

**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)  
**MICRON TECHNOLOGY, INC. PAC**

Full Name (Last, First, Middle Initial)

**A. HOYER FOR CONGRESS**

Mailing Address 700 13TH STREET, NW  
SUITE 600

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
Contribution

Candidate Name

**STENY HAMILTON HOYER**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: MD District: 05

Date of Disbursement

MM / DD / YYYY  
08 / 01 / 2013

**Transaction ID : SB23.5565**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. MCCONNELL VICTORY COMMITTEE**

Mailing Address 228 S WASHINGTON STREET SUITE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
Contribution

Candidate Name

**MITCH MCCONNELL**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: KY District: 00

Date of Disbursement

MM / DD / YYYY  
08 / 08 / 2013

**Transaction ID : SB23.5755**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. SIMPSON FOR CONGRESS**

Mailing Address 1487 PARKWAY DRIVE

City BLACKFOOT State ID Zip Code 83221

Purpose of Disbursement  
Contribution

Candidate Name

**MICHAEL SIMPSON**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: ID District: 02

Date of Disbursement

MM / DD / YYYY  
08 / 19 / 2013

**Transaction ID : SB23.5761**

Amount of Each Disbursement this Period

5000.00

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

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

12500.00