

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

PAGE 311 OF 312

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

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NAME OF COMMITTEE (In Full)  
**Romanoff for Colorado**

Full Name (Last, First, Middle Initial) <b>A. Allison, Shirley, , ,</b>				Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2019	
Mailing Address 780 Field St					
City Lakewood		State CO	Zip Code 80215		
Purpose of Disbursement Refund			<input type="checkbox"/>		
Candidate Name			Category/ Type		
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State:	District:				
FEC Identification Number C				Amount of Each Disbursement this Period 500.00	
Transaction ID : D286401				<input type="checkbox"/> Memo Item	
Full Name (Last, First, Middle Initial) <b>B. Molison, Ann, D., ,</b>				Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2019	
Mailing Address 1307 Front Nine Dr					
City Fort Collins		State CO	Zip Code 80525-9457		
Purpose of Disbursement Refund			<input type="checkbox"/>		
Candidate Name			Category/ Type		
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State:	District:				
FEC Identification Number C				Amount of Each Disbursement this Period 500.00	
Transaction ID : D286214				<input type="checkbox"/> Memo Item	
Full Name (Last, First, Middle Initial) <b>C.</b>				Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address					
City		State	Zip Code		
Purpose of Disbursement			<input type="checkbox"/>		
Candidate Name			Category/ Type		
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State:	District:				
FEC Identification Number C				Amount of Each Disbursement this Period	
				<input type="checkbox"/> Memo Item	
<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶				1000.00	
<b>TOTAL</b> This Period (last page this line number only).....▶				1000.00	