

**SCHEDULE B (FEC Form 3X)  
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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Stop Republicans**

Full Name (Last, First, Middle Initial)

**A. White, Kenneth, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		20		2019

Mailing Address 1775 E Palm Canyon Dr  
Ste 110-151City  
Palm SpringsState  
CAZip Code  
92264-1613Purpose of Disbursement  
actblue refund

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : VTQ179XGB5**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Raffalovich, Lawrence, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		30		2019

Mailing Address 40 Autumn Dr

City  
SlingerlandsState  
NYZip Code  
12159-9356Purpose of Disbursement  
actblue refund

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : VTQ179XG86**

Amount of Each Disbursement this Period

165.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Lichtenwald, Grace, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2019

Mailing Address 201 Grand View Dr

City  
WestminsterState  
SCZip Code  
29693-3940Purpose of Disbursement  
actblue refund

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : VTQ179X647**

Amount of Each Disbursement this Period

300.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

965.00

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