

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 207 / 662

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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)
MARCO RUBIO FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. Jeffrey P. Feingold		Date of Disbursement MM / DD / YYYY 05 / 13 / 2016
Mailing Address 200 W. Cypress Creek Road		Transaction ID : SB28A.7408
City Fort Lauderdale	State FL	
Zip Code 33309	Purpose of Disbursement Refund 2016 General	Amount of Each Disbursement this Period 2300.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. Elizabeth N. Feld		Date of Disbursement MM / DD / YYYY 05 / 13 / 2016
Mailing Address 38 Wendt Avenue		Transaction ID : SB28A.7410
City Larchmont	State NY	
Zip Code 10538	Purpose of Disbursement Refund 2016 General	Amount of Each Disbursement this Period 200.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) c. Joel D. Feld		Date of Disbursement MM / DD / YYYY 05 / 13 / 2016
Mailing Address 38 Wendt Avenue		Transaction ID : SB28A.7412
City Larchmont	State NY	
Zip Code 10538	Purpose of Disbursement Refund 2016 General	Amount of Each Disbursement this Period 2500.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 5000.00

Total This Period (last page this line number only).....