

**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"/> 24	<input type="checkbox"/> 25	<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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Wawa, Inc. Political Action Committee

Full Name (Last, First, Middle Initial)

A. RICHARD BURR COMMITTEE; THE

Mailing Address POST OFFICE BOX 5928

City WINSTON-SALEM State NC Zip Code 27113

Purpose of Disbursement
Fundraiser

Candidate Name
RICHARD BURR

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: NC District: 00

Date of Disbursement

/ /

Transaction ID : SB23.22424

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. RICHARD E NEAL FOR CONGRESS COMMITTEE

Mailing Address 76 MAGNOLIA TERRACE

City SPRINGFIELD State MA Zip Code 01108

Purpose of Disbursement
Fundraiser

Candidate Name
RICHARD E NEAL

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: MA District: 01

Date of Disbursement

/ /

Transaction ID : SB23.22418

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. RYAN COSTELLO FOR CONGRESS

Mailing Address PO BOX 3154

City WEST CHESTER State PA Zip Code 19381

Purpose of Disbursement
Fundraiser

Candidate Name
RYAN COSTELLO

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: PA District: 06

Date of Disbursement

/ /

Transaction ID : SB23.22410

Amount of Each Disbursement this Period

Memo Item

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

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