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): Friends of Senator Bob Smith

A.
Full Name (Last, First, Middle Initial): Smith, Mary Jo
Mailing Address: 9012 Rocky Lake Ct.
City: Sarasota, State: FL Zip Code: 34238
Purpose of Disbursement: Fundraising: Printing Reimbursem't
Candidate Name: Senator Bob Smith
Category/Type: 003
Office Sought: ☐ House ☑ Senate ☐ President
State: FL District:
Disbursement For: ☑ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 05 / 19 / 2009
Amount of Each Disbursement this Period: 247.09
☐ Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): USPS
Mailing Address:
City: Osprey, State: FL Zip Code: 34229
Purpose of Disbursement: Fundraising: Postage
Candidate Name: Senator Bob Smith
Category/Type: 003
Office Sought: ☐ House ☑ Senate ☐ President
State: FL District:
Disbursement For: ☑ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 14 / 2009
Amount of Each Disbursement this Period: 168.00
MEMO ENTRY
☐ Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Sir Speedy
Mailing Address: 3939 S. Tamiami Trail
City: Sarasota, State: FL Zip Code: 34231
Purpose of Disbursement: Fundraising: Printing
Candidate Name: Senator Bob Smith
Category/Type: 003
Office Sought: ☐ House ☑ Senate ☐ President
State: FL District:
Disbursement For: ☑ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 13 / 2009
Amount of Each Disbursement this Period: 79.09
MEMO ENTRY
☐ Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

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

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