

**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 118 OF 118	
	<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)  
**Mark Pocan for Congress**

Full Name (Last, First, Middle Initial) <b>A. DCCC</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2017
Mailing Address 430 S Capitol St SE		FEC Identification Number C C00000935
City Washington	State DC	Zip Code 20003-4024
Purpose of Disbursement Unlimited transfer to party committee		Amount of Each Disbursement this Period 37500.00
Candidate Name DCCC		Transaction ID : VNGY6A8SJH8
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. Democratic Party Of Wisconsin</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2017
Mailing Address 15 N Pinckney St Ste 200		FEC Identification Number C C00019331
City Madison	State WI	Zip Code 53703-2833
Purpose of Disbursement Contribution to State Party		Amount of Each Disbursement this Period 300.00
Candidate Name Democratic Party Of Wisconsin		Transaction ID : VNGY6A8MTX0
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		Transaction ID
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	37800.00
<b>TOTAL</b> This Period (last page this line number only).....▶	37800.00