

**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 44 OF 51	
	<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)
LUKE MESSER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FRIENDS OF MATT GAETZ		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2016
Mailing Address 610 S. BOULEVARD		FEC Identification Number C
City TAMPA	State FL	Zip Code 33606
Purpose of Disbursement CONTRIBUTION	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 1000.00	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB21.10005
State: FL District: 01	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. FRIENDS OF NEAL DUNN		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2016
Mailing Address 2640A MITCHAM DRIVE		FEC Identification Number C
City TALLAHASSEE	State FL	Zip Code 32308
Purpose of Disbursement CONTRIBUTION	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 1000.00	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB21.10001
State: FL District: 02	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. FRIENDS OF PAUL MITCHELL		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2016
Mailing Address 66860 VAN DYKE ROAD		FEC Identification Number C
City WASHINGTON	State MI	Zip Code 48095
Purpose of Disbursement CONTRIBUTION	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 1000.00	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB21.10020
State: MI District: 10	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	3000.00
TOTAL This Period (last page this line number only).....▶	