

**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 6 OF 6	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Armando Gutierrez For Congress**

Full Name (Last, First, Middle Initial) <b>A. Bryan Nelson Campaign</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2013
Mailing Address 1157 Oakpoint Cir		Amount of Each Disbursement this Period -500.00 <b>Transaction ID : SB21.5495</b>
City Apopka	State FL Zip Code 32712	
Purpose of Disbursement Voided Check dated 4/9/13		Category/ Type
Candidate Name <b>Bryan Nelson</b>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL	District:	

Full Name (Last, First, Middle Initial) <b>B. CARLOS CURBELO CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2013
Mailing Address 8770 SUNSET DRIVE #355		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB21.5489</b>
City MIAMI	State FL Zip Code 33173	
Purpose of Disbursement House District 26		Category/ Type 011
Candidate Name <b>CARLOS CURBELO</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL	District: 26	

Full Name (Last, First, Middle Initial) <b>c. Florida Federation of Young Republicans</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2013
Mailing Address 9700 Philips Hwy Ste. 104		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB21.5497</b>
City Jacksonville	State FL Zip Code 32256	
Purpose of Disbursement Contribution		Category/ Type 011
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	500.00
<b>TOTAL</b> This Period (last page this line number only).....	500.00