

**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 166 OF 185	
	<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)
Moulton for Congress

Full Name (Last, First, Middle Initial) A. Charlene C Lee		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2016
Mailing Address 891 Massachusetts Ave #6		Amount of Each Disbursement this Period 2256.35
City Cambridge	State MA	
Zip Code 02139	Purpose of Disbursement Payroll	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	
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)	Transaction ID : 17-04-02427-02930
State: District:		

Full Name (Last, First, Middle Initial) B. Victoria Ireton		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2016
Mailing Address 12 Exeter St		Amount of Each Disbursement this Period 2429.26
City Arlington	State MA	
Zip Code 02474	Purpose of Disbursement Payroll	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	
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)	Transaction ID : 17-04-02427-02933
State: District:		

Full Name (Last, First, Middle Initial) c. Carrie Rankin		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2016
Mailing Address 970 Main St		Amount of Each Disbursement this Period 708.84
City Concord	State MA	
Zip Code 01742	Purpose of Disbursement Payroll	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	
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)	Transaction ID : 17-04-02427-02932
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	