

**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 5 OF 7
	<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)
Duncan D. Hunter for Congress

Full Name (Last, First, Middle Initial) A. HINMAN, ROY, H., , II		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2021
Mailing Address 100 ARRICOLA AVE.		FEC Identification Number C
City ST. AUGUSTINE	State FL	Zip Code 32080
Purpose of Disbursement UNCASHED, STALE CHECK 06/19/2019		Amount of Each Disbursement this Period - 200.00
Candidate Name		Category/Type
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) ▼	Transaction ID : SB20A.I11416
State: District:		<input type="checkbox"/> Memo Item DISGORGED TO US TREASURY 04/28/2021

Full Name (Last, First, Middle Initial) B. NGUYEN DEVELOPMENT LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2021
Mailing Address 2704 CYPRESS CT.		FEC Identification Number C
City ORLANDO	State FL	Zip Code 32825
Purpose of Disbursement UNCASHED, STALE CHECK 06/19/2019		Amount of Each Disbursement this Period - 500.00
Candidate Name		Category/Type
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) ▼	Transaction ID : SB20A.I11417
State: District:		<input type="checkbox"/> Memo Item DISGORGED TO US TREASURY 04/28/2021

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		Category/Type
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) ▼	Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	- 700.00
TOTAL This Period (last page this line number only).....▶	- 700.00