SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☒ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Democratic Senatorial Campaign Committee

A. Full Name (Last, First, Middle Initial): Marvell Branch
Mailing Address 5095 Highway 1 W.
City: Watson State: AR Zip Code: 71674
Purpose of Disbursement: Contribution Refund
Candidate Name
Category/Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 01 / 27 / 2015
Transaction ID : SB28A-102249
Amount of Each Disbursement this Period: 25.00

B. Full Name (Last, First, Middle Initial): Marvell Branch
Mailing Address 5095 Highway 1 W.
City: Watson State: AR Zip Code: 71674
Purpose of Disbursement: Contribution Refund
Candidate Name
Category/Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 01 / 27 / 2015
Transaction ID : SB28A-102250
Amount of Each Disbursement this Period: 25.00

C. Full Name (Last, First, Middle Initial): Horace Wolf
Mailing Address 2 West Sunnyside Dr.
City: St. Peters State: MO Zip Code: 63376
Purpose of Disbursement: Contribution Refund
Candidate Name
Category/Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 01 / 27 / 2015
Transaction ID : SB28A-102621
Amount of Each Disbursement this Period: 25.00

SUBTOTAL of Disbursements This Page (optional) ▶ 75.00

TOTAL This Period (last page this line number only) ▶

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