

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 OF 7	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF BUCK MCKEON

Full Name (Last, First, Middle Initial) A. FRIENDS OF JIM INHOFE		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2018
Mailing Address PO BOX 13300		FEC Identification Number C C00258244
City OKLAHOMA CITY	State OK	Zip Code 73113
Purpose of Disbursement Contribution	<input type="checkbox"/> 011	Amount of Each Disbursement this Period 1000.00
Candidate Name FRIENDS OF BUCK MCKEON	Category/ Type	Transaction ID : SB21.17144
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: CA District: 25		

Full Name (Last, First, Middle Initial) B. FRIENDS OF JIM INHOFE		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2018
Mailing Address PO BOX 13300		FEC Identification Number C C00258244
City OKLAHOMA CITY	State OK	Zip Code 73113
Purpose of Disbursement Contribution	<input type="checkbox"/> 011	Amount of Each Disbursement this Period 1000.00
Candidate Name FRIENDS OF BUCK MCKEON	Category/ Type	Transaction ID : SB21.17145
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: CA District: 25		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement	<input type="checkbox"/>	Amount of Each Disbursement this Period
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	2000.00