

**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 686 OF 687			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Dr. Raul Ruiz for Congress

Full Name (Last, First, Middle Initial) A. Smith, Jane, , ,			Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2017		
Mailing Address 12000 Rushmore ave			FEC Identification Number C		
City WHITEWATER	State CA	Zip Code 92282	Amount of Each Disbursement this Period 1000.00		
Purpose of Disbursement Contribution Refund		Category/ Type	Transaction ID : D615840		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Ulloa, Walter, , ,			Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2017		
Mailing Address 657 Amalfi Dr			FEC Identification Number C		
City Pacific Palisades	State CA	Zip Code 90272-4507	Amount of Each Disbursement this Period 2700.00		
Purpose of Disbursement Contribution Refund		Category/ Type	Transaction ID : D615772		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	3700.00
TOTAL This Period (last page this line number only).....▶	8370.00