

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse 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. Kirke, Gerald, M, Mr.,				Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2018	
Mailing Address 1860 Glen Oaks Dr					
City West Des Moines		State IA	Zip Code 50266-6608		
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 : B49BEBBE283D34766A4E	
				<input type="checkbox"/> Memo Item	
Full Name (Last, First, Middle Initial) B. Dick, Rollin, M, Mr.,				Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2018	
Mailing Address 4 Woodard Pl					
City Zionsville		State IN	Zip Code 46077-8189		
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 1800.00	
				Transaction ID : B6A69D7C294314AC7916	
				<input type="checkbox"/> Memo Item	
Full Name (Last, First, Middle Initial) C. Ward, Michael, J, Mr.,				Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2018	
Mailing Address 4625 4th Street South					
City Arlington		State VA	Zip Code 22204-1320		
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 1000.00	
				Transaction ID : B6D7221FB581D4919BDF	
				<input type="checkbox"/> Memo Item	
SUBTOTAL of Disbursements This Page (optional).....▶				5500.00	
TOTAL This Period (last page this line number only).....▶					