

**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)

**SCALISE FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. KNUDSON, MARK, , ,**

Mailing Address W944 SHOREWOOD DR.

City  
EAST TROYState  
WIZip Code  
53120Purpose 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		1	7		2	0	2	0

FEC Identification Number

C

Amount of Each Disbursement this Period

25.00

Transaction ID : SB20A.I24105

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MARTINSEN, RALPH, , ,**Mailing Address 11600 COURT OF PALMS  
503City  
FORT MYERSState  
FLZip Code  
33908Purpose 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		1	7		2	0	2	0

FEC Identification Number

C

Amount of Each Disbursement this Period

50.00

Transaction ID : SB20A.I23647

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NOREM, BONNIE, , ,**

Mailing Address 8957 YELLOW DAISY PL

City  
LORTONState  
VAZip Code  
22079Purpose 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		1	7		2	0	2	0

FEC Identification Number

C

Amount of Each Disbursement this Period

50.00

Transaction ID : SB20A.I24076

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

125.00

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