

**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)

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<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)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)
Daniel Fass

Mailing Address 8 Cathlow Drive

City Riverside State CT Zip Code 06878

Purpose of Disbursement
Contribution Refund

Candidate Name

010
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB28A-872472

Date of Disbursement

05 / 20 / 2010

Amount of Each Disbursement this Period

4600.00

SUBTOTAL of Disbursements This Page (optional)

4600.00

TOTAL This Period (last page this line number only)

8215.00