

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

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<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. Chazen, Stephen, , Mr.,				Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2018	
Mailing Address 4515 Magnolia St					
City Bellaire		State TX	Zip Code 77401-4230		
Purpose of Disbursement Refund: Refund of 2018 General Election contribution				<input type="checkbox"/>	
Candidate Name				Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:					
				FEC Identification Number C	
				Amount of Each Disbursement this Period 2700.00	
				Transaction ID : BD2C367B7F45645CD898	
				<input type="checkbox"/> Memo Item	
Full Name (Last, First, Middle Initial) B. Busch, Virginia, L, Mrs.,				Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2018	
Mailing Address PO Box 935					
City Saint Peters		State MO	Zip Code 63376-0016		
Purpose of Disbursement Refund: Refund of 2018 General Election contribution				<input type="checkbox"/>	
Candidate Name				Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:					
				FEC Identification Number C	
				Amount of Each Disbursement this Period 1900.00	
				Transaction ID : B32574447BAB54E4C8E2	
				<input type="checkbox"/> Memo Item	
Full Name (Last, First, Middle Initial) C. Scheumann, June, M, Mrs.,				Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2018	
Mailing Address 34 Thise Ct					
City Lafayette		State IN	Zip Code 47905-2139		
Purpose of Disbursement Refund: Refund of 2018 General Election contribution				<input type="checkbox"/>	
Candidate Name				Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:					
				FEC Identification Number C	
				Amount of Each Disbursement this Period 2700.00	
				Transaction ID : B5A247BE090354D7BBD6	
				<input type="checkbox"/> Memo Item	
SUBTOTAL of Disbursements This Page (optional).....▶				7300.00	
TOTAL This Period (last page this line number only).....▶					