

**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)

Sharice for Congress

Full Name (Last, First, Middle Initial)

**A. Mullis, Jeremy, , ,**Mailing Address 155 Stribling Ave  
# ACity  
CharlottesvilleState  
VAZip Code  
22903-2940Purpose of Disbursement  
Contribution Refund

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	2	/	2	0	1	9

FEC Identification Number

C

Amount of Each Disbursement this Period

1200.00

Transaction ID : 500103141

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Newman, Kathleen, , ,**

Mailing Address 6315 W 107Th St

City  
Overland ParkState  
KSZip Code  
66212-1809Purpose of Disbursement  
Contribution Refund

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	1	9

FEC Identification Number

C

Amount of Each Disbursement this Period

550.00

Transaction ID : 500103150

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Resnick, Bill, , ,**

Mailing Address 500 Westbourne Dr

City  
West HollywoodState  
CAZip Code  
90048-1914Purpose of Disbursement  
Contribution Refund

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	6	/	2	0	1	9

FEC Identification Number

C

Amount of Each Disbursement this Period

300.00

Transaction ID : 500103126

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

2050.00

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