

**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)
SAC PAC

Full Name (Last, First, Middle Initial)

A. Democratic Congressional Campaign Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	16	/	2015

Mailing Address 430 S Capitol St SE

Transaction ID : D500419

City Washington State DC Zip Code 20003-4024

Amount of Each Disbursement this Period

5,000.00

Purpose of Disbursement
Contribution

--

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Democratic Congressional Campaign Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	26	/	2015

Mailing Address 430 S Capitol St SE

Transaction ID : D500420

City Washington State DC Zip Code 20003-4024

Amount of Each Disbursement this Period

10,000.00

Purpose of Disbursement
Contribution

--

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. HILLARY FOR AMERICA

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Mailing Address PO BOX 5256

Transaction ID : D505770

City NEW YORK State NY Zip Code 10185

Amount of Each Disbursement this Period

5,000.00

Purpose of Disbursement
Contribution

--

Candidate Name

HILLARY RODHAM CLINTON

Category/
Type

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District: 00

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

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

20,000.00

20,000.00
