

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 279515 OF 281811

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ActBlue

Full Name (Last, First, Middle Initial)

A. JACK HOGAN

Mailing Address 2575 PALISADES CREST DRIVE

City	State	Zip Code
LAKE OSWEGO	OR	97034

Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		02		2015

Transaction ID : SB28A_21850101

Amount of Each Disbursement this Period

10.00

Refund of contribution, initially earmarked for ACTBLUE (C00401224)

Full Name (Last, First, Middle Initial)

B. JACK HOGAN

Mailing Address 2575 PALISADES CREST DRIVE

City	State	Zip Code
LAKE OSWEGO	OR	97034

Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		02		2015

Transaction ID : SB28A_24098917

Amount of Each Disbursement this Period

10.00

Refund of contribution, initially earmarked for ACTBLUE (C00401224)

Full Name (Last, First, Middle Initial)

C. JACK HOGAN

Mailing Address 2575 PALISADES CREST DRIVE

City	State	Zip Code
LAKE OSWEGO	OR	97034

Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		02		2015

Transaction ID : SB28A_20083089

Amount of Each Disbursement this Period

10.00

Refund of contribution, initially earmarked for ACTBLUE (C00401224)

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

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

30.00

--