

**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 187 OF 190	
	<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. Suozzi for Congress		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2017
Mailing Address PO Box 669		FEC Identification Number C C00607200
City Glen Cove	State NY	Zip Code 11542-0669
Purpose of Disbursement Contribution	Category/ Type	Amount of Each Disbursement this Period 1000.00
Candidate Name SUOZZI, THOMAS MR, , ,	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH26A8KHW4
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NY District: 03	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. CAROL SHEA-PORTER FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2017
Mailing Address PO Box 453		FEC Identification Number C C00419978
City Rochester	State NH	Zip Code 03866-0453
Purpose of Disbursement Contribution	Category/ Type	Amount of Each Disbursement this Period 1000.00
Candidate Name SHEA-PORTER, CAROL, , ,	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH26A8KJ05
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NH District: 01	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) c. ACT for Alexandria		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2017
Mailing Address 201 King St Ste 200		FEC Identification Number C
City Alexandria	State VA	Zip Code 22314-6600
Purpose of Disbursement Donation	Category/ Type	Amount of Each Disbursement this Period 250.00
Candidate Name	Disbursement For:	Transaction ID : VNH26A89FG5
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<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).....▶	2250.00
TOTAL This Period (last page this line number only).....▶	