

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

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)

ActBlue

Full Name (Last, First, Middle Initial)

**A. HALL-WHITE, ALTHEA, , ,**

Mailing Address 2655 TILLMAN STREET

City  
NORTH CHARLESTONState  
SCZip Code  
29405Purpose of Disbursement  
Contribution Refund

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2017

FEC Identification Number

**C**

Transaction ID : SB28A\_8155I

Amount of Each Disbursement this Period

1.50

☐ Memo Item Refund of contribution, initially  
earmarked for ACTBLUE  
(C00401224)

Full Name (Last, First, Middle Initial)

**B. HALLAWAY, RASHID, , ,**

Mailing Address 522 MAGNOLIA AVENUE

City  
CHARLOTTEState  
NCZip Code  
28203Purpose of Disbursement  
Contribution Refund

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		02		2017

FEC Identification Number

**C**

Transaction ID : SB28A\_7528I

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Refund of contribution, initially  
earmarked for DONNELLY FOR  
INDIANA (C00393652)

Full Name (Last, First, Middle Initial)

**C. HALLINAN, EDA, , ,**

Mailing Address 2593 1 2 BEACHWOOD DR

City  
LOS ANGELESState  
CAZip Code  
90068Purpose of Disbursement  
Contribution Refund

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2017

FEC Identification Number

**C**

Transaction ID : SB28A\_7375

Amount of Each Disbursement this Period

1.00

☐ Memo Item Refund of contribution, initially  
earmarked for ACTBLUE  
(C00401224)**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1002.50