

**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)
GOP Generation Y Fund

Full Name (Last, First, Middle Initial)

A. MCSALLY FOR CONGRESS

Mailing Address PO BOX 19128

City TUCSON State AZ Zip Code 85731

Purpose of Disbursement
Contribution

011

Candidate Name

MARTHA E MCSALLY

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: AZ District: 02

Date of Disbursement

MM / DD / YYYY
07 / 11 / 2014

Transaction ID : SB23.7250

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. MOOLENAAR FOR CONGRESS

Mailing Address 5915 EASTMAN AVE, STE 100

City MIDLAND State MI Zip Code 48640

Purpose of Disbursement
Contribution

011

Candidate Name

JOHN MOOLENAAR

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MI District: 04

Date of Disbursement

MM / DD / YYYY
07 / 31 / 2014

Transaction ID : SB23.7269

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. MOONEY FOR CONGRESS

Mailing Address P.O. BOX 1863

City MARTINSBURG State WV Zip Code 25402

Purpose of Disbursement
Contribution

011

Candidate Name

ALEXANDER XAVIER MR MOONEY

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: WV District: 02

Date of Disbursement

MM / DD / YYYY
07 / 17 / 2014

Transaction ID : SB23.7256

Amount of Each Disbursement this Period

5000.00

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

11000.00

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