

**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)
CALIFORNIA WATER SERVICE GROUP

Full Name (Last, First, Middle Initial)

A. MCCLINTOCK FOR CONGRESS

Mailing Address 2150 RIVER PLAZA DR. #150

City State Zip Code
SACRAMENTO CA 95833

Purpose of Disbursement
Political Contribution

011

Candidate Name
THOMAS MCCLINTOCK

Category/
Type

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify) ▼
State: CA District: 04

Date of Disbursement

MM / DD / YYYY
09 / 26 / 2014

Transaction ID : SB23.5816

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. MCNERNEY FOR CONGRESS

Mailing Address 6520 Village Parkway
Second Floor

City State Zip Code
Dublin CA 94568

Purpose of Disbursement
Political Contribution

011

Candidate Name
JERRY MCNERNEY

Category/
Type

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify) ▼
State: CA District: 11

Date of Disbursement

MM / DD / YYYY
09 / 26 / 2014

Transaction ID : SB23.5818

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. MIKE THOMPSON FOR CONGRESS

Mailing Address 5429 Madison Avenue

City State Zip Code
Sacramento CA 95841

Purpose of Disbursement
Political Contribution

011

Candidate Name
MIKE MR. THOMPSON

Category/
Type

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify) ▼
State: CA District: 01

Date of Disbursement

MM / DD / YYYY
09 / 26 / 2014

Transaction ID : SB23.5817

Amount of Each Disbursement this Period

1000.00

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

2500.00

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