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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Alzheimers Impact Movement Political Action Committee

A. Full Name (Last, First, Middle Initial): Democratic Congressional Camp. Cmte
Mailing Address: 430 S. Capitol St. SE 2nd Fl.
City: Washington State: DC Zip Code: 20003
Purpose of Disbursement: Contribution to Committee
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2014 ☐ Primary ☐ General ☒ Other (specify) ▼ Other2014
Date of Disbursement: 02 / 27 / 2014
Transaction ID : B375877F5808A431C99E
Amount of Each Disbursement this Period: 15000.00

B. Full Name (Last, First, Middle Initial): Friends of Lois Capps
Mailing Address: P.O. Box 23940
City: Santa Barbara State: CA Zip Code: 93121
Purpose of Disbursement: Contribution to Committee
Candidate Name: Rep. Lois Capps
Category/Type:
Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 24
Disbursement For: 2014 ☒ Primary ☐ General ☐ Other (specify) ▼
Date of Disbursement: 02 / 11 / 2014
Transaction ID : B40A6698D77294C2B9FF
Amount of Each Disbursement this Period: 1000.00

C. Full Name (Last, First, Middle Initial): National Rep. Congressional Cmte
Mailing Address: 320 1st St. SE
City: Washington State: DC Zip Code: 20003
Purpose of Disbursement: Contribution to Committee
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2014 ☐ Primary ☐ General ☒ Other (specify) ▼ Other2014
Date of Disbursement: 02 / 27 / 2014
Transaction ID : B3E80038F21BD4C0B990
Amount of Each Disbursement this Period: 15000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 31000.00

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