

**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)
MWW GROUP INC POLITICAL ACTION COMMITTEE, THE

Full Name (Last, First, Middle Initial) A. BOB CASEY FOR SENATE INC		Date of Disbursement MM / DD / YYYY 03 / 28 / 2018
Mailing Address PO BOX 58746		FEC Identification Number C 000431056 Transaction ID : SB23.7388
City PHILADELPHIA	State PA	Zip Code 19102
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2000.00
Candidate Name CASEY, ROBERT P JR, , ,		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA	District: 00	

Full Name (Last, First, Middle Initial) B. EMILY'S LIST		Date of Disbursement MM / DD / YYYY 03 / 09 / 2018
Mailing Address 1800 M STREET, NW STE 375N		FEC Identification Number C 000193433 Transaction ID : SB23.7386
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 5000.00
Candidate Name		Memo Item <input type="checkbox"/>
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:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		Memo Item <input type="checkbox"/>
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:	

SUBTOTAL of Disbursements This Page (optional).....▶	7000.00
TOTAL This Period (last page this line number only).....▶	7000.00