

**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 192 OF 206	
	<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)  
**Jeffries for Congress**

Full Name (Last, First, Middle Initial) <b>A. DCCC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2018
Mailing Address 430 S Capitol St SE FI 2		FEC Identification Number <b>C</b> C00000935
City Washington	State DC	Zip Code 20003-4024
Purpose of Disbursement Unlimited Transfer		Amount of Each Disbursement this Period 25000.00
Candidate Name	Category/ Type	Transaction ID : <b>D811641</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. DCCC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2018
Mailing Address 430 S Capitol St SE FI 2		FEC Identification Number <b>C</b> C00000935
City Washington	State DC	Zip Code 20003-4024
Purpose of Disbursement Unlimited Transfer		Amount of Each Disbursement this Period 25000.00
Candidate Name	Category/ Type	Transaction ID : <b>D812581</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. DEB HAALAND FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2018
Mailing Address P.O. BOX 25443		FEC Identification Number <b>C</b> C00639054
City ALBUQUERQUE	State NM	Zip Code 87125
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name <b>HAALAND, DEBRA, , ,</b>	Category/ Type	Transaction ID : <b>D811642</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NM District: 01		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	51000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	