

**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 885 OF 890

<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)  
**Ellison for Congress**

Full Name (Last, First, Middle Initial) <b>A. Lyons, Barbara, , ,</b>				Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2017	
Mailing Address 1414 Hinman Ave					
City Evanston		State IL	Zip Code 60201-4761		
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: 2018 <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 50.00	
				Transaction ID : VN7AV9X02X0	
				<input type="checkbox"/> Memo Item	
Full Name (Last, First, Middle Initial) <b>B. Paulson, Tim, , ,</b>				Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2017	
Mailing Address 137 Lundys Ln					
City San Francisco		State CA	Zip Code 94110-5128		
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: 2018 <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 250.00	
				Transaction ID : VN7AV9X18B9	
				<input type="checkbox"/> Memo Item	
Full Name (Last, First, Middle Initial) <b>c. Raymond, Sylvester, , ,</b>				Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2017	
Mailing Address 8668 Delmar Blvd					
City Saint Louis		State MO	Zip Code 63124-1939		
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: 2018 <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 50.00	
				Transaction ID : VN7AV9X1BJ1	
				<input type="checkbox"/> Memo Item	
<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶				350.00	
<b>TOTAL</b> This Period (last page this line number only).....▶					