

**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)

**Trucking Political Action Committee of the American Trucking Associations Inc.**

Full Name (Last, First, Middle Initial)

**A. Boehner for Speaker**

Mailing Address 320 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2013  
 Primary  General  
 Other (specify) ▼

State: OH District:

Not Applicable

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	3

**Transaction ID : B451788**

Amount of Each Disbursement this Period

2	5	0	0	0	0
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Full Name (Last, First, Middle Initial)

**B. Friends of Jim Inhofe Committee**

Mailing Address PO Box 13300 .

City Oklahoma City State OK Zip Code 73113

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: OK District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	3

**Transaction ID : B451792**

Amount of Each Disbursement this Period

2	5	0	0	0	0
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Full Name (Last, First, Middle Initial)

**C. Blumenauer for Congress**

Mailing Address 830 NE Holladay #105

City Portland State OR Zip Code 97232

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: OR District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	5		2	0	1	3

**Transaction ID : B452103**

Amount of Each Disbursement this Period

1	0	0	0	0	0
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

6	0	0	0	0	0
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**TOTAL** This Period (last page this line number only)..... ▶

6	0	0	0	0	0
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