

**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)
Foley & Lardner Political Fund, Inc.

Full Name (Last, First, Middle Initial)

A. KAREN BASS FOR CONGRESS

Mailing Address 777 S. FIGUEROA STREET
SUITE 4050

City LOS ANGELES State CA Zip Code 90017

Purpose of Disbursement
Contribution to candidate

011

Candidate Name

KAREN BASS

Category/
Type

Office Sought: House
 Senate
 President
State: CA District: 37

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2014

Transaction ID : SB23.20216

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. RYAN FOR CONGRESS

Mailing Address P. O. Box 1919
P. O. Box 1919

City Janesville State WI Zip Code 53547

Purpose of Disbursement
Contribution to candidate

011

Candidate Name

PAUL D RYAN

Category/
Type

Office Sought: House
 Senate
 President
State: WI District: 01

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 03 / 2014

Transaction ID : SB23.20206

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. SENSENBRENNER COMMITTEE

Mailing Address PO BOX 575

City BROOKFIELD State WI Zip Code 53008

Purpose of Disbursement
Contribution to candidate

011

Candidate Name

F JAMES JR SENSENBRENNER

Category/
Type

Office Sought: House
 Senate
 President
State: WI District: 05

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 29 / 2014

Transaction ID : SB23.20215

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)..... ▶