

**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 12 OF 19

☐ 17 ☐ 18 ☐ 19a ☐ 19b  
☒ 20a ☐ 20b ☐ 20c ☐ 21

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)

Stutzman for Senate

Full Name (Last, First, Middle Initial)

A. JOHNSON, CHARLES, , MR.,

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2017

Mailing Address 1220 SOUTH OCEAN BLVD

City  
PALM BEACH

State  
FL

Zip Code  
33480

Purpose of Disbursement  
CONTRIBUTION REFUND

Category/  
Type

FEC Identification Number

C

Amount of Each Disbursement this Period

2700.00

Transaction ID : SB20A.I4889

☐ Memo Item

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. JONES, ROY,

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2017

Mailing Address 1240 W. LAUREL

City  
SAN ANTONIO

State  
TX

Zip Code  
78201

Purpose of Disbursement  
REFUND - EXCESSIVE CONTRIBUTION

Category/  
Type

FEC Identification Number

C

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB20A.I4890

☐ Memo Item

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. LANGER, HARRY,

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2017

Mailing Address 2350 DORINA DRIVE

City  
NORTHFIELD

State  
IL

Zip Code  
60093

Purpose of Disbursement  
CONTRIBUTION REFUND

Category/  
Type

FEC Identification Number

C

Amount of Each Disbursement this Period

2700.00

Transaction ID : SB20A.I4893

☐ Memo Item

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional)...

7400.00

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