SCHEDULE B (FEC Form 4)		Use separate schedule(s)		FOR LINE NUMBER: PAGE OF (check only one)			
T	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21a 22 23a 23b 24a				
	y information copied from such Reports and Statem for commercial purposes, other than using the nam						
$\rangle$	NAME OF COMMITTEE (In Full)						
١.	Full Name (Last, First, Middle Initial)	fiddle Initial)			Date of Disbursement		
	Mailing Address						
	City	State Zip Code	Zip Code		ursement this Period	Ţ	
	Purpose of Disbursement				7	_	
	Candidate Name		Category/ Type				
	President	nent For: Primary General Other (specify) ▼					
3.	State: District: Full Name (Last, First, Middle Initial)			Date of Disbursement	1		
	Mailing Address			M   M / D   D	/ Y   Y   Y   Y		
	City	State Zip Code		Amount of Each Disb	ursement this Period	_	
	Purpose of Disbursement			7	J		
	Candidate Name		Category/ Type				
	President	nent For: Primary General Other (specify) ▼					
_	State: District: Full Name (Last, First, Middle Initial)						
j.				Date of Disbursement	/ <b>Y Y Y Y Y</b>		
	Mailing Address						
	City	State Zip Code		Amount of Each Disb	ursement this Period	-	
	Purpose of Disbursement				7	_	
	Candidate Name		Category/ Type				
		nent For: Primary General Other (specify) ▼					
	•				• • • • • •	1	
	UBTOTAL of Disbursements This Page (optional)					ĺ	
T	OTAL This Period (last page this line number only)		▶				