

**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)

Poe for Congress

Full Name (Last, First, Middle Initial)

A. Lanier, Mark, , Mr.,

Mailing Address PO Box 691505

Date of Disbursement

M M	D D	Y Y Y Y
12	18	2017

City

Houston

State

TX

Zip Code

77269-1505

FEC Identification Number

C

Purpose of Disbursement
Refund: Contribution Refund

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

2700.00

Transaction ID : BAB4BF07E272743E08D9

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. Tryon, Warren, , ,

Mailing Address 216 9th St SE

Date of Disbursement

M M	D D	Y Y Y Y
12	18	2017

City

Washington

State

DC

Zip Code

20003-2111

FEC Identification Number

C

Purpose of Disbursement
Refund: Contribution Refund

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

250.00

Transaction ID : BE15363EFAD8D4D05BC4

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

c. Bockorny, David, , ,

Mailing Address 3101 S Bishop Jones Pl.

Date of Disbursement

M M	D D	Y Y Y Y
12	18	2017

City

Sioux Falls

State

SD

Zip Code

57103-4669

FEC Identification Number

C

Purpose of Disbursement
Refund: Contribution Refund

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

500.00

Transaction ID : BB19F7FC6465D426C9AE

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

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

3450.00

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