

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 4725 / 4732 (check only one)
	<input type="checkbox"/> 17 <input type="checkbox"/> 18 <input type="checkbox"/> 19a <input type="checkbox"/> 19b <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 20b <input type="checkbox"/> 20c <input type="checkbox"/> 21

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Amount of Disbursement this Period
Russ for Wisconsin

Full Name (Last, First, Middle Initial) Sallyann C Tomkinson		Date of Disbursement <input type="text" value="01"/> <input type="text" value="31"/> <input type="text" value="2016"/>	
Mailing Address 12108 Foley St		Amount of Each Receipt this Period <input type="text" value="1000.00"/>	
City Silver Spring	State MD	Zip Code 20902-1037	<input type="checkbox"/> Memo Item Transaction ID: VPEPCA1M786
Purpose of Disbursement Refund of Individual Contribution		Category/ Type <input type="text"/>	
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) Elizabeth Trautsch		Date of Disbursement <input type="text" value="01"/> <input type="text" value="22"/> <input type="text" value="2016"/>	
Mailing Address 110 N Main St		Amount of Each Receipt this Period <input type="text" value="25.00"/>	
City Eastman	State WI	Zip Code 54626-7122	<input type="checkbox"/> Memo Item Transaction ID: VPEPCA1M6Q2
Purpose of Disbursement Refund of Individual Contribution		Category/ Type <input type="text"/>	
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) Elizabeth Trautsch		Date of Disbursement <input type="text" value="03"/> <input type="text" value="01"/> <input type="text" value="2016"/>	
Mailing Address 110 N Main St		Amount of Each Receipt this Period <input type="text" value="25.00"/>	
City Eastman	State WI	Zip Code 54626-7122	<input type="checkbox"/> Memo Item Transaction ID: VPEPCA1BTZ4
Purpose of Disbursement Refund of individual contribution		Category/ Type <input type="text"/>	
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:			

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1050.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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