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 [X] 23 24 25 26
27 28a 28b 28c 29 30b

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NAME OF COMMITTEE (In Full)
AMERICAN ASSOCIATION OF NURSE PRACTITIONERS POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial): FRIENDS OF JOHN BOEHNER
Mailing Address: 7908 CINCINNATI DAYTON ROAD, SUITE I
City: WEST CHESTER State: OH Zip Code: 45069
Purpose of Disbursement: Political Contribution
Category/Type: 011
Candidate Name:
Office Sought: [X] House [ ] Senate [ ] President
State: OH District: 08
Disbursement For: 2016 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 02 / 17 / 2015
Transaction ID : SB23.6841
Amount of Each Disbursement this Period: 5000.00

B. Full Name (Last, First, Middle Initial): FRIENDS OF SCHUMER
Mailing Address: 192 LEXINGTON AVENUE SUITE 1001
City: NEW YORK State: NY Zip Code: 10016
Purpose of Disbursement: Political Contribution
Category/Type: 011
Candidate Name:
Office Sought: [ ] House [X] Senate [ ] President
State: NY District: 00
Disbursement For: 2016 [ ] Primary [X] General [ ] Other (specify)
Date of Disbursement: 04 / 20 / 2015
Transaction ID : SB23.6782
Amount of Each Disbursement this Period: 1000.00

C. Full Name (Last, First, Middle Initial): FRIENDS OF SCHUMER
Mailing Address: 192 LEXINGTON AVENUE SUITE 1001
City: NEW YORK State: NY Zip Code: 10016
Purpose of Disbursement: Political Contribution
Category/Type: 011
Candidate Name:
Office Sought: [ ] House [X] Senate [ ] President
State: NY District: 00
Disbursement For: 2016 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 04 / 20 / 2015
Transaction ID : SB23.6790
Amount of Each Disbursement this Period: 4000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 10000.00

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