

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 06728 OF 06839

<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. SMITH, PRISCA, , ,**

Mailing Address 540 E CIRCLE RIDGE PLACE

City  
STURGEON BAYState  
WIZip Code  
54235Purpose of Disbursement  
Contribution Refund

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

**C**

Transaction ID : SB28A\_7511!

Amount of Each Disbursement this Period

20.83

☐ Memo ItemRefund of contribution, initially  
earmarked for JEFF MERKLEY  
FOR OREGON (C00437277)

Full Name (Last, First, Middle Initial)

**B. SMITH, PRISCA, , ,**

Mailing Address 540 E CIRCLE RIDGE PLACE

City  
STURGEON BAYState  
WIZip Code  
54235Purpose of Disbursement  
Contribution Refund

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

**C**

Transaction ID : SB28A\_75115

Amount of Each Disbursement this Period

20.83

☐ Memo ItemRefund of contribution, initially  
earmarked for NOLAN FOR  
CONGRESS VOLUNTEER  
COMMITTEE (C00400050)

Full Name (Last, First, Middle Initial)

**C. SMITH, QUEEN, , ,**

Mailing Address 612 N E 2ND AVE 2

City  
FT. LAUDERDALEState  
FLZip Code  
33304Purpose of Disbursement  
Contribution Refund

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

**C**

Transaction ID : SB28A\_7504

Amount of Each Disbursement this Period

15.00

☐ Memo ItemRefund of contribution, initially  
earmarked for END CITIZENS  
UNITED PAC (C00573261)**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

56.66