

**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"/> 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)

**LEADERSHIP OPPORTUNITY INNOVATION SERVICE PAC - LOIS PAC**

Full Name (Last, First, Middle Initial)

**A. AMI BERA FOR CONGRESS**

Mailing Address PO BOX 582496

City  
ELK GROVE

State  
CA

Zip Code  
95758

Purpose of Disbursement  
Contribution

Candidate Name

**BERA, AMERISH, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: CA District: 07

Date of Disbursement

MM / DD / YYYY  
09 / 13 / 2016

FEC Identification Number

**C** H0CA03078

**Transaction ID : SB23.5154**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. BARRAGAN FOR CONGRESS**

Mailing Address 1840 SOUTH GAFFEY STREET #421

City  
SAN PEDRO

State  
CA

Zip Code  
90731

Purpose of Disbursement  
Contribution

Candidate Name

**BARRAGAN, NANETTE, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: CA District: 44

Date of Disbursement

MM / DD / YYYY  
09 / 27 / 2016

FEC Identification Number

**C** H6CA44103

**Transaction ID : SB23.5168**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. CAIN FOR CONGRESS**

Mailing Address P.O. BOX 1523

City  
BANGOR

State  
ME

Zip Code  
04402

Purpose of Disbursement  
Contribution

Candidate Name

**CAIN, EMILY ANN, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: ME District: 02

Date of Disbursement

MM / DD / YYYY  
09 / 13 / 2016

FEC Identification Number

**C** H4ME02200

**Transaction ID : SB23.5139**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

3000.00

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