

**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)

| | | | |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Georgians for Isakson

| | | |
|---------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Ponte Vedra Inn | | Date of Disbursement MM / DD / YYYY 07 / 11 / 2015 |
| Mailing Address 200 Ponte Vedra Blvd | | Amount of Each Disbursement this Period 1710.34 Transaction ID : B94C6E62F959243ACB29 |
| City Ponte Vedra | State FL | |
| Zip Code 32082-1810 | Purpose of Disbursement Catering Services | [MEMO ITEM] |
| 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) | |
| State: District: | | |

| | | |
|---------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. The Monocle | | Date of Disbursement MM / DD / YYYY 07 / 13 / 2015 |
| Mailing Address 107 D St NE | | Amount of Each Disbursement this Period 48.43 Transaction ID : BEB9E885564BC4BF0974 |
| City Washington | State DC | |
| Zip Code 20002-5657 | Purpose of Disbursement Business Meals | [MEMO ITEM] |
| 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) | |
| State: District: | | |

| | | |
|---------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) c. Bobby Van's Restaurant | | Date of Disbursement MM / DD / YYYY 07 / 15 / 2015 |
| Mailing Address 809 15th St NW | | Amount of Each Disbursement this Period 2377.91 Transaction ID : B7239424AB8D946F5BC4 |
| City Washington | State DC | |
| Zip Code 20005-2203 | Purpose of Disbursement Business Meals and Catering Services | [MEMO ITEM] |
| 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) | |
| State: District: | | |

| | |
|----------------------------------------------------------|------|
| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

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