

**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)

John Carter for Congress

Full Name (Last, First, Middle Initial)

A. Kubota, Nancy, , ,

Mailing Address 912 Graynold Ave

City
GlendaleState
CAZip Code
91202Purpose of Disbursement
refund of 10/23/19 CC contribution

010

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	9		2	0	2	0

FEC Identification Number

C

Amount of Each Disbursement this Period

25.00

Transaction ID : 0033037

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Munschauer, Lyman, , ,

Mailing Address 320 First St SE

City
WashingtonState
DCZip Code
20002Purpose of Disbursement
Refund on 7/25 7/30 7/31 8/20/19 CC Cont

010

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	6		2	0	2	0

FEC Identification Number

C

Amount of Each Disbursement this Period

4.00

Transaction ID : 0033042

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Cesped, Ricardo, , ,

Mailing Address 970 Wedge Court

City
Incline VillageState
NVZip Code
89451Purpose of Disbursement
Refund of 12/27/19 CC contribution

010

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : 0033043

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

279.00

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