

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

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                             |                              |
|------------------------------|------------------------------|--|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c           | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**EMGAGE FEDERAL POLITICAL ACTION COMMITTEE**

**A. CARSON, ANDRE, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1863

City INDIANAPOLIS State IN Zip Code 46206

Purpose of Disbursement Contribution

Candidate Name **CARSON, ANDRE, , ,**

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) ▼

State: IN District: 07

Date of Disbursement: 06 / 01 / 2020

FEC Identification Number: C H8IN07184

Transaction ID : SB23.4873

Amount of Each Disbursement this Period: 1500.00

Memo Item

**B. DEPASQUALE FOR PA 10**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1822

City YORK State PA Zip Code 17405

Purpose of Disbursement Campaign Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) ▼

State: PA District: 10

Date of Disbursement: 05 / 12 / 2020

FEC Identification Number: C C00710533

Transaction ID : SB23.4871

Amount of Each Disbursement this Period: 2500.00

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

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

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

|         |
|---------|
| 4000.00 |
| 4000.00 |