

**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)

PEOPLE FOR THE AMERICAN WAY VOTERS ALLIANCE

Full Name (Last, First, Middle Initial)

A. NELSON, BILL, , ,

Mailing Address 10339 KENSINGTON SHORE DRIVE #201

City
ORLANDO

State
FL

Zip Code
32827

Purpose of Disbursement
Donation

Candidate Name

NELSON, BILL, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: FL District: 00

Date of Disbursement

MM / DD / YYYY
09 / 06 / 2018

FEC Identification Number

C S8FL00166

Transaction ID : SB23.4186

Amount of Each Disbursement this Period

350.00

Memo Item

Full Name (Last, First, Middle Initial)

B. OMAR, ILHAN, , ,

Mailing Address 400 SOUTH 4TH STREET
SUITE 401-200

City
MINNEAPOLIS

State
MN

Zip Code
55415

Purpose of Disbursement
Contribution

Candidate Name

OMAR, ILHAN, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: MN District: 05

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2018

FEC Identification Number

C H8MN05239

Transaction ID : SB23.4180

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. TLAIB, RASHIDA, , ,

Mailing Address 680 DELAWARE ST #303

City
DETROIT

State
MI

Zip Code
48202

Purpose of Disbursement
Contribution

Candidate Name

TLAIB, RASHIDA, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: MI District: 13

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2018

FEC Identification Number

C H8MI13250

Transaction ID : SB23.4183

Amount of Each Disbursement this Period

2500.00

Memo Item

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

3850.00

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

3850.00