

**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 186 OF 376	
	<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 Boehner

Full Name (Last, First, Middle Initial) A. NORBERT DICKMAN		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address 6101 HOLIDAY HILL RD.		Amount of Each Disbursement this Period 2700.00 Transaction ID : SBGR20.4936
City MIDLAND State TX Zip Code 79707	Purpose of Disbursement GENERAL 2016 CONTRIBUTION REFUND	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. MARY JANE DODDRIDGE		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address 1592 GARLAND AVENUE		Amount of Each Disbursement this Period 1400.00 Transaction ID : SBGR20.4901
City TUSTIN State CA Zip Code 92780	Purpose of Disbursement GENERAL 2016 CONTRIBUTION REFUND	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. EDWARD J. DONAGHY		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address 2363 S. CEDAR AVENUE		Amount of Each Disbursement this Period 2600.00 Transaction ID : SBGR20.4706
City FRESNO State CA Zip Code 93725	Purpose of Disbursement GENERAL 2016 CONTRIBUTION REFUND	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6700.00
TOTAL This Period (last page this line number only).....	