

**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 89 OF 92

<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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Ron Desantis for Florida

Full Name (Last, First, Middle Initial)

A. LANGER, HARRY, , ,

Mailing Address 2350 DORINA DR.

City
NORTHFIELDState
ILZip Code
60093Purpose of Disbursement
REISSUED REFUND

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	1		2	0	1	7

FEC Identification Number

C

Amount of Each Disbursement this Period

2700.00

Transaction ID : SB20A.I4593

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MCINERNEY, PAULA, , ,

Mailing Address 2 MANITOU CT

City
WESTPORTState
CTZip Code
06880Purpose of Disbursement
VOID: ORIG. ISSUED 8/20/2016

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	1		2	0	1	7

FEC Identification Number

C

Amount of Each Disbursement this Period

- 2700.00

Transaction ID : SB20A.I4590

☐ Memo Item REISSUED 5/1/2017.

Full Name (Last, First, Middle Initial)

C. MCINERNEY, PAULA, , ,

Mailing Address 2 MANITOU CT

City
WESTPORTState
CTZip Code
06880Purpose of Disbursement
REISSUED REFUND

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	1		2	0	1	7

FEC Identification Number

C

Amount of Each Disbursement this Period

2700.00

Transaction ID : SB20A.I4591

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

2700.00

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