

**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

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NAME OF COMMITTEE (In Full)

ActBlue

Full Name (Last, First, Middle Initial)

A. JAMES, LAUREN, , ,

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	8			2	0	1	7		

Mailing Address 7000 KENNEDY BOULEVARD EAST

City
NEW YORKState
NJZip Code
07093Purpose of Disbursement
Contribution Refund

Candidate Name

Category/
TypeOffice 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:

FEC Identification Number

C

Transaction ID : SB28A_75211

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Refund of contribution, initially
earmarked for DCCC (C00000935)

Full Name (Last, First, Middle Initial)

B. JAMES, RONALD, , ,

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	5			2	0	1	7		

Mailing Address 3277 VT RTE 242

City
JAYState
VTZip Code
05859Purpose of Disbursement
Contribution Refund

Candidate Name

Category/
TypeOffice 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:

FEC Identification Number

C

Transaction ID : SB28A_74034

Amount of Each Disbursement this Period

100.00

☐ Memo Item Refund of contribution, initially
earmarked for CATHERINE
CORTEZ MASTO FOR SENATE
(C00575516)

Full Name (Last, First, Middle Initial)

C. JAMES, WENDY, , ,

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	6			2	0	1	7		

Mailing Address 1 DELRA LANE

City
YORKTOWN HEIGHTSState
NYZip Code
10598Purpose of Disbursement
Contribution Refund

Candidate Name

Category/
TypeOffice 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:

FEC Identification Number

C

Transaction ID : SB28A_6933

Amount of Each Disbursement this Period

2700.00

☐ Memo Item Refund of contribution, initially
earmarked for SCOTT PETERS
FOR CONGRESS (C00503110)

SUBTOTAL of Disbursements This Page (optional).....▶

3800.00

TOTAL This Period (last page this line number only).....▶