

**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. JULIA MATTHEWS</b>		Date of Disbursement MM / DD / YYYY 02 / 13 / 2015
Mailing Address 19 FAIR OAKS PARK		<b>Transaction ID : SB28A_21729166</b>
City NEEDHAM	State MA	
Purpose of Disbursement Contribution Refund		Amount of Each Disbursement this Period 10.00
Candidate Name		
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) ▼	Refund of contribution, initially earmarked for PROGRESSIVE CHANGE CAMPAIGN COMMITTEE (C00458000)
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>B. JULIA MATTHEWS</b>		Date of Disbursement MM / DD / YYYY 02 / 13 / 2015
Mailing Address 19 FAIR OAKS PARK		<b>Transaction ID : SB28A_25187063</b>
City NEEDHAM	State MA	
Purpose of Disbursement Contribution Refund		Amount of Each Disbursement this Period 10.00
Candidate Name		
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) ▼	Refund of contribution, initially earmarked for DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE (C000009)
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>C. JULIA MATTHEWS</b>		Date of Disbursement MM / DD / YYYY 02 / 13 / 2015
Mailing Address 19 FAIR OAKS PARK		<b>Transaction ID : SB28A_25333796</b>
City NEEDHAM	State MA	
Purpose of Disbursement Contribution Refund		Amount of Each Disbursement this Period 10.00
Candidate Name		
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) ▼	Refund of contribution, initially earmarked for PROGRESSIVE CHANGE CAMPAIGN COMMITTEE (C00458000)
State: District:	Category/ Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	30.00
<b>TOTAL</b> This Period (last page this line number only).....	