

**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 100 OF 100	
	<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)  
**Maloney for Congress**

**A. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE**

Full Name (Last, First, Middle Initial)  
Mailing Address 430 South Capitol Street

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Unlimited Transfer of Campaign Funds

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
07 / 28 / 2011

Amount of Each Disbursement this Period  
33000.00

Transaction ID : D294212

Category/Type  
011

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY

Amount of Each Disbursement this Period

Category/Type

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY

Amount of Each Disbursement this Period

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... 33000.00

**TOTAL** This Period (last page this line number only)..... 33000.00