

**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)  
**Congressional Black Caucus PAC**

Full Name (Last, First, Middle Initial)

**A. CITIZENS FOR RUSH**

Mailing Address PO Box 7292

City Chicago State IL Zip Code 60680-7292

Purpose of Disbursement  
Contribution

Candidate Name

**BOBBY LEE RUSH**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: IL District: 01

Date of Disbursement

MM / DD / YYYY  
01 / 04 / 2016

**Transaction ID : VNV6Y9SNZS8**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. MARC VEASEY CONGRESSIONAL CAMPAIGN COMMITTEE**

Mailing Address PO Box 50084

City Fort Worth State TX Zip Code 76105-0084

Purpose of Disbursement  
Contribution

Candidate Name

**MARC ALLISON VEASEY**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: TX District: 33

Date of Disbursement

MM / DD / YYYY  
02 / 10 / 2016

**Transaction ID : VNV6Y9SP020**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. VAL DEMINGS FOR CONGRESS**

Mailing Address PO Box 536926

City Orlando State FL Zip Code 32853-6926

Purpose of Disbursement  
Contribution

Candidate Name

**VALDEZ VAL DEMINGS**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: FL District: 10

Date of Disbursement

MM / DD / YYYY  
02 / 19 / 2016

**Transaction ID : VNV6Y9SP037**

Amount of Each Disbursement this Period

5000.00

Memo Item

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

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

15000.00

15000.00