

**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 502 OF 502	
	<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)
Kuster for Congress, Inc

Full Name (Last, First, Middle Initial) A. SCANLON FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2018
Mailing Address PO Box 263		FEC Identification Number C 00669358
City Swarthmore	State PA	Zip Code 19081-0263
Purpose of Disbursement Contribution	Category/ Type	Amount of Each Disbursement this Period 1000.00
Candidate Name SCANLON, MARY GAY, , ,	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VPECNA84B19
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 05	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. NEW HAMPSHIRE DEMOCRATIC PARTY		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2018
Mailing Address 105 N State St		FEC Identification Number C 00178038
City Concord	State NH	Zip Code 03301-4334
Purpose of Disbursement Unlimited Transfer to State Party Committee	Category/ Type	Amount of Each Disbursement this Period 50000.00
Candidate Name NEW HAMPSHIRE DEMOCRATIC PARTY	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VPECNA7ZZZ9
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	<input type="checkbox"/> Memo Item

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
Purpose of Disbursement	Category/ Type	Amount of Each Disbursement this Period
Candidate Name	Disbursement For:	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input 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).....▶	51000.00
TOTAL This Period (last page this line number only).....▶	196810.00