SCHEDULE B
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
☐ 17 ☐ 18 ☐ 19a
☐ 20a ☐ 20b ☐ 20c ☒ 21

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NAME OF COMMITTEE (In Full)
Friends of Mark Foley

A.
Full Name (Last, First, Middle Initial)
Connie Mack

Mailing Address
State Representative 2400 E Las Olas Blvd, Suite 421
City: Fort Lauderdale State: FL Zip Code: 33301-

Purpose of Disbursement
Other Disbursement non-federal campaign

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District:

Disbursement For: X Primary General / Other (specify)

Date of Disbursement: 05 21 2001

Amount of Each Disbursement this Period: 500.00

Transaction ID: 0723200124E2109

B.
Full Name (Last, First, Middle Initial)
Committee for Responsible Govt

Mailing Address
121 N Collins Street
City: Plant City State: FL Zip Code: 33568-

Purpose of Disbursement
Other Disbursement non-federal campain c

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District:

Disbursement For: X Primary General / Other (specify)

Date of Disbursement: 05 21 2001

Amount of Each Disbursement this Period: 500.00

Transaction ID: 0723200124E2110

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

Mailing Address
State Representative 4790 NW 7th Street, Suite 212
City: Miami State: FL Zip Code: 33126-2200

Purpose of Disbursement
Other Disbursement NON FEDERAL CAMPAIGN

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District:

Disbursement For: X Primary General / Other (specify)

Date of Disbursement: 05 31 2001

Amount of Each Disbursement this Period: 500.00

Transaction ID: 0723200134E2208

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1500.00**

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