

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<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) <b>A. Donna P. Zoley</b>		Date of Disbursement MM / DD / YYYY 05 / 13 / 2016
Mailing Address 1515 Fan Palm Rd		<b>Transaction ID : SB28A.9942</b>
City Boca Raton	State FL	
Purpose of Disbursement Refund 2016 General	Candidate Name	Amount of Each Disbursement this Period 2700.00
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>B. George C. Zoley</b>		Date of Disbursement MM / DD / YYYY 05 / 13 / 2016
Mailing Address 1515 Fan Palm Road		<b>Transaction ID : SB28A.9944</b>
City Boca Raton	State FL	
Purpose of Disbursement Refund 2016 General	Candidate Name	Amount of Each Disbursement this Period 2600.00
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>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		
City	State	
Purpose of Disbursement	Candidate Name	Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

**Subtotal Of Receipts This Page** (optional)..... 5300.00

**Total This Period** (last page this line number only)..... 3402174.29