

**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 OF

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Thomas Clements for U.S. Senate C00559880

Full Name (Last, First, Middle Initial)

A. *Fairfield Inn & Suites Marriott*

Mailing Address
8258 Arut Blvd.

City *Waterbury* State *MI* Zip Code *49098*

Purpose of Disbursement
TRAVEL EXPENSES

Candidate Name
Thomas Clements

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: *LA* District: *03*

Date of Disbursement
M M Y
08/25/2014

Amount of Each Disbursement this Period
707.02

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
M M Y

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
M M Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....

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

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