

**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

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NAME OF COMMITTEE (In Full)
At The Table!

A. FRIENDS OF CHRISTINA M. HARTMAN

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 1576

City Lancaster State PA Zip Code 17608-1576

Purpose of Disbursement Contribution

Candidate Name
HARTMAN, CHRISTINA MARIE MS., , ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: PA District: 16

Date of Disbursement: 10 / 25 / 2016

FEC Identification Number: **C00580316**
Transaction ID : **D542670**
Amount of Each Disbursement this Period: 1000.00

Memo Item

B. FRIENDS OF JANE DITTMAR

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 974

City Charlottesville State VA Zip Code 22902-0974

Purpose of Disbursement Contribution

Candidate Name
DITTMAR, JANE DESIMONE, , ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: VA District: 05

Date of Disbursement: 10 / 25 / 2016

FEC Identification Number: **C00585976**
Transaction ID : **D542667**
Amount of Each Disbursement this Period: 1000.00

Memo Item

C. GREGORY FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 478

City Amityville State NY Zip Code 11701-0478

Purpose of Disbursement Contribution

Candidate Name
GREGORY, DUWAYNE, , ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: NY District: 02

Date of Disbursement: 10 / 28 / 2016

FEC Identification Number: **C00578260**
Transaction ID : **D542675**
Amount of Each Disbursement this Period: 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3000.00

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