

**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)

NATIONAL TURKEY FEDERATION POLITICAL ACTION COMMITTEE/TURPAC

Full Name (Last, First, Middle Initial)

A. PALAZZO FOR CONGRESS

Mailing Address 13155 HIGHWAY 67 SUITE B

City BILOXI State MS Zip Code 39532

Purpose of Disbursement

Candidate Name

Palazzo, Steven, M., Rep.,

Office Sought: House Senate President
 Disbursement For: 2018 Primary General Other (specify) ▼
 State: MS District: 04

Date of Disbursement

MM / DD / YYYY
03 / 19 / 2018

FEC Identification Number

C C00477323

Transaction ID : B2CB821A8F

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. ROBERT ADERHOLT FOR CONGRESS

Mailing Address P. O. BOX 1158

City HALEYVILLE State AL Zip Code 35565

Purpose of Disbursement

Candidate Name

Aderholt, Robert, B., Rep.,

Office Sought: House Senate President
 Disbursement For: 2018 Primary General Other (specify) ▼
 State: AL District: 04

Date of Disbursement

MM / DD / YYYY
03 / 19 / 2018

FEC Identification Number

C C00313247

Transaction ID : B90CB68C5A

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. ROBERT ADERHOLT FOR CONGRESS

Mailing Address P. O. BOX 1158

City HALEYVILLE State AL Zip Code 35565

Purpose of Disbursement

Candidate Name

Aderholt, Robert, B., Rep.,

Office Sought: House Senate President
 Disbursement For: 2018 Primary General Other (specify) ▼
 State: AL District: 04

Date of Disbursement

MM / DD / YYYY
03 / 19 / 2018

FEC Identification Number

C C00313247

Transaction ID : B0466C9643.

Amount of Each Disbursement this Period

1500.00

Memo Item

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

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

5000.00

22500.00