Image# 28934597019

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)
☐ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☒ 21

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NAME OF COMMITTEE (In Full)
Linda Stender for Congress

A.

Full Name (Last, First, Middle Initial)
New Jersey Democratic State Committee

Mailing Address 196 West State Street

City Trenton State NJ Zip Code 08608

Purpose of Disbursement
Unlimited Transfer

Candidate Name
New Jersey Democratic State Committee

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: D186110
Date of Disbursement
MM 10 / DD 16 / YYYY 2008

Amount of Each Disbursement this Period
100000.00

☐ Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
New Jersey Democratic State Committee

Mailing Address 196 West State Street

City Trenton State NJ Zip Code 08608

Purpose of Disbursement
Unlimited Transfer

Candidate Name
New Jersey Democratic State Committee

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: D187742
Date of Disbursement
MM 10 / DD 21 / YYYY 2008

Amount of Each Disbursement this Period
90000.00

☐ Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **190000.00**

TOTAL This Period (last page this line number only) ..... ▶ **190000.00**