

**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)
ICE PAC

A. DIANE BLACK FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 1437

M M M	/	D D D	/	Y Y Y Y Y
08		01		2016

City GALLATIN State TN Zip Code 37066

FEC Identification Number

Purpose of Disbursement
Contribution

C	C00472878
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Candidate Name

Category/
Type

Transaction ID : SB23.5472

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President
State: TN District: 06

Disbursement For: 2016
 Primary General
 Other (specify) ▼

2000.00

Memo Item

B. DUFFY FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 186

M M M	/	D D D	/	Y Y Y Y Y
09		19		2016

City Ashland State WI Zip Code 54806

FEC Identification Number

Purpose of Disbursement
Contribuion

C	C00464339
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Candidate Name

Category/
Type

Transaction ID : SB23.5498

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President
State: WI District: 07

Disbursement For: 2016
 Primary General
 Other (specify)

2000.00

Memo Item

C. FRIENDS OF AMATA

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address POST OFFICE BOX 6171

M M M	/	D D D	/	Y Y Y Y Y
09		19		2016

City PAGO PAGO State AS Zip Code 96799

FEC Identification Number

Purpose of Disbursement
Contribution

C	C00393041
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Candidate Name

Category/
Type

Transaction ID : SB23.5501

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President
State: AS District: 00

Disbursement For: 2016
 Primary General
 Other (specify) ▼

1000.00

Memo Item

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

5000.00

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

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