

**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 81 OF 94			
	<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)
Friends of Dave Joyce

Full Name (Last, First, Middle Initial) A. Chagrin Valley Athletic Club			Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2015	
Mailing Address 17260 Snyder Road			Amount of Each Disbursement this Period 8760.42	
City Chagrin Falls	State OH	Zip Code 44023-2722	Transaction ID : B-E-6028	
Purpose of Disbursement CATERING		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. Congressional Club			Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2015	
Mailing Address 2001 New Hampshire Avenue NW			Amount of Each Disbursement this Period 500	
City Washington	State DC	Zip Code 20009-3414	Transaction ID : B-E-6032	
Purpose of Disbursement DUES		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) C. Dal Toro Bistrol			Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2015	
Mailing Address 719 Lincoln Road			Amount of Each Disbursement this Period 196.85	
City Miami Beach	State FL	Zip Code 33139-2813	Transaction ID : B-E-6027	
Purpose of Disbursement FOOD FOR MEETING		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:				

SUBTOTAL of Disbursements This Page (optional).....	9457.27
TOTAL This Period (last page this line number only).....	