

**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 33059 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

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NAME OF COMMITTEE (In Full)

**SCALISE FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. WELLS, JAMES, , ,**

Mailing Address 329BLACK MATT ROAD

City  
DOUGLASSVILLEState  
PAZip Code  
19518Purpose of Disbursement  
REFUND OF CONTRIBUTION

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M M	D D	Y Y Y Y
02	27	2020

FEC Identification Number

C

Amount of Each Disbursement this Period

50.00

Transaction ID : SB20A.I25083

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AFELL, LAUREN, , ,**

Mailing Address 1998 ZOLLINGER ROAD

City  
COLUMBUSState  
OHZip Code  
43221Purpose of Disbursement  
REFUND OF CONTRIBUTION

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M M	D D	Y Y Y Y
02	28	2020

FEC Identification Number

C

Amount of Each Disbursement this Period

25.00

Transaction ID : SB20A.I24859

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ASHY, RAMON, , ,**

Mailing Address 655 PELHAM RD

City  
GREENVILLEState  
SCZip Code  
29615Purpose of Disbursement  
REFUND OF CONTRIBUTION

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M M	D D	Y Y Y Y
02	28	2020

FEC Identification Number

C

Amount of Each Disbursement this Period

100.00

Transaction ID : SB20A.I24221

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

175.00

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