

**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"/> 24	<input type="checkbox"/> 25	<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)
NEXION HEALTH FUND FOR QUALITY LONG TERM CARE INC

Full Name (Last, First, Middle Initial) A. BECERRA FOR CONGRESS		Date of Disbursement MM / DD / YYYY 05 / 26 / 2016
Mailing Address P.O. BOX 71584		Transaction ID : SB23.6629
City LOS ANGELES	State CA	
Zip Code 90071	Purpose of Disbursement contribution	Amount of Each Disbursement this Period 2500.00
Candidate Name XAVIER BECERRA	Category/Type	<input type="checkbox"/> Memo Item
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: CA District: 34		

Full Name (Last, First, Middle Initial) B. BENNET FOR COLORADO		Date of Disbursement MM / DD / YYYY 06 / 20 / 2016
Mailing Address 2300 15TH STREET SUITE 425		Transaction ID : SB23.6634
City DENVER	State CO	
Zip Code 80202	Purpose of Disbursement contribution	Amount of Each Disbursement this Period 1000.00
Candidate Name MICHAEL F BENNET	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input checked="" 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: CO District: 00		

Full Name (Last, First, Middle Initial) C. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Date of Disbursement MM / DD / YYYY 05 / 26 / 2016
Mailing Address 430 South Capitol Street, SE 2nd Floor		Transaction ID : SB23.6631
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement contribution	Amount of Each Disbursement this Period 2500.00
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
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).....▶	6000.00
TOTAL This Period (last page this line number only).....▶	