

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**ActBlue**

Full Name (Last, First, Middle Initial) <b>A. WILLIE CRUMP</b>		Date of Disbursement MM / DD / YYYY 06 / 12 / 2015
Mailing Address 4850 S LAKE PARK AVE APT 2507B		<b>Transaction ID : SB28A_27723391</b>
City CHICAGO	State IL	
Zip Code 60615	Purpose of Disbursement Contribution Refund	Amount of Each Disbursement this Period 5.00
Candidate Name	Category/Type	Refund of contribution, initially earmarked for DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE (C000009)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2015 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PEGGY CRUSE</b>		Date of Disbursement MM / DD / YYYY 05 / 28 / 2015
Mailing Address 210 HILLTOP ROAD		<b>Transaction ID : SB28A_27168329</b>
City ELLISVILLE	State MO	
Zip Code 63011	Purpose of Disbursement Contribution Refund	Amount of Each Disbursement this Period 1.50
Candidate Name	Category/Type	Refund of contribution, initially earmarked for ACTBLUE (C00401224)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2015 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PEGGY CRUSE</b>		Date of Disbursement MM / DD / YYYY 05 / 28 / 2015
Mailing Address 210 HILLTOP ROAD		<b>Transaction ID : SB28A_27168324</b>
City ELLISVILLE	State MO	
Zip Code 63011	Purpose of Disbursement Contribution Refund	Amount of Each Disbursement this Period 15.00
Candidate Name	Category/Type	Refund of contribution, initially earmarked for DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE (C000009)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2015 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	21.50
<b>TOTAL</b> This Period (last page this line number only).....▶	