

**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. WILMA WHEELER

Mailing Address PO BOX 3208

City MAMMOTH LAKE State CA Zip Code 93546

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

MM / DD / YYYY
06 / 30 / 2015

Transaction ID : SB28A_27292517

Amount of Each Disbursement this Period

25.00

Refund of contribution, initially earmarked for BARBARA LEE FOR CONGRESS (C00331769)

Full Name (Last, First, Middle Initial)

B. WILMA WHEELER

Mailing Address PO BOX 3208

City MAMMOTH LAKE State CA Zip Code 93546

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

MM / DD / YYYY
06 / 30 / 2015

Transaction ID : SB28A_27292923

Amount of Each Disbursement this Period

100.00

Refund of contribution, initially earmarked for DR. RAUL RUIZ FOR CONGRESS COMMITTEE (C00502575)

Full Name (Last, First, Middle Initial)

C. WILMA WHEELER

Mailing Address PO BOX 3208

City MAMMOTH LAKE State CA Zip Code 93546

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

MM / DD / YYYY
06 / 30 / 2015

Transaction ID : SB28A_26957633

Amount of Each Disbursement this Period

5.00

Refund of contribution, initially earmarked for TAMMY FOR ILLINOIS (C00574889)

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

130.00

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