

**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 20			
	<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)
BOB GOODLATTE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Republican Party of Virginia - RPV			Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2018		
Mailing Address 115 East Grace St.					
City Richmond	State VA	Zip Code 23219-1741	FEC Identification Number C		
Purpose of Disbursement Contribution		Category/ Type	Amount of Each Disbursement this Period 2500.00		
Candidate Name		Transaction ID : BBDCB37EE5D9847BBA8B			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State:	District:	<input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) B. Republican Party of Virginia - RPV			Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2018		
Mailing Address 115 East Grace St.					
City Richmond	State VA	Zip Code 23219-1741	FEC Identification Number C		
Purpose of Disbursement Contribution		Category/ Type	Amount of Each Disbursement this Period 2500.00		
Candidate Name		Transaction ID : BC6E12BEDEAE84C05917			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State:	District:	<input type="checkbox"/> Memo Item			

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		Category/ Type	Amount of Each Disbursement this Period		
Candidate Name		<input type="checkbox"/> Memo Item			
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) ▼			
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	5000.00