

**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)
American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Friends Of Joe Pitts

Mailing Address PO Box 775

City State Zip Code
Unionville PA 19375

Purpose of Disbursement
Contribution

Candidate Name

Rep. Joe R. Pitts

Office Sought: House
 Senate
 President
State: PA District: 16

Disbursement For: 2016
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : 22294575

Amount of Each Disbursement this Period

Contribution

Full Name (Last, First, Middle Initial)

B. Scott Rigell For Congress

Mailing Address 915 First Colonial Road
Suite 100

City State Zip Code
Virginia Beach VA 23454

Purpose of Disbursement
Contribution

Candidate Name

Rep. Scott E. Rigell

Office Sought: House
 Senate
 President
State: VA District: 02

Disbursement For: 2016
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : 22294576

Amount of Each Disbursement this Period

Contribution

Full Name (Last, First, Middle Initial)

C. Whitfield For Congress Committee

Mailing Address P.O. Box 391

City State Zip Code
Hopkinsville KY 42241

Purpose of Disbursement
Contribution

Candidate Name

Rep. Edward Whitfield

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

Disbursement For: 2016
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : 22294577

Amount of Each Disbursement this Period

Contribution

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

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