

**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)

**Education Management Corporation Employee PAC (EDMC EDU-PAC)**

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF DAVE BRAT INC.**

Mailing Address PO BOX 5094

City State Zip Code  
GLEN ALLEN VA 23058

Purpose of Disbursement  
Contribution to committee

Candidate Name

**David Alan Brat**

Office Sought:  House  
 Senate  
 President  
State: VA District: 07

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 26 / 2016

**Transaction ID : B16B122616DE44358A21**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. MORAN FOR KANSAS**

Mailing Address P.O. BOX 1151

City State Zip Code  
HAYS KS 67601

Purpose of Disbursement  
Contribution to committee

Candidate Name

**Rep. Jerry Moran**

Office Sought:  House  
 Senate  
 President  
State: KS District: 01

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 26 / 2016

**Transaction ID : B4F026AC4F119424C91D**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. ALEXANDER FOR SENATE 2020 INC**

Mailing Address 228 S WASHINGTON STREET SUITE 115

City State Zip Code  
Alexandria VA 22314-5404

Purpose of Disbursement  
Contribution to Committee

Candidate Name

**Sen. Lamar Alexander**

Office Sought:  House  
 Senate  
 President  
State: TN District:

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 26 / 2016

**Transaction ID : BAB169C2B913545519C4**

Amount of Each Disbursement this Period

2500.00

Memo Item

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

4500.00

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