

**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)

A. KUALII KIPUKAI

Mailing Address PO BOX 30910

City ANAHOLA State HI Zip Code 96703

Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB28A_24330798

Amount of Each Disbursement this Period

Refund of contribution, initially earmarked for ACTBLUE (C00401224)

Full Name (Last, First, Middle Initial)

B. KUALII KIPUKAI

Mailing Address PO BOX 30910

City ANAHOLA State HI Zip Code 96703

Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB28A_24730195

Amount of Each Disbursement this Period

Refund of contribution, initially earmarked for DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE (C000009)

Full Name (Last, First, Middle Initial)

C. KUALII KIPUKAI

Mailing Address PO BOX 30910

City ANAHOLA State HI Zip Code 96703

Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB28A_24330796

Amount of Each Disbursement this Period

Refund of contribution, initially earmarked for DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE (C000009)

SUBTOTAL of Disbursements This Page (optional)..... ▶

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