

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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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NAME OF COMMITTEE (In Full)

Comstock for Congress

Full Name (Last, First, Middle Initial)

A. Finley, Julie, , ,Mailing Address 1881 N Nash St
Unit 504City
ArlingtonState
VAZip Code
22209-1564Purpose of Disbursement
Refund: Contribution Refund

010

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		25		2018

FEC Identification Number

C

Amount of Each Disbursement this Period

400.00

Transaction ID : B56F4A3ACA919440B966

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Kaplan, Joel, , ,

Mailing Address 3809 Leland St

City
Chevy ChaseState
MDZip Code
20815-4901Purpose of Disbursement
Refund: Contribution Refund

010

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		25		2018

FEC Identification Number

C

Amount of Each Disbursement this Period

2700.00

Transaction ID : B106299DC0C954914BE9

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Sinquefield, Rex, , ,

Mailing Address 9 Hortense Pl

City
Saint LouisState
MOZip Code
63108-1207Purpose of Disbursement
Refund: Contribution Refund

010

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		30		2018

FEC Identification Number

C

Amount of Each Disbursement this Period

2700.00

Transaction ID : B1625CAC1C3E14656B77

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

5800.00

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