

**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 103 OF 136	
	<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)
Friends of Jim Clyburn

Full Name (Last, First, Middle Initial) A. MEBAR Realty Holdings Trust		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2015
Mailing Address 400 N. Capitol Street NW		Amount of Each Disbursement this Period 1000.00 Transaction ID : D529486
City Washington State DC Zip Code 20001	Purpose of Disbursement Facility Rental	
Candidate Name	Category/Type	
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. DISTILLED SPIRITS COUNCIL OF THE UNITED STATES INC POLITICAL ACTION COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2015
Mailing Address 1250 EYE ST., NW #400		Amount of Each Disbursement this Period 309.45 Transaction ID : D528750
City WASHINGTON State DC Zip Code 20005	Purpose of Disbursement Beverage Expense	
Candidate Name	Category/Type	
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)	* In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) C. MASTERS, MATES AND PILOTS POLITICAL CONTRIBUTION FUND		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2015
Mailing Address 700 MARITIME BLVD SUITE B		Amount of Each Disbursement this Period 1875.00 Transaction ID : D528751
City LINTHICUM HEIGHTS State MD Zip Code 21090	Purpose of Disbursement Space fee	
Candidate Name	Category/Type	
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)	* In-Kind Received
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3184.45
TOTAL This Period (last page this line number only).....	