

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 59			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Martha Roby for Congress**

Full Name (Last, First, Middle Initial) <b>A. Delta Printing &amp; Sign Company</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2016	
Mailing Address 6001 Monticello Dr			Amount of Each Disbursement this Period 429.77	
City Montgomery	State AL	Zip Code 36117-1906	Transaction ID : <b>BC2B18677E54D4E98BB7</b>	
Purpose of Disbursement Printing		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>B. Boosters, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2016	
Mailing Address 2509 E 5th St			Amount of Each Disbursement this Period 3520.00	
City Montgomery	State AL	Zip Code 36107-3105	Transaction ID : <b>B0C9ADFB5F31347BD874</b>	
Purpose of Disbursement Printing		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>c. Republican Agenda Management LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2016	
Mailing Address PO Box 36834			Amount of Each Disbursement this Period 7500.00	
City Birmingham	State AL	Zip Code 35236-6834	Transaction ID : <b>BC371CDBC864D470FB60</b>	
Purpose of Disbursement Field Consulting		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	11449.77
<b>TOTAL</b> This Period (last page this line number only).....	