

**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)

People for Ben

Full Name (Last, First, Middle Initial)

**A. Howell, Diana, , ,**

Mailing Address 6620 Timberbrook Ln

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		13		2020

City  
SpotsylvaniaState  
VAZip Code  
22551-6020

FEC Identification Number

C

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

25.00

Transaction ID : 500663023

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. Presant, Laura, , ,**

Mailing Address 11 Stonehenge Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		20		2020

City  
Great NeckState  
NYZip Code  
11023-1007

FEC Identification Number

C

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

16.00

Transaction ID : 500663053

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. Patterson, Wes, , ,**

Mailing Address PO Box 3680

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		13		2020

City  
TaosState  
NMZip Code  
87571-3680

FEC Identification Number

C

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

25.00

Transaction ID : 500667053

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

66.00

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