

**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)

**International Association of Heat & Frost Insulators and Allied Workers**

Full Name (Last, First, Middle Initial)

**A. Friends of Bob Brady**

Mailing Address P.O. Box 22646

City Philadelphia

State PA

Zip Code 19110

Purpose of Disbursement  
Contribution to Federal Candidate

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			07			2018			

FEC Identification Number

**C**   
**Transaction ID : SB23.11384**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF SHERROD BROWN**

Mailing Address 2280 KRESGE DRIVE  
Suite 800

City AMHERST

State OH

Zip Code 44001

Purpose of Disbursement  
Contribution to Federal Candidate

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: OH District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			26			2018			

FEC Identification Number

**C**   
**Transaction ID : SB23.11372**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. HORSFORD FOR CONGRESS**

Mailing Address 6100 ELTON AVE, SUITE 1000

City LAS VEGAS

State NV

Zip Code 89107

Purpose of Disbursement  
Contribution to Federal Candidate

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: NV District: 04

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			05			2018			

FEC Identification Number

**C**   
**Transaction ID : SB23.11374**  
 Amount of Each Disbursement this Period

Memo Item

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

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

<input type="text" value="4500.00"/>
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<input type="text" value=""/>
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