

**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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input 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)
4 MA PAC

A. MA for a Majority

Full Name (Last, First, Middle Initial)

Mailing Address 918 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-2140

Purpose of Disbursement Contribution

Candidate Name **MA for a Majority**

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: District:

Date of Disbursement 03 / 21 / 2018

FEC Identification Number **C00673731**
Transaction ID : **VNGXF9XJF6**
Amount of Each Disbursement this Period 9000.00

Memo Item

B. MASSACHUSETTS DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

Mailing Address 11 Beacon St
Fl 4

City Boston State MA Zip Code 02108-3017

Purpose of Disbursement Federal contribution expense

Candidate Name **MASSACHUSETTS DEMOCRATIC STATE COMMITTEE**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement 03 / 12 / 2018

FEC Identification Number **C00089243**
Transaction ID : **VNGXF9XJEN**
Amount of Each Disbursement this Period 1500.00

Memo Item

C. NEVADANS FOR STEVEN HORSFORD

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 336664

City North Las Vegas State NV Zip Code 89033-6664

Purpose of Disbursement Candidate contribution

Candidate Name **HORSFORD, STEVEN ALEXZANDER, , ,**

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: NV District: 04

Date of Disbursement 03 / 20 / 2018

FEC Identification Number **C00668228**
Transaction ID : **VNGXF9XJEI**
Amount of Each Disbursement this Period 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 11500.00

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