

**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)  
**MAJORITY COMMITTEE PAC--MC PAC**

Full Name (Last, First, Middle Initial)

**A. Zeldin for Congress**

Mailing Address 47 Flintlock Drive

City Shirley State NY Zip Code 11967

Purpose of Disbursement  
PAC Political Contribution

011

Candidate Name

**Lee Zeldin**

Category/  
Type

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

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 21 / 2014

**Transaction ID : SB23-2977-3607-e**

Amount of Each Disbursement this Period

5000

Full Name (Last, First, Middle Initial)

**B. Mullin for Congress**

Mailing Address PO Box 3681

City Muskogee State OK Zip Code 74402-3681

Purpose of Disbursement  
PAC Political Contribution

011

Candidate Name

**Markwayne Mullin**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: OK District: 02

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 22 / 2014

**Transaction ID : SB23-2295-3616-e**

Amount of Each Disbursement this Period

5000

Full Name (Last, First, Middle Initial)

**C. Wenstrup for Congress**

Mailing Address PO Box 9551

City Cincinnati State OH Zip Code 45209

Purpose of Disbursement  
PAC Political Contribution

011

Candidate Name

**Brad Wenstrup**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: OH District: 02

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 22 / 2014

**Transaction ID : SB23-2169-3615-e**

Amount of Each Disbursement this Period

5000

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

15000.00

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