

**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 27			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
CAMPAIGN TO ELECT GENE TRUONO

Full Name (Last, First, Middle Initial) A. M&T Bank Cardmember Service			Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2020		
Mailing Address One M&T Plaza			FEC Identification Number C		
City Buffalo	State NY	Zip Code 14203	Amount of Each Disbursement this Period 645.00		
Purpose of Disbursement Credit Card Payment		Category/ Type	Transaction ID : SB17.5141		
Candidate Name		<input type="checkbox"/> Memo Item			
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:					

Full Name (Last, First, Middle Initial) B. Trump International Hotel			Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2020		
Mailing Address 1100 Pennsylvania Ave NW			FEC Identification Number C		
City Washington	State DC	Zip Code 20004	Amount of Each Disbursement this Period 645.00		
Purpose of Disbursement Lodging (See 1/15/20 Credit Card Payment)		Category/ Type	Transaction ID : SB17.5144		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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:					

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		
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).....▶	645.00
TOTAL This Period (last page this line number only).....▶	645.00