

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

PAGE 45293 OF 46257

<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)

DCCC

Full Name (Last, First, Middle Initial)

A. Archer, E. James, , ,

Mailing Address 425 Fairgate Rd

City
SacramentoState
CAZip Code
95825-6321Purpose of Disbursement
Contribution Refund

Candidate Name

ACTBLUE PAC

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		11		2016

FEC Identification Number

C**Transaction ID : VT3CV9KX8C**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Archer, E. James, , ,

Mailing Address 425 Fairgate Rd

City
SacramentoState
CAZip Code
95825-6321Purpose of Disbursement
Contribution Refund

Candidate Name

ACTBLUE PAC

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		11		2016

FEC Identification Number

C**Transaction ID : VT3CV9KX8D**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Archer, E. James, , ,

Mailing Address 425 Fairgate Rd

City
SacramentoState
CAZip Code
95825-6321Purpose of Disbursement
Contribution Refund

Candidate Name

ACTBLUE PAC

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		11		2016

FEC Identification Number

C**Transaction ID : VT3CV9KX8E**

Amount of Each Disbursement this Period

5.00

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

40.00