

**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 57 OF 75	
	<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)
Boozman for Arkansas

Full Name (Last, First, Middle Initial) A. ADVANCE PRINT SOLUTIONS		Date of Disbursement MM DD YY 02 05 2016
Mailing Address 4201 S SHACKLEFORD RD SUITE C		Amount of Each Disbursement this Period 410.63 <input type="checkbox"/> Memo Item Transaction ID : SB17.I3617
City LITTLE ROCK	State AR	
Purpose of Disbursement PRINTING		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. AMERICAN EXPRESS		Date of Disbursement MM DD YY 01 05 2016
Mailing Address PO BOX 53852		Amount of Each Disbursement this Period 376.97 <input type="checkbox"/> Memo Item Transaction ID : SB17.I3537
City PHOENIX	State AZ	
Purpose of Disbursement CREDIT CARD PROCESSING FEE		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. AMERICAN EXPRESS		Date of Disbursement MM DD YY 02 05 2016
Mailing Address PO BOX 53852		Amount of Each Disbursement this Period 349.75 <input type="checkbox"/> Memo Item Transaction ID : SB17.I3618
City PHOENIX	State AZ	
Purpose of Disbursement CREDIT CARD PROCESSING FEE		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).....	1137.35
TOTAL This Period (last page this line number only).....	

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