

**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 24 OF 48			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Crowley for Congress

Full Name (Last, First, Middle Initial) A. Greenblatt, Joel, , ,			Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2019		
Mailing Address 535 Madison Avenue 30th Floor			FEC Identification Number C		
City New York	State NY	Zip Code 10022	Amount of Each Disbursement this Period - 2700.00		
Purpose of Disbursement Void of 8/18 Refund		Category/ Type	Transaction ID : D559005		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input 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) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Greenblatt, Julia, , ,			Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2019		
Mailing Address 535 Madison Avenue 30th Floor			FEC Identification Number C		
City New York	State NY	Zip Code 10022	Amount of Each Disbursement this Period - 2700.00		
Purpose of Disbursement Void of 8/18 Refund		Category/ Type	Transaction ID : D559045		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input 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) ▼				
State: District:					

Full Name (Last, First, Middle Initial) c. Rechler, Scott, , ,			Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2019		
Mailing Address 75 Rockefeller Plaza 14th Floor			FEC Identification Number C		
City New York	State NY	Zip Code 10019	Amount of Each Disbursement this Period 2700.00		
Purpose of Disbursement Refund		Category/ Type	Transaction ID : D559065		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input 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) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	- 2700.00
TOTAL This Period (last page this line number only).....▶	