

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 603 OF 604

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

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NAME OF COMMITTEE (In Full)

Caruso-Cabrera for New York

Full Name (Last, First, Middle Initial)

A. Hirschfeld, Seth, , ,

Mailing Address 3948 W Meadow Ln

City
ClevelandState
OHZip Code
44122-4775Purpose of Disbursement
Contribution refund

010

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	6		2	0	2	0

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : 500423306

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Petersen, Melvin, , ,

Mailing Address 945 Natchez Dr

City
Walnut CreekState
CAZip Code
94598-4433Purpose of Disbursement
Contribution refund

010

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	6		2	0	2	0

FEC Identification Number

C

Amount of Each Disbursement this Period

100.00

Transaction ID : 500423307

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Petersen, Melvin, , ,

Mailing Address 945 Natchez Dr

City
Walnut CreekState
CAZip Code
94598-4433Purpose of Disbursement
Contribution refund

010

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	4		2	0	2	0

FEC Identification Number

C

Amount of Each Disbursement this Period

100.00

Transaction ID : 500423422

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

700.00

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