

**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)  
**FMR LLC Political Action Committee - Federal (Fidelity PAC)**

Full Name (Last, First, Middle Initial)

**A. Portman for Senate Committee**

Mailing Address 9856 Archer Lane

City Dublin State OH Zip Code 43017-8914

Purpose of Disbursement  
2016 General

Category/  
Type

Candidate Name

**Rob J. Portman**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: OH District:

Date of Disbursement

/  /

**Transaction ID : 37394F49EE41AA6F0DA**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Price for Congress**

Mailing Address PO Box 425

City Roswell State GA Zip Code 30077

Purpose of Disbursement  
2016 Primary

Category/  
Type

Candidate Name

**Thomas E. Price M.D.**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: GA District: 06

Date of Disbursement

/  /

**Transaction ID : D24C19FD58D12CC47A9**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Prosperity Action Inc.**

Mailing Address 320 1st Street SE

City Washington State DC Zip Code 22314-2000

Purpose of Disbursement  
2015 Contribution

Category/  
Type

Candidate Name

**Prosperity Action Inc.**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼  
Contribution

State: District:

Date of Disbursement

/  /

**Transaction ID : E37ABBB3B32933BBF20**

Amount of Each Disbursement this Period

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

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