

**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 Institute of Certified Public Accountants Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends Of Erik Paulsen

Mailing Address PO Box 44369

City: Eden Prairie State: MN Zip Code: 55344

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mr. Erik Paulsen

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MN District: 03

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2014

Transaction ID : 37514627

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Westmoreland For Congress

Mailing Address P.O. Box 458

City: Sharpsburg State: GA Zip Code: 30277

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Lynn Westmoreland

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: GA District: 03

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2014

Transaction ID : 37514630

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Lance For Congress

Mailing Address PO Box 225

City: Colonia State: NJ Zip Code: 07067

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mr. Leonard Lance

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NJ District: 07

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2014

Transaction ID : 37514631

Amount of Each Disbursement this Period

500.00

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

1500.00

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