

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

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<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)

Kennedy for Massachusetts

Full Name (Last, First, Middle Initial)

**A. Rising, Nelson, , ,**

Mailing Address 435 Georgian Rd

City  
La Canada FlintridgeState  
CAZip Code  
91011-3545Purpose of Disbursement  
Contribution refund

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		30		2019

FEC Identification Number

C

Amount of Each Disbursement this Period

5600.00

Transaction ID : VNGXF9YV0Y4

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Rodriguez, claudia, , ,**

Mailing Address PO Box 70013

City  
Staten IslandState  
NYZip Code  
10307-0013Purpose of Disbursement  
Contribution refund

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		06		2019

FEC Identification Number

C

Amount of Each Disbursement this Period

50.00

Transaction ID : VNGXF9YVGD6

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. Sher, Lauren, , ,**

Mailing Address 220 16th St SE

City  
WashingtonState  
DCZip Code  
20003-1544Purpose of Disbursement  
Contribution refund

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		11		2019

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : VNGXF9YX5K3

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

5900.00

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