

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 81202 OF 81284

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" 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)

ActBlue

Full Name (Last, First, Middle Initial)

A. TAUXE, VICTORIA, , ,

Mailing Address 1505 WEKEWA NENE

City
TALLAHASSEEState
FLZip Code
32301Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
08		07		2018

FEC Identification Number

C**Transaction ID : SB28A_1204**

Amount of Each Disbursement this Period

27.00

☐ Memo Item Refund of contribution, initially
earmarked for WORKING
FAMILIES PARTY INDEPENDENT

Full Name (Last, First, Middle Initial)

B. TAYE, JONAS, , ,

Mailing Address 46 HACKETT BOULEVARD

City
ALBANYState
NYZip Code
12209Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
08		21		2018

FEC Identification Number

C**Transaction ID : SB28A_1092C**

Amount of Each Disbursement this Period

3.00

☐ Memo Item Refund of contribution, initially
earmarked for DCCC (C00000935)

Full Name (Last, First, Middle Initial)

C. TAYLER, IRENE, , ,

Mailing Address 180 BEACON STREET

City
BOSTONState
MAZip Code
02116Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
08		30		2018

FEC Identification Number

C**Transaction ID : SB28A_1234**

Amount of Each Disbursement this Period

33.00

☐ Memo Item Refund of contribution, initially
earmarked for OCONNOR FOR
CONGRESS (C00667964)**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

63.00