

**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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**BEN FRASIER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

A.

**NEW FORTUNE CHINESE RESTAURANT**

Mailing Address

**16515 FREDERICK AVENUE**

City **GAITHERSBURG** State **MD** Zip Code **20877**

Purpose of Disbursement  
**FUND RAISING DINNER**

Candidate Name  
**BEN FRASIER**

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

State: **S.C.** District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

**09 / 17 / 2010**

Amount of Each Disbursement this Period

**3875.00**

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

**J.R. AQUINO SOUND SYSTEM / DJ SERVICES**

Mailing Address

**7102 WESTFIELD CT.**

City **ALEXANDRIA** State **VA** Zip Code **22302**

Purpose of Disbursement  
**SOUND SYSTEM / DJ SERVICES FOR FUND RAISING DINNER**

Candidate Name  
**BEN FRASIER**

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

State: **S.C.** District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

**09 / 17 / 2010**

Amount of Each Disbursement this Period

**3500.00**

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

**DOLLAR BUYS**

Mailing Address

**9661 LOST KNIFE ROAD**

City **GAITHERSBURG** State **MD** Zip Code **20877**

Purpose of Disbursement  
**DECORATIONS FOR FUND RAISING DINNER**

Candidate Name  
**BEN FRASIER**

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

State: **S.C.** District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

**09 / 17 / 2010**

Amount of Each Disbursement this Period

**107.05**

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).....▶

**4332.05**

**4332.05**

11030592417

**SCHEDULE B (FEC Form 3)  
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PAGE OF

<input 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)

**BEN FRASIER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

A.

**DOLLAR TREE STORES, INC**

Mailing Address

**19214 MONTGOMERY VILLAGE AVENUE**

City **MONTGOMERY VILLAGE** State **MD** Zip Code **20886**

Purpose of Disbursement  
**DECORATIONS FOR FUND RAISING DINNER**

Candidate Name  
**BEN FRASIER**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: **S.C.** District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

**09** / **17** / **2010**

Amount of Each Disbursement this Period

**7049**

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

B.

**REGENCY TAXI, INC.**

Mailing Address

**807 S. FREDERICK AVENUE**

City **GAITHERSBURG** State **MD** Zip Code **20878**

Purpose of Disbursement  
**TRANSPORTATION**

Candidate Name  
**BEN FRASIER**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: **S.C.** District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

**09** / **17** / **2010**

Amount of Each Disbursement this Period

**2000**

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

C.

**ACTION TAXI**

Mailing Address

**15805 PARAMOUNT DRIVE**

City **ROCKVILLE** State **MD** Zip Code **20855**

Purpose of Disbursement  
**TRANSPORTATION**

Candidate Name  
**BEN FRASIER**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: **S.C.** District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

**09** / **17** / **2010**

Amount of Each Disbursement this Period

**3650**

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

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

**12699**

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

**4459.04**

11030502418

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

11030592419

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <b>fed ex</b>	Shipping Date <b>4/13/11</b>
Next Business Day Delivery <input checked="" type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

*ca* **4/14/11**  
 PREPARER DATE PREPARED