

**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)

International Longshore and Warehouse Union -- Political Action Fund

Full Name (Last, First, Middle Initial)

A. KAREN BASS

Mailing Address 777 S. FIGUEROA STREET
SUITE 4050

City LOS ANGELES State CA Zip Code 90017

Purpose of Disbursement
Contribution in support of candidate

011

Candidate Name

KAREN BASS FOR CONGRESS

Category/
Type

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

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	1	4

Transaction ID : SB23.86160

Amount of Each Disbursement this Period

1	5	0	0	.	0	0
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Full Name (Last, First, Middle Initial)

B. BRUCE L. BRALEY

Mailing Address 247 SHERIDAN ROAD

City WATERLOO State IA Zip Code 50701

Purpose of Disbursement
Contribution in support of candidate

011

Candidate Name

BRALEY FOR CONGRESS

Category/
Type

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

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	1	4

Transaction ID : SB23.86118

Amount of Each Disbursement this Period

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

C. JULIA BROWNLEY

Mailing Address 5613 FOXWOOD DRIVE

City OAK PARK State CA Zip Code 91377

Purpose of Disbursement
Contribution in support of candidate

011

Candidate Name

JULIA BROWNLEY FOR CONGRESS

Category/
Type

Office Sought: House
 Senate
 President
State: CA District: 26

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	2		2	0	1	4

Transaction ID : SB23.86134

Amount of Each Disbursement this Period

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

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

5	0	0	0	.	0	0
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5	0	0	0	.	0	0
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