

**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 213 OF 215			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Friends of John Thune

Full Name (Last, First, Middle Initial) A. Thomas S Cushman		Date of Disbursement MM / DD / YYYY 07 / 31 / 2013
Mailing Address 120 Daniel St		Amount of Each Disbursement this Period 1000.00 Transaction ID : BD22D54F6E2474EBAB87
City Beckley	State WV Zip Code 25801-3216	
Purpose of Disbursement Refund: Refund		Category/Type
Candidate Name		
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	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. F Randall Smith		Date of Disbursement MM / DD / YYYY 07 / 05 / 2013
Mailing Address 325 E 53rd St # 3		Amount of Each Disbursement this Period 1500.00 Transaction ID : B97E0E1B72EAF4E22908
City New York	State NY Zip Code 10022-4923	
Purpose of Disbursement Refund: Refund		Category/Type
Candidate Name		
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	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. David Wallace		Date of Disbursement MM / DD / YYYY 08 / 19 / 2013
Mailing Address 11800 New Harmony Church		Amount of Each Disbursement this Period 2500.00 Transaction ID : BCDC45491CBDF4A22A73
City West Frankfort	State IL Zip Code 62896-0000	
Purpose of Disbursement Refund: Refund of Contribution		Category/Type
Candidate Name		
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	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).....	5000.00
TOTAL This Period (last page this line number only).....	

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