

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 01181 OF 01642

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. HANOVER, NADELLE, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		07		2017

Mailing Address 8513 NORTH 84TH STREET

City
SCOTTSDALEState
AZZip Code
85258Purpose of Disbursement
Contribution Refund

Candidate Name

Category/
TypeOffice 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) ▼		

State: District:

FEC Identification Number

C**Transaction ID : SB28A_7641!**

Amount of Each Disbursement this Period

100.00

☐ Memo Item Refund of contribution, initially earmarked for CHC BOLD PAC/COMMITTEE FOR HISPANIC

Full Name (Last, First, Middle Initial)

B. HANOVER, NADELLE, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		11		2017

Mailing Address 8513 NORTH 84TH STREET

City
SCOTTSDALEState
AZZip Code
85258Purpose of Disbursement
Contribution Refund

Candidate Name

Category/
TypeOffice 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) ▼		

State: District:

FEC Identification Number

C**Transaction ID : SB28A_75573**

Amount of Each Disbursement this Period

15.00

☐ Memo Item Refund of contribution, initially earmarked for DCCC (C00000935)

Full Name (Last, First, Middle Initial)

C. HANSEN, BRENDA, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		19		2017

Mailing Address 5301 BURLING TER

City
BETHESDAState
MDZip Code
20814Purpose of Disbursement
Contribution Refund

Candidate Name

Category/
TypeOffice 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) ▼		

State: District:

FEC Identification Number

C**Transaction ID : SB28A_7614**

Amount of Each Disbursement this Period

25.00

☐ Memo Item Refund of contribution, initially earmarked for JON OSSOFF FOR CONGRESS (C00630426)**SUBTOTAL** of Disbursements This Page (optional).....▶

140.00

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