

**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 42 OF 48	
	<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)
Scott for Congress

Full Name (Last, First, Middle Initial) A. Democratic Congressional Campaign Committee		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 430 S Capitol St SE		Amount of Each Disbursement this Period 50000.00 Transaction ID : D737414
City Washington State DC Zip Code 20003-4024	Purpose of Disbursement Dues Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Amount of Each Disbursement this Period 10000.00 Transaction ID : D737468
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Democratic Congressional Campaign Committee		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address 430 S Capitol St SE		Amount of Each Disbursement this Period 10000.00 Transaction ID : D737468
City Washington State DC Zip Code 20003-4024	Purpose of Disbursement Dues Category/Type 011	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Amount of Each Disbursement this Period 1000.00 Transaction ID : D737691
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Donna Christensen for Governor		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 6031 Questa Verde		Amount of Each Disbursement this Period 1000.00 Transaction ID : D737691
City St. Croix State VI Zip Code 00820	Purpose of Disbursement Contribution Category/Type 011	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Amount of Each Disbursement this Period 61000.00
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	61000.00
TOTAL This Period (last page this line number only).....	