

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

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<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)

DCCC

Full Name (Last, First, Middle Initial)

A. Bonner, Sandra, , ,

Mailing Address 4205 Gregg St

City
WoodbridgeState
VAZip Code
22193-2528Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	3			2	0	1	9		

FEC Identification Number

C**Transaction ID : VT3CV9PHM**

Amount of Each Disbursement this Period

6.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Borik, Trish, , ,

Mailing Address PO Box 12870

City
Mill CreekState
WAZip Code
98082-0870Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	5			2	0	1	9		

FEC Identification Number

C**Transaction ID : VT3CV9PHPZ**

Amount of Each Disbursement this Period

8.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Bowen, Jerrold, , ,

Mailing Address 2502 Snyder Ave

City
CheyenneState
WYZip Code
82001-2939Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	4			2	0	1	9		

FEC Identification Number

C**Transaction ID : VT3CV9PH3I**

Amount of Each Disbursement this Period

15.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

29.00