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)

[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Todd Young, Inc.

A. Full Name (Last, First, Middle Initial)
Le Peep Restaurant #2

Mailing Address 301 N Illinois Street

City: Indianapolis | State: IN | Zip Code: 46204-1799

Purpose of Disbursement: Food/Beverage

Candidate Name:

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: 2016 [X] Primary [ ] General [ ] Other (specify)

Category/Type: 001

Date of Disbursement: 04 06 2016

Amount of Each Disbursement this Period: 201.96

[X] Memo Item

Transaction ID : B-S-177
Subitemization of Maria James(04/06/16)

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

Mailing Address PO Box 1053

City: Bloomington | State: IN | Zip Code: 47402-1053

Purpose of Disbursement: Payroll

Candidate Name:

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: 2016 [X] Primary [ ] General [ ] Other (specify)

Category/Type: 001

Date of Disbursement: 04 04 2016

Amount of Each Disbursement this Period: 991.96

[ ] Memo Item

Transaction ID : B-E-24523

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

Mailing Address PO Box 1053

City: Bloomington | State: IN | Zip Code: 47402-1053

Purpose of Disbursement: Travel/Phone Reimbursement

Candidate Name:

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: 2016 [X] Primary [ ] General [ ] Other (specify)

Category/Type: 001

Date of Disbursement: 04 06 2016

Amount of Each Disbursement this Period: 1273.59

[ ] Memo Item

Transaction ID : B-E-24466
Original vendors exceeding reporting threshold itemize as memo transactions.

SUBTOTAL of Disbursements This Page (optional) 2265.55

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

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