

**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"/> 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

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

Full Name (Last, First, Middle Initial)

A. PATRIOTS LEADING A MAJORITY

Mailing Address 50 S PROVIDENCE ROAD

City MEDIA State PA Zip Code 19063

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 28 / 2017

FEC Identification Number

C C00526046

Transaction ID : SB23.9789

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. PRAIRIE POLITICAL ACTION COMMITTEE

Mailing Address P.O. BOX 2002

City SPRINGFIELD State IL Zip Code 62705

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 25 / 2017

FEC Identification Number

C C00347195

Transaction ID : SB23.9740

Amount of Each Disbursement this Period

1000.00

Memo Item

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: 2018 Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 08 / 2017

FEC Identification Number

C C00563940

Transaction ID : SB23.9754

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

3000.00