

**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)
Stand Tall America PAC (STAPAC)

Full Name (Last, First, Middle Initial)

A. FITZPATRICK FOR CONGRESS

Mailing Address PO BOX 185

City LANGHORNE State PA Zip Code 19047

Purpose of Disbursement
Political Contribution

011

Candidate Name

MICHAEL G. FITZPATRICK

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: PA District: 08

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	8		2	0	1	3

Transaction ID : **SB23.5028**

Amount of Each Disbursement this Period

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

B. FRIENDS OF DAVE JOYCE

Mailing Address 320 KENARDEN DRIVE

City CLEVELAND State OH Zip Code 44143

Purpose of Disbursement
Political Contribution

011

Candidate Name

DAVID P JOYCE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: OH District: 14

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	8		2	0	1	3

Transaction ID : **SB23.5032**

Amount of Each Disbursement this Period

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

C. FRIENDS OF JOE HECK

Mailing Address PO BOX 750114

City LAS VEGAS State NV Zip Code 89136

Purpose of Disbursement
Political Contribution

011

Candidate Name

JOE HECK

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NV District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	8		2	0	1	3

Transaction ID : **SB23.5031**

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
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SUBTOTAL of Disbursements This Page (optional)..... ▶

6	0	0	0	0	0	0	0	0	0
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TOTAL This Period (last page this line number only)..... ▶

6	0	0	0	0	0	0	0	0	0
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