

**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)  
**PAC for a Change**

Full Name (Last, First, Middle Initial)

**A. Braley Victory Fund**

Mailing Address 2813 Virginia Place

City Des Moines State IA Zip Code 50321

Purpose of Disbursement  
Federal Contribution

Candidate Name

**Bruce Braley**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: IA District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	4

**Transaction ID : D477258**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

**B. Colorado Senate Victory Fund**

Mailing Address 3623 S. Grape Street

City Denver State CO Zip Code 80222

Purpose of Disbursement  
Federal Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	4

**Transaction ID : D477259**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

**C. Democratic Party of Arkansas**

Mailing Address 1300 W. Capitol Avenue

City Little Rock State AR Zip Code 72201

Purpose of Disbursement  
Federal Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	4

**Transaction ID : D477260**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

1	5	0	0	0	0	0	0	0	0
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**TOTAL** This Period (last page this line number only)..... ▶

1	5	0	0	0	0	0	0	0	0
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