

**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 221 OF 223			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Nikema for Congress, Inc

Full Name (Last, First, Middle Initial) A. Gholar, A'shanti, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2020		
Mailing Address PO Box 11941			FEC Identification Number C		
City Alexandria	State VA	Zip Code 22312-0341	Amount of Each Disbursement this Period 250.00		
Purpose of Disbursement Refund		Category/ Type 010	Transaction ID : VTQ8E9Z1YJ6		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Cooper, Rosalie, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2020		
Mailing Address 1179 Oakdale Rd NE			FEC Identification Number C		
City Atlanta	State GA	Zip Code 30307-1284	Amount of Each Disbursement this Period 1000.00		
Purpose of Disbursement Refund		Category/ Type 010	Transaction ID : VTQ8E9YWRH7		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	1250.00
TOTAL This Period (last page this line number only).....▶	1250.00