

**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"/> 24  | <input type="checkbox"/> 25 | <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)

ActBlue

Full Name (Last, First, Middle Initial)

**A. HOWARD OSBORN**

Mailing Address 3000 SOUTH FIRST STREET

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| CHAMPAIGN | IL    | 61822    |

Purpose of Disbursement  
Contribution Refund

Candidate Name

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

State: District:

|  |
|--|
| Disbursement For: 2015   |
| <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼                                   |

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 10    |   | 2015      |

**Transaction ID : SB28A\_26149591**

Amount of Each Disbursement this Period

|       |
|-------|
| 50.00 |
|-------|

Refund of contribution, initially earmarked for  
DEMOCRATIC CONGRESSIONAL CAMPAIGN  
COMMITTEE (C000009)

Full Name (Last, First, Middle Initial)

**B. HOWARD OSBORN**

Mailing Address 3000 SOUTH FIRST STREET

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| CHAMPAIGN | IL    | 61822    |

Purpose of Disbursement  
Contribution Refund

Candidate Name

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

State: District:

|  |
|--|
| Disbursement For: 2015   |
| <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼                                   |

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 10    |   | 2015      |

**Transaction ID : SB28A\_26195689**

Amount of Each Disbursement this Period

|      |
|------|
| 5.00 |
|------|

Refund of contribution, initially earmarked for  
DEMOCRATIC CONGRESSIONAL CAMPAIGN  
COMMITTEE (C000009)

Full Name (Last, First, Middle Initial)

**C. HOWARD OSBORN**

Mailing Address 3000 SOUTH FIRST STREET

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| CHAMPAIGN | IL    | 61822    |

Purpose of Disbursement  
Contribution Refund

Candidate Name

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

State: District:

|  |
|--|
| Disbursement For: 2015   |
| <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼                                   |

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 10    |   | 2015      |

**Transaction ID : SB28A\_26196603**

Amount of Each Disbursement this Period

|      |
|------|
| 0.50 |
|------|

Refund of contribution, initially earmarked for ACTBLUE  
(C00401224)**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

|       |
|-------|
| 55.50 |
|-------|

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|  |
|--|