

**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. Coble, William, , ,

Mailing Address 2300 S Shore Dr SE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	2	0

City
Saint PetersburgState
FLZip Code
33705-3329

FEC Identification Number

C

Purpose of Disbursement
Contribution Refund

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1000.00

Transaction ID : 500655955

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. Berger, Toby, , ,

Mailing Address 810 Gilliams Mountain Rd

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	4		2	0	2	0

City
CharlottesvilleState
VAZip Code
22903-9756

FEC Identification Number

C

Purpose of Disbursement
Contribution Refund

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

3600.00

Transaction ID : 500664965

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. Funk, Celia, , ,

Mailing Address 14053 SE Taylor St

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	2	0

City
PortlandState
ORZip Code
97233-2257

FEC Identification Number

C

Purpose of Disbursement
Contribution Refund

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

5.00

Transaction ID : 500655965

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

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

4605.00

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