

**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 130 OF 148			
	<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)
Pete Sessions for Congress

Full Name (Last, First, Middle Initial) A. Verizon		Date of Disbursement MM / DD / YYYY 07 / 29 / 2015
Mailing Address 695 Main Street Suite 6		Amount of Each Disbursement this Period 210.69
City Stamford	State CT	
Purpose of Disbursement Mobile phone expense		
Candidate Name		Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. Nick & Sam's Grill		Date of Disbursement MM / DD / YYYY 08 / 03 / 2015
Mailing Address 2816 Fairmount Street		Amount of Each Disbursement this Period 1414.60
City Dallas	State TX	
Purpose of Disbursement Fundraising dinner expense		
Candidate Name		Category/ Type 003
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) c. McShan Florist		Date of Disbursement MM / DD / YYYY 08 / 06 / 2015
Mailing Address 10311 Garland Road		Amount of Each Disbursement this Period 117.85
City Dallas	State TX	
Purpose of Disbursement Memorial - flowers		
Candidate Name		Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	