

**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)
Freeport-McMoRan Inc. Citizenship Committee

Full Name (Last, First, Middle Initial)

A. SCALISE FOR CONGRESS

Mailing Address PO BOX 23219

City New Orleans State LA Zip Code 70183-0219

Purpose of Disbursement
Contribution

Candidate Name

Steve Scalise

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: LA District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	1	6

Transaction ID : **BE06E4C439FCC422E815**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
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Memo Item

Full Name (Last, First, Middle Initial)

B. GRASSLEY COMMITTEE, INC

Mailing Address P.O. Box 1000

City Des Moines State IA Zip Code 50304-1000

Purpose of Disbursement
Contribution

Candidate Name

Charles E Grassley

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: IA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	1	6

Transaction ID : **BA05D148721EE4761971**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
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Memo Item

Full Name (Last, First, Middle Initial)

C. MARTIN HEINRICH FOR SENATE

Mailing Address P.O. BOX 25763

City Albuquerque State NM Zip Code 87125-0763

Purpose of Disbursement
Contribution

Candidate Name

Martin Trevor Heinrich

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NM District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	3		2	0	1	6

Transaction ID : **B969AD301AE4B4232813**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
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Memo Item

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

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

1	1	0	0	0	0	0	0	0	0
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1	1	0	0	0	0	0	0	0	0
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