

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 27	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Frank Wolf

Full Name (Last, First, Middle Initial) A. Suzanne Scholte for Congress		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2014
Mailing Address 6312 Seven Corners Center # 167		Amount of Each Disbursement this Period 500 Transaction ID : B-E-829662
City Falls Church State VA Zip Code 22044-2409	Purpose of Disbursement Campaign Contribution 011 Category/Type	
Candidate Name Suzanne Scholte	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Assoc. of Catholic Colleges & Universities		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2014
Mailing Address 1 Dupont Circle NW Suite 650		Amount of Each Disbursement this Period 1000 Transaction ID : B-E-829631
City Washington State DC Zip Code 20036-1134	Purpose of Disbursement Charitable Donation: Charitable Donation 012 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Belle Grove Plantation		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2014
Mailing Address PO Box 537		Amount of Each Disbursement this Period 500 Transaction ID : B-E-829632
City Middletown State VA Zip Code 22645-0537	Purpose of Disbursement Charitable Donation: Charitable Donation 012 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	