

**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)

UNITEDS MINE WORKERS OF AMERICA POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. JOHN TIERNEY FOR CONGRESS

Mailing Address 12 HUSSEY AVENUE

City DANVERS State MA Zip Code 01923

Purpose of Disbursement
CONTRIBUTION

Candidate Name

JOHN F TIERNEY

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MA District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		07		2013

Transaction ID : SB23.27611

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. MORGAN GRIFFITH FOR CONGRESS

Mailing Address PO BOX 361

City CHRISTIANSBURG State VA Zip Code 24068

Purpose of Disbursement
CONTRIBUTION

Candidate Name

H MORGAN GRIFFITH

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: VA District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2013

Transaction ID : SB23.27634

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. STIVERS FOR CONGRESS

Mailing Address 4679 WINTERSET DRIVE

City COLUMBUS State OH Zip Code 43220

Purpose of Disbursement
CONTRIBUTION

Candidate Name

STEVE MR. STIVERS

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: OH District: 15

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		09		2013

Transaction ID : SB23.27619

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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