

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

PAGE 1997 (OF 724850)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. BARNES, ROBERT, , ,

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	9		2	0	1	7

Mailing Address 3050 BENEDICT CANYON DR

City
BEVERLY HILLSState
CAZip Code
90210Purpose of Disbursement
Contribution Refund

Candidate Name

Category/
TypeOffice 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**Transaction ID : SB28A_6803f**

Amount of Each Disbursement this Period

5.00

☐ Memo Item Refund of contribution, initially earmarked for ACTBLUE (C00401224)

Full Name (Last, First, Middle Initial)

B. BARNES, SARA, , ,

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	6		2	0	1	7

Mailing Address 3527 BALBOA STREET

City
SAN FRANCISCOState
CAZip Code
94121Purpose of Disbursement
Contribution Refund

Candidate Name

Category/
TypeOffice 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**Transaction ID : SB28A_6796f**

Amount of Each Disbursement this Period

15.00

☐ Memo Item Refund of contribution, initially earmarked for CHC BOLD PAC/COMMITTEE FOR HISPANIC CAUSES BUILDING

Full Name (Last, First, Middle Initial)

C. BARNETT, NORMA, , ,

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	1		2	0	1	7

Mailing Address 637 5TH STREET EAST

City
SONOMAState
CAZip Code
95476Purpose of Disbursement
Contribution Refund

Candidate Name

Category/
TypeOffice 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**Transaction ID : SB28A_6902**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item Refund of contribution, initially earmarked for PROGRESSIVE CHANGE CAMPAIGN
SUBTOTAL of Disbursements This Page (optional).....▶

2520.00

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