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)
☐ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☒ 21

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NAME OF COMMITTEE (In Full)
OXLEY FOR CONGRESS

A.
Full Name (Last, First, Middle Initial)
Kolbe for Congress

Mailing Address C00144857
Box 31569

City Tucson | State AZ | Zip Code 85751

Purpose of Disbursement
Contribution

Candidate Name

Category/ Type

Office Sought: House / Senate / President
State: District

Disbursement For: 2004
Primary X General
Other (specify)

Transaction ID: D158301
Date of Disbursement
08 / 21 / 2004

Amount of Each Disbursement this Period
2000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial)
Steve Latourette for Congr

Mailing Address C00284174
320 Kenarden Dr

City Highland Heights | State OH | Zip Code 44143

Purpose of Disbursement
Contribution

Candidate Name
Latourette for Congress Committee

Category/ Type

Office Sought: House / Senate / President
State: OH District 14

Disbursement For: 2004
Primary X General
Other (specify)

Transaction ID: D158701
Date of Disbursement
09 / 28 / 2004

Amount of Each Disbursement this Period
415.70

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial)
Marion County Republican Party

Mailing Address 114 South Main Street

City Marion | State OH | Zip Code 43302

Purpose of Disbursement
Transfer of Funds

Candidate Name

Category/ Type

Office Sought: House / Senate / President
State: District

Disbursement For: 2004
Primary X General
Other (specify)

Transaction ID: D14G007
Date of Disbursement
08 / 19 / 2004

Amount of Each Disbursement this Period
100.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **2515.70**

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