

**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)
American Academy of Physician Assistants Political Action Committee (PA PAC)

Full Name (Last, First, Middle Initial)
A. JOE KENNEDY FOR CONGRESS

Mailing Address PO BOX 590464

City Newton Center	State MA	Zip Code 02459
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Purpose of Disbursement
Primary 2016 re-election

Candidate Name
Rep. Joseph P. Kennedy III

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: MA District: 04

Date of Disbursement: MM / DD / YYYY
02 / 11 / 2016

Transaction ID : D172331

Amount of Each Disbursement this Period
1000.00

Memo Item

Full Name (Last, First, Middle Initial)
B. LYNN JENKINS FOR CONGRESS

Mailing Address P.O. BOX 1441

City TOPEKA	State KS	Zip Code 66601
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Purpose of Disbursement
Primary 2016 re-election

Candidate Name
Rep. Lynn Jenkins

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: KS District: 02

Date of Disbursement: MM / DD / YYYY
01 / 28 / 2016

Transaction ID : D172328

Amount of Each Disbursement this Period
1000.00

Memo Item

Full Name (Last, First, Middle Initial)
C. GRASSLEY COMMITTEE INC

Mailing Address PO BOX 1000

City DES MOINES	State IA	Zip Code 50304
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Purpose of Disbursement
Primary 2016 re-election

Candidate Name
Sen. Charles E. Grassley

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: IA District: 00

Date of Disbursement: MM / DD / YYYY
03 / 02 / 2016

Transaction ID : D172334

Amount of Each Disbursement this Period
1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	3000.00
TOTAL This Period (last page this line number only).....▶	