

**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 485 OF 502 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Kuster for Congress, Inc

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE | | Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2018 |
| Mailing Address 430 S Capitol St SE FI 2 | | FEC Identification Number C C0000935 |
| City Washington | State DC | Zip Code 20003-4024 |
| Purpose of Disbursement In-kind Events | | Amount of Each Disbursement this Period 105.04 |
| Candidate Name | Category/Type | Transaction ID : VPFBXQVXSR6I |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item * In-Kind Received |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Gonin, Jonathan, , , | | Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2018 |
| Mailing Address 4 Downing Rd | | FEC Identification Number C |
| City Hanover | State NH | Zip Code 03755-1902 |
| Purpose of Disbursement Mileage Reimbursement | | Amount of Each Disbursement this Period 13.94 |
| Candidate Name | Category/Type | Transaction ID : VPECNA80WR6 |
| 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) ▼ | <input type="checkbox"/> Memo Item |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. First Bank Merchant Services | | Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2018 |
| Mailing Address PO Box 407066 | | FEC Identification Number C |
| City Fort Lauderdale | State FL | Zip Code 33340-7066 |
| Purpose of Disbursement Credit Card Processing Fee | | Amount of Each Disbursement this Period 21.99 |
| Candidate Name | Category/Type | Transaction ID : VPECNA82ZR6 |
| 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) ▼ | <input type="checkbox"/> Memo Item |
| State: District: | | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 140.97 |
| TOTAL This Period (last page this line number only).....▶ | |