

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

PAGE 7216 OF 7309

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 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)

SCALISE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. JOYNER, DOROTHY, , ,

Mailing Address 4392 SANTA MICHELE COURT

City
COLUMBUSState
OHZip Code
43207Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		04		2019

FEC Identification Number

C

Amount of Each Disbursement this Period

25.00

Transaction ID : SB20A.I20731

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. JOYNER, DOROTHY, , ,

Mailing Address 4392 SANTA MICHELE COURT

City
COLUMBUSState
OHZip Code
43207Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		04		2019

FEC Identification Number

C

Amount of Each Disbursement this Period

25.00

Transaction ID : SB20A.I20732

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MCCRAY, RICHARD, , ,

Mailing Address 2306 MANITOBA DR.

City
CORPUS CHRISTIState
TXZip Code
78418Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		04		2019

FEC Identification Number

C

Amount of Each Disbursement this Period

100.00

Transaction ID : SB20A.I20743

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

150.00

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