

**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 83 OF 109			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Don Beyer

Full Name (Last, First, Middle Initial) A. Google		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2015
Mailing Address 1600 Amphitheatre Pkwy		Amount of Each Disbursement this Period 65.00
City Mountain View State CA Zip Code 94043-1351	Purpose of Disbursement Email Services	
Candidate Name		Category/Type
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)	Transaction ID : VNH269YGR95 [MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. American Express		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2015
Mailing Address PO Box 1270		Amount of Each Disbursement this Period 95.00
City Newark State NJ Zip Code 07101-1270	Purpose of Disbursement Service Fee	
Candidate Name		Category/Type
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)	Transaction ID : VNH269YGR88 [MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) c. Colleen Browne		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2015
Mailing Address 2541 N Vermont St		Amount of Each Disbursement this Period 280.90
City Arlington State VA Zip Code 22207-4125	Purpose of Disbursement Expense Reimbursement	
Candidate Name		Category/Type
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)	Transaction ID : VNH269Y9TF0
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	280.90
TOTAL This Period (last page this line number only).....	