

**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)

**IOWA CONSTRUCTION INDUSTRY PAC/ ASSOCIATED GENERAL CONTRACTORS OF IOWA**

Full Name (Last, First, Middle Initial)

**A. LOEBSACK FOR CONGRESS**

Mailing Address PO BOX 3013

City  
IOWA CITY

State  
IA

Zip Code  
52244

Purpose of Disbursement  
Contribution

011

Candidate Name

**LOEBSACK FOR CONGRESS**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: IA District: 02

Date of Disbursement

MM / DD / YYYY  
09 / 12 / 2016

FEC Identification Number

C C00414318

**Transaction ID : SB23.4526**

Amount of Each Disbursement this Period

3000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. YOUNG FOR IOWA, INC.**

Mailing Address PO BOX 162

City  
VAN METER

State  
IA

Zip Code  
50261

Purpose of Disbursement  
Contribution

011

Candidate Name

**YOUNG FOR IOWA, INC.**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: IA District: 03

Date of Disbursement

MM / DD / YYYY  
07 / 27 / 2016

FEC Identification Number

C C00545616

**Transaction ID : SB23.4540**

Amount of Each Disbursement this Period

3000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

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

6000.00

16000.00