

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of contribution. See Detailed Summary Page.	FOR LINE NUMBER: (check only one)		PAGE 114 OF 115	
	<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)  
**Shaheen for Senate**

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF MARIA</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2017
Mailing Address PO Box 12740		FEC Identification Number <b>C00349506</b>
City Seattle	State WA	Zip Code 98111-4740
Purpose of Disbursement Contribution	Category/ Type	Amount of Each Disbursement this Period 2000.00
Candidate Name <b>CANTWELL, MARIA, , ,</b>	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: WA	District:	Transaction ID : VN8219X42W8 <input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF MARIA</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2017
Mailing Address PO Box 12740		FEC Identification Number <b>C00349506</b>
City Seattle	State WA	Zip Code 98111-4740
Purpose of Disbursement Contribution	Category/ Type	Amount of Each Disbursement this Period 500.00
Candidate Name <b>CANTWELL, MARIA, , ,</b>	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: WA	District:	Transaction ID : VN8219X4CS6 <input type="checkbox"/> Memo Item

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 <b>C</b>
City	State	Zip Code
Purpose of Disbursement	Category/ Type	Amount of Each Disbursement this Period
Candidate Name	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:	<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional)...	2500.00
<b>TOTAL</b> This Period (last page this line number only)...	2500.00

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