

**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 40 OF 45			
	<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)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. US AIRWAYS CARD SERVICES		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2015
Mailing Address PO BOX 13337		Amount of Each Disbursement this Period 190.10 Transaction ID : SB17.14564
City PHILADELPHIA State PA Zip Code 19101	Purpose of Disbursement SEE MEMO 001 Category/Type	
Candidate Name	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)	
State: District:		

Full Name (Last, First, Middle Initial) B. US AIRWAYS		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2015
Mailing Address 2330 TURNBERRY LANE		Amount of Each Disbursement this Period 190.10 Transaction ID : SB17.14565 [MEMO ITEM]
City CHARLOTTE State NC Zip Code 28210	Purpose of Disbursement AIRFARE 001 Category/Type	
Candidate Name	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)	
State: District:		

Full Name (Last, First, Middle Initial) C. CAROLYN YOHO		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2015
Mailing Address 8209 SW 95TH LANE		Amount of Each Disbursement this Period 176.45 Transaction ID : SB17.13740
City GAINESVILLE State FL Zip Code 32608	Purpose of Disbursement SEE MEMO ENTRIES 001 Category/Type	
Candidate Name	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)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	366.55
TOTAL This Period (last page this line number only).....	