

**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)  
**CVS Health PAC**

**A. Hoyer's Majority Fund**

Full Name (Last, First, Middle Initial)

Mailing Address 700 13Th Street NW  
Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement 2017 Contribution

Candidate Name **Hoyer's Majority Fund**

Office Sought:  House  Senate  President

Disbursement For: 2017  Primary  General  Other (specify) Contribution

State: District:

Date of Disbursement 06 / 29 / 2017

FEC Identification Number **C**

**Transaction ID : 4524F007DA**

Amount of Each Disbursement this Period 5000.00

Memo Item

**B. LOBO PAC**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 492

City Albuquerque State NM Zip Code 87103

Purpose of Disbursement 2017 Contribution

Candidate Name **LOBO PAC**

Office Sought:  House  Senate  President

Disbursement For: 2017  Primary  General  Other (specify) Contribution

State: District:

Date of Disbursement 06 / 29 / 2017

FEC Identification Number **C**

**C00497073**

**Transaction ID : 172EDE8D5E!**

Amount of Each Disbursement this Period 1000.00

Memo Item

**C. Lone Star Leadership PAC**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 30844

City Bethesda State MD Zip Code 20824-0844

Purpose of Disbursement 2017 Contribution

Candidate Name **Lone Star Leadership PAC**

Office Sought:  House  Senate  President

Disbursement For: 2017  Primary  General  Other (specify) Contribution

State: District:

Date of Disbursement 06 / 29 / 2017

FEC Identification Number **C**

**C00415208**

**Transaction ID : 20532EB630!**

Amount of Each Disbursement this Period 1000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 7000.00

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