

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | |
|-------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 52 OF 55 |
| | <input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Jeffries for Congress

| | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Committee to Re-elect Nydia M. Velazquez to Congress | | Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016 |
| Mailing Address 315 Inspiration Lane | | Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Memo Item Transaction ID : D783704 |
| City Gaithersburg State MD Zip Code 20878 | Purpose of Disbursement Contribution | |
| Candidate Name Nydia Velazquez | Category/Type | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 07 | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | | |
|--------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Democratic Congressional Campaign Committee | | Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2016 |
| Mailing Address 430 S Capitol St SE FI 2 | | Amount of Each Disbursement this Period 11250.00 <input type="checkbox"/> Memo Item Transaction ID : D784208 |
| City Washington State DC Zip Code 20003-4024 | Purpose of Disbursement Unlimited Transfer | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | | |
|--------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Democratic Congressional Campaign Committee | | Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2016 |
| Mailing Address 430 S Capitol St SE FI 2 | | Amount of Each Disbursement this Period 11250.00 <input type="checkbox"/> Memo Item Transaction ID : D782525 |
| City Washington State DC Zip Code 20003-4024 | Purpose of Disbursement Unlimited Transfer | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | |
|-----------------------------------------------------------------|-----------------|
| SUBTOTAL of Disbursements This Page (optional)..... | 23500.00 |
| TOTAL This Period (last page this line number only)..... | |