

**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 29 OF 30	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CHRIS GIBSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. NASSAU COUNTY REPUBLICAN COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2016
Mailing Address 7 BLUE SPRUCE LANE		Amount of Each Disbursement this Period 1000.00
City LEVITTOWN	State NY Zip Code 11751	
Purpose of Disbursement CONTRIBUTION	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	Transaction ID : SB21.21352

Full Name (Last, First, Middle Initial) B. NEW PALTZ FIRE DEPARTMENT		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2016
Mailing Address PO BOX 841		Amount of Each Disbursement this Period 500.00
City NEW PALTZ	State NY Zip Code 12561	
Purpose of Disbursement CHARITABLE CONTRIBUTION	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	Transaction ID : SB21.21354

Full Name (Last, First, Middle Initial) C. NEW YORK STATE CONSERVATIVE PARTY		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2016
Mailing Address 486 78TH STREET		Amount of Each Disbursement this Period 500.00
City BROOKLYN	State NY Zip Code 11209	
Purpose of Disbursement CONTRIBUTION	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	Transaction ID : SB21.21356

SUBTOTAL of Disbursements This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	