

**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 219 OF 299			
	<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)  
**Committee to Elect Alan Grayson**

Full Name (Last, First, Middle Initial) <b>A. Bank of America Credit Card</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2015
Mailing Address PO Box 15019		Amount of Each Disbursement this Period 188.78 <b>Transaction ID : B46FC6FF43F2543DCAA4</b>
City Wilmington	State DE	
Zip Code 19850-5019	Purpose of Disbursement Interest Expense	Category/ Type 001
Candidate Name	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>B. Bank of America Credit Card</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2015
Mailing Address PO Box 15019		Amount of Each Disbursement this Period 209.45 <b>Transaction ID : BB61CDDCDF0854875B02</b>
City Wilmington	State DE	
Zip Code 19850-5019	Purpose of Disbursement Credit Card Interest	Category/ Type 001
Candidate Name	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>C. Custom Payroll Services, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2015
Mailing Address 20 W Aylesbury Road Suite 2		Amount of Each Disbursement this Period 52.35 <b>Transaction ID : B38B42F7BE9624CF2ABD</b>
City Timonium	State MD	
Zip Code 21093-4144	Purpose of Disbursement Payroll Processing Fee	Category/ Type 001
Candidate Name	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	450.58
<b>TOTAL</b> This Period (last page this line number only).....	