

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<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)

Vicky Hartzler for Congress

Full Name (Last, First, Middle Initial)

**A. Egan, Donna, R, ,**

Mailing Address 4655 Osage Beach Pkwy Ste A

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		20		2018

City  
Osage BeachState  
MOZip Code  
65065-2664

FEC Identification Number

C

Purpose of Disbursement  
Refund: Refund of contribution over the limit

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

700.00

Transaction ID : BADA5DC242FC74F5E9E9

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. Egan, Michael, , ,**

Mailing Address 4655 Osage Beach Pkwy Ste A

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		20		2018

City  
Osage BeachState  
MOZip Code  
65065-2664

FEC Identification Number

C

Purpose of Disbursement  
Refund: Refund of contribution over the limit

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

700.00

Transaction ID : BFFB5F399D6594A66B5F

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

1400.00

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

1400.00