

SCHEDULE L-B (FEC Form 3X)
ITEMIZED DISBURSEMENTS
OF LEVIN FUNDS

Use separate schedule(s)
for each category of the
Aggregation Page

FOR LINE NUMBER: (check only one)	PAGE	OF
<input type="checkbox"/> 4a	<input type="checkbox"/> 4c	<input type="checkbox"/> 5
<input type="checkbox"/> 4b	<input type="checkbox"/> 4d	

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NAME OF COMMITTEE (In Full)

Full Name (Last, First, Middle Initial) / Full Organization Name ☐ Memo Item

Date of Disbursement

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial) / Full Organization Name ☐ Memo Item

Date of Disbursement

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Amount of Each Disbursement this Period

A diagram of a rectangular frame structure. It consists of 10 vertical bars and 3 horizontal bars. The top and bottom horizontal bars are continuous across the entire width. The middle horizontal bar is divided into three segments by two vertical bars. The vertical bars are numbered 1 through 10 from left to right. The horizontal bars are numbered 1 (top), 2 (middle), and 3 (bottom).

Full Name (Last, First, Middle Initial) / Full Organization Name ☐ Memo Item

Date of Disbursement

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Amount of Each Disbursement this Period

A diagram of a rectangular frame structure. It consists of 12 vertical bars and 3 horizontal bars. The horizontal bars are located at the top, bottom, and in the middle. The vertical bars are spaced evenly along the top and bottom horizontal bars. The middle horizontal bar is connected to the vertical bars by small circles, suggesting a different type of joint or support.

Full Name (Last, First, Middle Initial) / Full Organization Name ☐ Memo Item

Date of Disbursement

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial) / Full Organization Name ☐ Memo Item

Date of Disbursement

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Amount of Each Disbursement this Period

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

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