

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

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DCCC

Full Name (Last, First, Middle Initial)

A. Grant, Grace, , ,

Mailing Address 545 Carrollton Dr

City
FrederickState
MDZip Code
21701-6370Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		25		2019

FEC Identification Number

C**Transaction ID : VT3CV9PJHJ**

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Grant, Grace, , ,

Mailing Address 545 Carrollton Dr

City
FrederickState
MDZip Code
21701-6370Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		25		2019

FEC Identification Number

C**Transaction ID : VT3CV9PJHK**

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Gray, Daniel, , ,Mailing Address 1405 Veterans Hwy
W1City
BristolState
PAZip Code
19007-2377Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		01		2019

FEC Identification Number

C**Transaction ID : VT3CV9PHVI**

Amount of Each Disbursement this Period

10.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

40.00