

# 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 108 OF 111	
	<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)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. GRAHAM FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y <b>09 / 25 / 2015</b>
Mailing Address <b>PO BOX 310</b>		Amount of Each Disbursement this Period <b>1000.00</b> <b>Transaction ID : D632728</b>
City <b>TALLAHASSEE</b> State <b>FL</b> Zip Code <b>32302</b>	Purpose of Disbursement Contribution	
Candidate Name <b>GWEN GRAHAM</b>	Category/ Type	
Office Sought: <input checked="" 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: <b>FL</b> District: <b>02</b>		

Full Name (Last, First, Middle Initial) <b>B. JULIA BROWNLEY FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y <b>09 / 25 / 2015</b>
Mailing Address <b>728 W. EDNA PLACE</b>		Amount of Each Disbursement this Period <b>1000.00</b> <b>Transaction ID : D632715</b>
City <b>COVINA</b> State <b>CA</b> Zip Code <b>91722</b>	Purpose of Disbursement Contribution	
Candidate Name <b>JULIA BROWNLEY</b>	Category/ Type	
Office Sought: <input checked="" 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: <b>CA</b> District: <b>26</b>		

Full Name (Last, First, Middle Initial) <b>C. KUSTER FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y <b>09 / 25 / 2015</b>
Mailing Address <b>P.O. Box 1498</b>		Amount of Each Disbursement this Period <b>1000.00</b> <b>Transaction ID : D632710</b>
City <b>Concord</b> State <b>NH</b> Zip Code <b>03302</b>	Purpose of Disbursement Contribution	
Candidate Name <b>Ann McLane Kuster</b>	Category/ Type	
Office Sought: <input checked="" 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: <b>NH</b> District: <b>02</b>		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>3000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	