

**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 153 OF 197			
	<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)
Roskam for Congress Committee

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Date of Disbursement MM / DD / YYYY 06 / 17 / 2015
Mailing Address P. O. Box 25505		Amount of Each Disbursement this Period 305.58
City Lehigh Valley	State PA	
Zip Code 18002-5505	Purpose of Disbursement telephone	Transaction ID : 50923.E8909
Candidate Name	Category/Type	
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)	[MEMO ITEM] MEMO: TELEPHONE
State: District:		

Full Name (Last, First, Middle Initial) B. Fine Art America		Date of Disbursement MM / DD / YYYY 06 / 18 / 2015
Mailing Address 1450 2nd Street, #177		Amount of Each Disbursement this Period 1074.26
City Santa Monica	State CA	
Zip Code 90401-	Purpose of Disbursement printing	Transaction ID : 50923.E8910
Candidate Name	Category/Type	
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)	[MEMO ITEM] MEMO: PRINTING
State: District:		

Full Name (Last, First, Middle Initial) C. Central Michel Richard		Date of Disbursement MM / DD / YYYY 06 / 23 / 2015
Mailing Address 1001 Pennsylvania Avenue, N.W.		Amount of Each Disbursement this Period 204.90
City Washington	State DC	
Zip Code 20004-	Purpose of Disbursement food & beverage	Transaction ID : 50923.E8911
Candidate Name	Category/Type	
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)	[MEMO ITEM] MEMO: FOOD & BEVERAGE
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	