

**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)	PAGE 29 OF 60
<input type="checkbox"/> 21b <input type="checkbox"/> 27	<input type="checkbox"/> 22 <input type="checkbox"/> 28a	<input checked="" type="checkbox"/> 23 <input type="checkbox"/> 28b
<input type="checkbox"/> 24	<input type="checkbox"/> 25 <input type="checkbox"/> 29	<input type="checkbox"/> 26 <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)
Colorado Democratic Party

Full Name (Last, First, Middle Initial) A. Bennet for Colorado	Date of Disbursement M M / D D / Y Y Y Y Y Y 07 / 01 / 2015
Mailing Address 1900 Grant Street, Suite 1170	Transaction ID : 23-00-01965-01965 Amount of Each Disbursement this Period 625.00 <input type="checkbox"/> Memo Item
City State Zip Code Denver CO 80203-4344	
Purpose of Disbursement In-Kind Rent	
Candidate Name Michael Bennet	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B.	Date of Disbursement M M / D D / Y Y Y Y Y Y
Mailing Address	Amount of Each Disbursement this Period Memo Item
City State Zip Code	
Purpose of Disbursement	
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) ▼

Full Name (Last, First, Middle Initial) C.	Date of Disbursement M M / D D / Y Y Y Y Y Y
Mailing Address	Amount of Each Disbursement this Period Memo Item
City State Zip Code	
Purpose of Disbursement	
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) ▼

SUBTOTAL of Disbursements This Page (optional)..... ▶	625.00
TOTAL This Period (last page this line number only)..... ▶	625.00