

**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"/> 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)

**Transport Workers Union Political Contributions Committee**

Full Name (Last, First, Middle Initial)

**A. Citizens for Eleanor Holmes Norton**

Mailing Address 2201 Wisconsin Ave. NW Suite 320

City Washington State DC Zip Code 20007

Purpose of Disbursement Contribution

Category/Type

Candidate Name  
**Norton, Eleanor Holmes, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: DC District:

Date of Disbursement  
MM / DD / YYYY  
09 / 12 / 2016

FEC Identification Number  
**C** C00244335  
**Transaction ID : B625568**  
Amount of Each Disbursement this Period  
2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Crist for Congress**

Mailing Address P. O. Box 1547

City St. Petersburg State FL Zip Code 33731

Purpose of Disbursement Contribution

Category/Type

Candidate Name  
**Crist, Charlie, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: FL District: 13

Date of Disbursement  
MM / DD / YYYY  
09 / 12 / 2016

FEC Identification Number  
**C** C00590067  
**Transaction ID : B625584**  
Amount of Each Disbursement this Period  
5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Val Demings for Congress**

Mailing Address P.O. Box 536926

City Orlando State FL Zip Code 32853

Purpose of Disbursement Contribution

Category/Type

Candidate Name  
**Demings, Valdez, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: FL District: 10

Date of Disbursement  
MM / DD / YYYY  
09 / 12 / 2016

FEC Identification Number  
**C** C00498980  
**Transaction ID : B625582**  
Amount of Each Disbursement this Period  
2500.00

Memo Item

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

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

10000.00