

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
AMERICAN SHORT LINE AND REGIONAL RAILROAD ASSOCIATION - POLITICAL ACTION CMTE (ASLRRRA-PAC)

Full Name (Last, First, Middle Initial) A. RICHARD E NEAL FOR CONGRESS COMMITTEE		Date of Disbursement MM / DD / YYYY 07 / 08 / 2018
Mailing Address 76 MAGNOLIA TERRACE		FEC Identification Number C00226522 Transaction ID : SB23.8805
City SPRINGFIELD	State MA	Zip Code 01108
Purpose of Disbursement		Amount of Each Disbursement this Period 5000.00
Candidate Name RICHARD E NEAL FOR CONGRESS COMMITTEE		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: MA	District: 02	

Full Name (Last, First, Middle Initial) B. RICHARD E NEAL FOR CONGRESS COMMITTEE		Date of Disbursement MM / DD / YYYY 07 / 08 / 2018
Mailing Address 76 MAGNOLIA TERRACE		FEC Identification Number C00226522 Transaction ID : SB23.8808
City SPRINGFIELD	State MA	Zip Code 01108
Purpose of Disbursement		Amount of Each Disbursement this Period 2150.00
Candidate Name RICHARD E NEAL FOR CONGRESS COMMITTEE		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: MA	District: 02	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		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) ▼	<input type="checkbox"/> Memo Item
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....▶	7150.00
TOTAL This Period (last page this line number only).....▶	16550.00