

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

|   |   |             |
|---|---|-------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 9 OF 9 |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |             |

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NAME OF COMMITTEE (In Full)  
**ENRIQUE TARRIO FOR CONGRESS**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. RFT Action LLC</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 05 / 2020 |
| Mailing Address 325 Mirasol Ln  |  | FEC Identification Number<br>C                                |
| City<br>Orlando   | State<br>FL  | Zip Code<br>32828   |
| Purpose of Disbursement<br>Campaign Management Services   |  | Amount of Each Disbursement this Period<br>2850.00            |
| Candidate Name  |  | Transaction ID : SB17.4426                                    |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item                            |
| State: _____  | District: _____  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B.</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y |
| Mailing Address   |  | FEC Identification Number<br>C              |
| City  | State  | Zip Code                                    |
| Purpose of Disbursement   |  | Amount of Each Disbursement this Period     |
| Candidate Name  |  | <input type="checkbox"/> Memo Item          |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: _____  | District: _____  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C.</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y |
| Mailing Address   |  | FEC Identification Number<br>C              |
| City  | State  | Zip Code                                    |
| Purpose of Disbursement   |  | Amount of Each Disbursement this Period     |
| Candidate Name  |  | <input type="checkbox"/> Memo Item          |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: _____  | District: _____  |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 2850.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 3839.80 |