

**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. LARSEN, ROY, , ,Mailing Address 1930 E 12TH ST
123City
CASPERState
WYZip Code
82601Purpose 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
03	22	2020

FEC Identification Number

C

Amount of Each Disbursement this Period

35.00

Transaction ID : SB20A.I24824

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MACRAE, MARY, , ,

Mailing Address 2525 N PEARL STREET

City
DALLASState
TXZip Code
75201Purpose 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
03	22	2020

FEC Identification Number

C

Amount of Each Disbursement this Period

800.00

Transaction ID : SB20A.I25324

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MORSE, JANEY, , ,

Mailing Address 3010 S VOSS RD

City
FREEPORTState
ILZip Code
61032Purpose 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
03	22	2020

FEC Identification Number

C

Amount of Each Disbursement this Period

400.00

Transaction ID : SB20A.I25321

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

1235.00

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