

**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 167 OF 167			
	<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)
Welch for Congress

Full Name (Last, First, Middle Initial) A. Friends of Pete Gallego		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2015
Mailing Address PO BOX 1781		Amount of Each Disbursement this Period 1000.00 Transaction ID : D575773
City SAN ANTONIO	State TX	
Purpose of Disbursement Contribution		Category/ Type
Candidate Name PETE GALLEGO		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 23	

Full Name (Last, First, Middle Initial) B. Schneider for Congress		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2015
Mailing Address PO BOX 1318		Amount of Each Disbursement this Period 1000.00 Transaction ID : D575774
City DEERFIELD	State IL	
Purpose of Disbursement Contribution		Category/ Type
Candidate Name BRADLEY SCOTT SCHNEIDER		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IL	District: 10	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Purpose of Disbursement		Category/ Type
Candidate Name		
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).....	2000.00
TOTAL This Period (last page this line number only).....	2000.00