

**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 218 OF 223			
	<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)
Friends of Don Beyer

Full Name (Last, First, Middle Initial) A. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 430 S Capitol St SE FI 2		Amount of Each Disbursement this Period 10000.00 Transaction ID : VNH269THY61
City Washington State DC Zip Code 20003-4024	Purpose of Disbursement Transfer	
Candidate Name DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Category/Type
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:		

Full Name (Last, First, Middle Initial) B. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014
Mailing Address 430 S Capitol St SE FI 2		Amount of Each Disbursement this Period 26000.00 Transaction ID : VNH269V4255
City Washington State DC Zip Code 20003-4024	Purpose of Disbursement Transfer	
Candidate Name DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Category/Type
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:		

Full Name (Last, First, Middle Initial) C. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2014
Mailing Address 430 S Capitol St SE FI 2		Amount of Each Disbursement this Period 10000.00 Transaction ID : VNH269VT2M6
City Washington State DC Zip Code 20003-4024	Purpose of Disbursement Transfer	
Candidate Name DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Category/Type
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:		

SUBTOTAL of Disbursements This Page (optional).....	46000.00
TOTAL This Period (last page this line number only).....	