

SCHEDULE A (FEC Form 3)
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 checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Justice 2016

Full Name (Last, First, Middle Initial) A. Robert Casby		Date of Receipt 10 / 29 / 2015	
Mailing Address 199 Dutton Rd City State Zip Code Sudbury, MA 01776		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Sugarman & Sugarman, PC		Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00	
Full Name (Last, First, Middle Initial) B. Brenda Fulmer		Date of Receipt 10 / 29 / 2015	
Mailing Address 3148 San Michele Dr City State Zip Code Palm Beach Gardens, FL 33418		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Searcy Denney		Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00	
Full Name (Last, First, Middle Initial) C. David Jaramillo		Date of Receipt 10 / 29 / 2015	
Mailing Address 1309 Rome Ave NE City State Zip Code Albuquerque, NM 87106		Amount of Each Receipt this Period 1,000.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1,000.00	
Name of Employer Self		Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1,000.00	
SUBTOTAL of Receipts This Page (optional)		1,750.00	
TOTAL This Period (last page this line number only)		1,750.00	

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