

# 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)  
**PAC for a Change**

**A. Tina Smith for Minnesota**

Full Name (Last, First, Middle Initial)  
Tina Smith for Minnesota

Date of Disbursement: MM / DD / YYYY  
06 / 21 / 2018

Mailing Address: PO Box 14362

City: Saint Paul | State: MN | Zip Code: 55114-0362

Purpose of Disbursement: Federal Contribution

FEC Identification Number: C00663781  
Transaction ID: VTD7PA8W4I

Candidate Name: Smith, Tina, , ,  
Amount of Each Disbursement this Period: 2500.00

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

State: MN | District: 00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY

Mailing Address

City | State | Zip Code

Purpose of Disbursement

FEC Identification Number: C

Candidate Name

Amount of Each Disbursement this Period

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

State: | District:

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY

Mailing Address

City | State | Zip Code

Purpose of Disbursement

FEC Identification Number: C

Candidate Name

Amount of Each Disbursement this Period

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

State: | District:

Memo Item

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 2500.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 7000.00 |