

**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"/> 24	<input type="checkbox"/> 25	<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)
National Grid USA Political Action Committee

Full Name (Last, First, Middle Initial)

A. CICILLINE COMMITTEE

Mailing Address PO Box 9107

City Providence State RI Zip Code 02940-9107

Purpose of Disbursement
Political Contribution

Candidate Name
Rep. David N. Cicilline

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: RI District: 01

Date of Disbursement

MM / DD / YYYY
03 / 23 / 2016

Transaction ID : **BD3F24D3D1C304C43A8A**

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. DONOVAN FOR CONGRESS

Mailing Address 104 Hume Avenue

City Alexandria State VA Zip Code 22301-1015

Purpose of Disbursement
Political Contribution

Candidate Name
Rep. Daniel M. Donovan Jr.

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: NY District: 11

Date of Disbursement

MM / DD / YYYY
03 / 01 / 2016

Transaction ID : **B7E0DF3EB543D4144841**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. FRIENDS OF FRANK GUINTA

Mailing Address 1006 Pendleton Street

City Alexandria State VA Zip Code 22314-1837

Purpose of Disbursement
Political Contribution

Candidate Name
Rep. Frank C. Guinta

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: NH District: 01

Date of Disbursement

MM / DD / YYYY
03 / 25 / 2016

Transaction ID : **B652A2E81435F4C65BA4**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

2500.00