

**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 145 OF 179

<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)

Graham for Congress

Full Name (Last, First, Middle Initial)

**A. Logan, Sarah, , ,**

Mailing Address 3224 Whitman Way

City  
TallahasseeState  
FLZip Code  
32311-3316Purpose of Disbursement  
Contribution Refund

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	6		2	0	1	6

FEC Identification Number

C

Amount of Each Disbursement this Period

2700.00

Transaction ID : VN7JN9VSWY6

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Maher, Michael, , ,**Mailing Address PO Box 2146  
Ste 200City  
Winter ParkState  
FLZip Code  
32790-2146Purpose of Disbursement  
Contribution Refund

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	6		2	0	1	6

FEC Identification Number

C

Amount of Each Disbursement this Period

2700.00

Transaction ID : VN7JN9VSX77

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. Margules, Herman, , ,**

Mailing Address 4442 Hazleton Ln

City  
WellingtonState  
FLZip Code  
33449-8631Purpose of Disbursement  
Contribution Refund

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	1	6

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : VN7JN9VXV32

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

5900.00

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