

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input 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)  
**OCEAN STATE POLITICAL ACTION COMMITTEE (OSPAC)**

Full Name (Last, First, Middle Initial)  
**A. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			01			2018			

Mailing Address 430 SOUTH CAPITOL STREET, SE  
2ND FLOOR

City WASHINGTON State DC Zip Code 20003

FEC Identification Number

**C**

**Transaction ID : SB23.4746**

Amount of Each Disbursement this Period

5000.00

Memo Item

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Category/Type

Full Name (Last, First, Middle Initial)  
**B.**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Mailing Address

City State Zip Code

FEC Identification Number

**C**

Amount of Each Disbursement this Period

Memo Item

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Category/Type

Full Name (Last, First, Middle Initial)  
**C.**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Mailing Address

City State Zip Code

FEC Identification Number

**C**

Amount of Each Disbursement this Period

Memo Item

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Category/Type

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

5000.00

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

5000.00