

# SCHEDULE B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

☐ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

PAGE OF

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NAME OF COMMITTEE (In Full)

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

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

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

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....