

**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 3545 OF 3546	
	<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)  
**Schneider for Congress**

Full Name (Last, First, Middle Initial) <b>A. HILLARY VICTORY FUND</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2016
Mailing Address PO Box 5256		FEC Identification Number C C00586537
City New York	State NY	Zip Code 10185-5256
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 90.00
Candidate Name <b>HILLARY VICTORY FUND</b>	Category/ Type	Transaction ID : VQZ49A9KQX0
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. NEW TRIER DEMOCRATIC ORGANIZATION</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2016
Mailing Address 800 Oak St		FEC Identification Number C C00422519
City Winnetka	State IL	Zip Code 60093-2523
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 300.00
Candidate Name <b>NEW TRIER DEMOCRATIC ORGANIZATION</b>	Category/ Type	Transaction ID : VQZ49AA2ZR5
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	390.00
<b>TOTAL</b> This Period (last page this line number only).....▶	390.00