

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"/> 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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
American Optometric Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Donald M Payne Jr For Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		29		2017

Mailing Address PO Box 2406

City Newark State NJ Zip Code 07114

FEC Identification Number

C C00519355

Transaction ID : 41725052
Amount of Each Disbursement this Period

- 2000.00

Purpose of Disbursement Void
Candidate Name
Payne, Donald, , , Jr.
Category/Type **011**

Office Sought: House Senate President
Disbursement For: 2018
 Primary General
 Other (specify) ▼
State: NJ District: 10

Memo Item

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City State Zip Code

FEC Identification Number

C

Amount of Each Disbursement this Period

Purpose of Disbursement
Candidate Name
Category/Type

Office Sought: House Senate President
Disbursement For:
 Primary General
 Other (specify) ▼
State: District:

Memo Item

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City State Zip Code

FEC Identification Number

C

Amount of Each Disbursement this Period

Purpose of Disbursement
Candidate Name
Category/Type

Office Sought: House Senate President
Disbursement For:
 Primary General
 Other (specify) ▼
State: District:

Memo Item

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

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

- 2000.00

51687.50