

**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)

Teachers Insurance Annuity Assoc of America College Retirement Equities Fund PAC TIAA-CREF

Full Name (Last, First, Middle Initial)

A. Virginia Foxx for Congress

Mailing Address PO Box 2676

City Boone State NC Zip Code 28607

Purpose of Disbursement Contribution

011

Candidate Name

Virginia A Foxx

Category/Type

Office Sought: House Senate President
State: NC District: 05

Disbursement For: 2016
 Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 20 / 2015

Transaction ID : B585854

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Hudson for Congress

Mailing Address 412 S. Capitol Street SE Suite B

City Washington State DC Zip Code 20003

Purpose of Disbursement Contribution

011

Candidate Name

Richard Hudson

Category/Type

Office Sought: House Senate President
State: NC District: 08

Disbursement For: 2016
 Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 20 / 2015

Transaction ID : B585865

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. The Richard Burr Committee

Mailing Address PO Box 5928

City Winston-Salem State NC Zip Code 27113

Purpose of Disbursement Contribution

011

Candidate Name

Richard Burr

Category/Type

Office Sought: House Senate President
State: NC District:

Disbursement For: 2016
 Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 13 / 2015

Transaction ID : B587768

Amount of Each Disbursement this Period

2000.00

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

4000.00

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