

**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)

Andrea Ramsey for Congress

Full Name (Last, First, Middle Initial)

**A. Meyer, Dennis, , ,**

Mailing Address 10380 S Clubside Ct

City  
OlatheState  
KSZip Code  
66061-7314Purpose of Disbursement  
Contribution Refund

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	3		2	0	1	8

FEC Identification Number

C

Amount of Each Disbursement this Period

2000.00

Transaction ID : VTPYZ9QB3Q0

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Meyer, Julia, , ,**

Mailing Address 10380 S Clubside Ct

City  
OlatheState  
KSZip Code  
66061-7314Purpose of Disbursement  
Contribution Refund

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	3		2	0	1	8

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : VTPYZ9QB3P2

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Moore, Lester, , ,**

Mailing Address 503 Sunset Pl

City  
AtchisonState  
KSZip Code  
66002-1611Purpose of Disbursement  
Contribution Refund

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	3		2	0	1	8

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : VTPYZ9QB366

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3250.00

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