

**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 72 OF 95	
	<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)  
**Val Demings for Congress**

**A. ANGIE CRAIG FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 22116

City Eagan State MN Zip Code 55122-0116

Purpose of Disbursement Political Contribution Category/Type 011

Candidate Name **CRAIG, ANGELA DAWN, , ,**

Office Sought:  House  Senate  President Disbursement For: 2016  Primary  General  Other (specify) ▼

State: MN District: 02

Date of Disbursement: 10 / 01 / 2016

FEC Identification Number: **C** C00575209

Amount of Each Disbursement this Period: 1000.00

Transaction ID : **VNTSD9TT860**

Memo Item

**B. FRIENDS OF PATRICK MURPHY**

Full Name (Last, First, Middle Initial)  
Mailing Address 4521 Pga Blvd # 412

City Palm Beach Gardens State FL Zip Code 33418-3997

Purpose of Disbursement Political Contribution Category/Type 011

Candidate Name **MURPHY, PATRICK E, , ,**

Office Sought:  House  Senate  President Disbursement For: 2016  Primary  General  Other (specify) ▼

State: FL District: 00

Date of Disbursement: 10 / 01 / 2016

FEC Identification Number: **C** C00493825

Amount of Each Disbursement this Period: 1000.00

Transaction ID : **VNTSD9TT5X5**

Memo Item

**C. HILLARY VICTORY FUND**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 5256

City New York State NY Zip Code 10185-5256

Purpose of Disbursement Political Contribution Category/Type 011

Candidate Name **HILLARY VICTORY FUND**

Office Sought:  House  Senate  President Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 01 / 2016

FEC Identification Number: **C** C00586537

Amount of Each Disbursement this Period: 2000.00

Transaction ID : **VNTSD9TT6S7**

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 4000.00

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