

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

PAGE 43436 OF 43520

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

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NAME OF COMMITTEE (In Full)

**Stop Republicans**

Full Name (Last, First, Middle Initial)

**A. Baumheier, Edward, , ,**

Mailing Address 601 Sopris Ave

City  
CarbondaleState  
COZip Code  
81623-1938Purpose of Disbursement  
actblue refund

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		22		2020

FEC Identification Number

**C****Transaction ID : VTQ179Y2TG**

Amount of Each Disbursement this Period

600.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Nussbaum, Carole, , ,**

Mailing Address 8 Danbury Ct

City  
SuffernState  
NYZip Code  
10901-8027Purpose of Disbursement  
actblue refund

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2020

FEC Identification Number

**C****Transaction ID : VTQ179Y38G**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Morgenstern, Rosetta, , ,**Mailing Address 16946 Burbank Blvd  
Apt 104City  
EncinoState  
CAZip Code  
91316-1870Purpose of Disbursement  
actblue refund

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2020

FEC Identification Number

**C****Transaction ID : VTQ179XWF**

Amount of Each Disbursement this Period

300.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1900.00