

**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)  
**GLOVER PARK GROUP LLC PAC (GLOVER PARK GROUP PAC)**

Full Name (Last, First, Middle Initial)

**A. Kinzinger For Congress**

Mailing Address P.O. Box 2365

City State Zip Code  
Ottawa IL 61350-6965

Purpose of Disbursement  
Contribution

Candidate Name

**Adam Kinzinger**

Office Sought:  House  
 Senate  
 President  
State: IL District: 16

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
09 / 18 / 2014

**Transaction ID : D550693**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Levin for Congress**

Mailing Address P.O. Box 37

City State Zip Code  
Roseville MI 48066

Purpose of Disbursement  
Contribution

Candidate Name

**Sander M. Levin**

Office Sought:  House  
 Senate  
 President  
State: MI District: 09

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
09 / 05 / 2014

**Transaction ID : D542833**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Majority Committee PAC--MC PAC**

Mailing Address P.O. Box 10134

City State Zip Code  
Bakersfield CA 93389

Purpose of Disbursement  
2014 Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
09 / 05 / 2014

**Transaction ID : D542832**

Amount of Each Disbursement this Period

1000.00

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

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

3000.00