

**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 4196 OF 4237

<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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

SCALISE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. MCHUGH, CATHLEEN, , ,

Mailing Address 1112 S. GILPIN STREET

City
DENVERState
COZip Code
80210Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
11	14	2018

FEC Identification Number

C

Amount of Each Disbursement this Period

100.00

Transaction ID : SB20A.I15910

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MILLER, DONALD, , ,

Mailing Address 16480 UPPER 21ST ST S

City
LAKELANDState
MNZip Code
55043Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
11	14	2018

FEC Identification Number

C

Amount of Each Disbursement this Period

20.00

Transaction ID : SB20A.I15887

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MILLS, BRUCE, , ,Mailing Address 8253 PARKSIDE DRIVE
4WCity
SAINT LOUISState
MOZip Code
63105Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
11	14	2018

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB20A.I15919

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

1120.00

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