

**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 48 OF 49
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Collins for Congress

Full Name (Last, First, Middle Initial) A. Committee to Elect Tommy Benton		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2015
Mailing Address 177 Martin St		Amount of Each Disbursement this Period 500.00 Transaction ID : B35488789C4044E63AC4
City Jefferson	State GA Zip Code 30549-1077	
Purpose of Disbursement Contribution (State/Local Committee)		Category/ Type
Candidate Name		
Office Sought:	Disbursement For: 2016	
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State:	District:	

Full Name (Last, First, Middle Initial) B. CARLOS CURBELO CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2015
Mailing Address 8724 SW 72ND ST		Amount of Each Disbursement this Period 1000.00 Transaction ID : B5BE80C50F610479597C
City Miami	State FL Zip Code 33173-3512	
Purpose of Disbursement Contribution		Category/ Type
Candidate Name Carlos Curbelo		
Office Sought:	Disbursement For: 2016	
<input checked="" type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State: FL	District: 26	

Full Name (Last, First, Middle Initial) c. Gasaway for State House		Date of Disbursement M M / D D / Y Y Y Y 11 / 11 / 2015
Mailing Address PO Box 700		Amount of Each Disbursement this Period 250.00 Transaction ID : B20DC4439B9904A63BD1
City Homer	State GA Zip Code 30547-0700	
Purpose of Disbursement Contribution (State/Local Committee)		Category/ Type
Candidate Name		
Office Sought:	Disbursement For: 2016	
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	