

**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 30 OF 35			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
DUNBAR FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. Butler, Brandon, , ,			Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2018		
Mailing Address 1251 Battlefield Rd					
City Goode	State VA	Zip Code 24556	FEC Identification Number C 00661116		
Purpose of Disbursement Refund of general contribution			Amount of Each Disbursement this Period 2700.00		
Candidate Name DUNBAR FOR CONGRESS, INC.		Category/ Type	Transaction ID : SB20A.5163		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Convention		Memo Item <input type="checkbox"/>		
State: VA	District: 06				

Full Name (Last, First, Middle Initial) B. Coors, Jeffrey, , ,			Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2018		
Mailing Address 16126 W 32nd Ave					
City Golden	State CO	Zip Code 80401	FEC Identification Number C 00661116		
Purpose of Disbursement Refund of general contribution			Amount of Each Disbursement this Period 2700.00		
Candidate Name DUNBAR FOR CONGRESS, INC.		Category/ Type	Transaction ID : SB20A.5162		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Convention		Memo Item <input type="checkbox"/>		
State: VA	District: 06				

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address					
City	State	Zip Code	FEC Identification Number C		
Purpose of Disbursement			Amount of Each Disbursement this Period		
Candidate Name		Category/ Type	Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Convention				
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....▶	5400.00
TOTAL This Period (last page this line number only).....▶	5400.00