

**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 250 / 369
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 18 <input type="checkbox"/> 19a <input type="checkbox"/> 19b <input type="checkbox"/> 20a <input type="checkbox"/> 20b <input type="checkbox"/> 20c <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
Walsh for Montana

Full Name (Last, First, Middle Initial) Hadar Steinberg		Transaction ID: VR8SV9HAP94
Mailing Address 5 Kingsland Ct		Date of Disbursement 08/06/2014
City Fair Lawn	State NJ	Amount of Disbursement this Period \$441.00
Zip Code 07410-2746		
Purpose of Disbursement Reimbursement		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) Delta		Transaction ID: VR8SV9HAPW2
Mailing Address PO Box 20706		Date of Disbursement 08/06/2014
City Atlanta	State GA	Amount of Disbursement this Period \$441.00
Zip Code 30320-6001		
Purpose of Disbursement Airfare		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) Hadar Steinberg		Transaction ID: VR8SV9HAPB9
Mailing Address 5 Kingsland Ct		Date of Disbursement 08/12/2014
City Fair Lawn	State NJ	Amount of Disbursement this Period \$935.18
Zip Code 07410-2746		
Purpose of Disbursement Mileage		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

SUBTOTAL of Receipts This Page (optional)...	\$1,376.18
TOTAL This Period (last page this line number only) .....	

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