

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

PAGE 48 OF 96

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

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NAME OF COMMITTEE (In Full)
Hoosiers for Rokita, Inc.

Full Name (Last, First, Middle Initial) A. Krampen, James, J, Mr., Jr.				Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2018	
Mailing Address 7101 Kennesaw Cir					
City Brownsburg		State IN	Zip Code 46112-7728		
Purpose of Disbursement Refund: Refund of 2018 General Election contribution				<input type="checkbox"/>	
Candidate Name				Category/ Type	
Office Sought:		Disbursement For: 2018			
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State:		District:		Amount of Each Disbursement this Period 300.00 Transaction ID : B711F4B60949E41CB955 <input type="checkbox"/> Memo Item	
Full Name (Last, First, Middle Initial) B. Rohrman, Cathryn, Nicole, Mrs.,				Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2018	
Mailing Address 517 Shady Creek Dr					
City Lafayette		State IN	Zip Code 47905-8409		
Purpose of Disbursement Refund: Refund of 2018 General Election contribution				<input type="checkbox"/>	
Candidate Name				Category/ Type	
Office Sought:		Disbursement For: 2018			
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State:		District:		Amount of Each Disbursement this Period 2700.00 Transaction ID : B3A38F163E5E94C33B7A <input type="checkbox"/> Memo Item	
Full Name (Last, First, Middle Initial) C. Goldman, Marc, Stanley, Mr.,				Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2018	
Mailing Address 1500 S Ocean Blvd Apt S501					
City Boca Raton		State FL	Zip Code 33432-8523		
Purpose of Disbursement Refund: Refund of 2018 General Election contribution				<input type="checkbox"/>	
Candidate Name				Category/ Type	
Office Sought:		Disbursement For: 2018			
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State:		District:		Amount of Each Disbursement this Period 2700.00 Transaction ID : B141B0893FF2242848CC <input type="checkbox"/> Memo Item	
SUBTOTAL of Disbursements This Page (optional).....▶				5700.00	
TOTAL This Period (last page this line number only).....▶					