

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

PAGE 32765 OF 33319

<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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

SCALISE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. REX, PAUL, , ,

Mailing Address 5709 STILL BROOKE NW

City
ALBUQUERQUEState
NMZip Code
87120Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	3		2	0	2	0

FEC Identification Number

C

Amount of Each Disbursement this Period

10.00

Transaction ID : SB20A.I23988

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RICE, CAROLYN, , ,

Mailing Address 112 LEXUS DRIVE

City
HURRICANEState
WVZip Code
25526Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	3		2	0	2	0

FEC Identification Number

C

Amount of Each Disbursement this Period

35.00

Transaction ID : SB20A.I23641

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SHELTON, GEORGE, , ,

Mailing Address 4124 KINGSFERRY DRIVE

City
ARLINGTONState
TXZip Code
76016Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	3		2	0	2	0

FEC Identification Number

C

Amount of Each Disbursement this Period

35.00

Transaction ID : SB20A.I23913

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

80.00

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