007

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
ADVANCED DIAGNOSTICS	RADIOLOGIST

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17.815162**

Date of Receipt

M M / D D / Y Y Y Y
09 / 01 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="2700.00"/>
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**Subtotal Of Receipts This Page** (optional).....

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