

**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 56 OF 56
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Engel for Congress**

Full Name (Last, First, Middle Initial) <b>A. DCCC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 09 / 2015</b>
Mailing Address <b>430 S. Capitol St. Se</b>		Amount of Each Disbursement this Period <b>10000.00</b> Transaction ID : <b>B720523D4E6004EDB9EE</b>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20003-4024</b>	Purpose of Disbursement <b>Unlimited transfer to National Party</b>	
Candidate Name <b>DCCC</b>	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2016</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. DCCC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 26 / 2015</b>
Mailing Address <b>430 S. Capitol St. Se</b>		Amount of Each Disbursement this Period <b>15000.00</b> Transaction ID : <b>BB56F8783F33F4B87B25</b>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20003-4024</b>	Purpose of Disbursement <b>Unlimited transfer to National Party</b>	
Candidate Name <b>DCCC</b>	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2016</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement	
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)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>25000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>25750.00</b>