

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

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input 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)  
**Fund for a Working Congress**

Full Name (Last, First, Middle Initial)

**A. Gravity Strategic Communications**

Mailing Address 1054 31st Street NW #510

City Washington State DC Zip Code 20007

Purpose of Disbursement  
Communications Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 17 / 2018

FEC Identification Number

C  
**Transaction ID : SB21B.4259**  
Amount of Each Disbursement this Period  
3500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Langdon Law, LLC**

Mailing Address 8913 Cincinnati-Dayton Road

City West Chester State OH Zip Code 45069

Purpose of Disbursement  
Legal Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

001  
Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 13 / 2018

FEC Identification Number

C  
**Transaction ID : SB21B.4257**  
Amount of Each Disbursement this Period  
371.25

Memo Item

Full Name (Last, First, Middle Initial)

**C. Langdon Law, LLC**

Mailing Address 8913 Cincinnati-Dayton Road

City West Chester State OH Zip Code 45069

Purpose of Disbursement  
Legal Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

001  
Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 23 / 2018

FEC Identification Number

C  
**Transaction ID : SB21B.4264**  
Amount of Each Disbursement this Period  
2500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

6371.25  
6371.25