

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 27011 OF 27103

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" 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)

NRCC

Full Name (Last, First, Middle Initial)

A. BURKE, HARRY, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		18		2020

Mailing Address 1045 HEATHCLIFF LANE SE

City
MARIETTAState
GAZip Code
30067Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB28A-0.069!**

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CHIARAMONTE, MICHAEL, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		01		2020

Mailing Address 510 CATHEDRAL DRIVE

City
ALEXANDRIAState
VAZip Code
22314Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB28A-0.069!**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CHRASTINA, MICHAEL, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		23		2020

Mailing Address 471 NORTH END ROAD EAST

City
NORTH HEROState
VT

Zip Code

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB28A-0.070**

Amount of Each Disbursement this Period

50.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

5150.00

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