

**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)  
**GLOVER PARK GROUP LLC PAC (GLOVER PARK GROUP PAC)**

Full Name (Last, First, Middle Initial)

**A. Tony Cardenas for Congress**

Mailing Address 249 E. Oceans Blvd.  
Suite 685

City Long Beach State CA Zip Code 90802

Purpose of Disbursement  
Contribution

Candidate Name  
**Tony Cardenas**

Office Sought:  House  
 Senate  
 President  
State: CA District: 29

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 23 / 2015

**Transaction ID : D576768**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Kyrsten Sinema for Congress**

Mailing Address PO Box 25879

City Tempe State AZ Zip Code 85285

Purpose of Disbursement  
Contribution

Candidate Name  
**Kyrsten Sinema**

Office Sought:  House  
 Senate  
 President  
State: AZ District: 09

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 24 / 2015

**Transaction ID : D578398**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Democratic Congressional Campaign Committee**

Mailing Address 430 South Capitol Street, SE  
2nd Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement  
2015 Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 22 / 2015

**Transaction ID : D574939**

Amount of Each Disbursement this Period

1000.00

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

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

2500.00