

**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"/> 24	<input type="checkbox"/> 25	<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. DIANA MORTON

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		23		2015

Mailing Address 10 HEDDIN PLACE

Transaction ID : SB28A_25500339

City	State	Zip Code
MIDDLETOWN	NJ	07748

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution Refund

Category/
Type

 500.00

Candidate Name

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) ▼	

Refund of contribution, initially earmarked for
DEMOCRATIC CONGRESSIONAL CAMPAIGN
COMMITTEE (C000009)

State: District:

Full Name (Last, First, Middle Initial)

B. ROBERT MORTON

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		13		2015

Mailing Address POST OFFICE BOX 16,, 274 POVERTY H

Transaction ID : SB28A_25008686

City	State	Zip Code
REDDING RIDGE,	CT	06876

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution Refund

Category/
Type

 35.00

Candidate Name

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) ▼	

Refund of contribution, initially earmarked for
DEMOCRATIC CONGRESSIONAL CAMPAIGN
COMMITTEE (C000009)

State: District:

Full Name (Last, First, Middle Initial)

C. ROBERT MORTON

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		13		2015

Mailing Address POST OFFICE BOX 16,, 274 POVERTY H

Transaction ID : SB28A_25008688

City	State	Zip Code
REDDING RIDGE,	CT	06876

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution Refund

Category/
Type

 3.50

Candidate Name

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) ▼	

Refund of contribution, initially earmarked for ACTBLUE
(C00401224)

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►
 538.50