

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

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Jones Walker L.L.P.

Full Name (Last, First, Middle Initial)

A. MONTANANS FOR TESTER

Mailing Address PO BOX 1135

City HELENA State MT Zip Code 59624

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: MT District: 00

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 27 / 2015

Transaction ID : SB23.8998

Amount of Each Disbursement this Period

1000.00

Category/
Type

Full Name (Last, First, Middle Initial)

B. PERLMUTTER FOR CONGRESS

Mailing Address 3440 YOUNGFIELD STREET
#264

City WHEAT RIDGE State CO Zip Code 80033

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: CO District: 07

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 10 / 2015

Transaction ID : SB23.9196

Amount of Each Disbursement this Period

1000.00

Category/
Type

Full Name (Last, First, Middle Initial)

C. RALPH ABRAHAM FOR CONGRESS

Mailing Address P.O. BOX 270

City ARCHIBALD State LA Zip Code 71218

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: LA District: 05

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 16 / 2015

Transaction ID : SB23.9203

Amount of Each Disbursement this Period

1000.00

Category/
Type

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3000.00