

**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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Wyle Political Action Committee/Wyle Services Corporation (WylePAC)

Full Name (Last, First, Middle Initial)

A. DNC SERVICES CORPORATION/DEMOCRATIC NATIONAL COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		30		2015

Mailing Address 430 SOUTH CAPITOL STREET SE

Transaction ID : SB23.4881

City WASHINGTON State DC Zip Code 20003

Amount of Each Disbursement this Period

3920.00

Purpose of Disbursement
General Contribution

011
Category/ Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. REPUBLICAN NATIONAL COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		30		2015

Mailing Address 310 FIRST STREET SE

Transaction ID : SB23.4883

City WASHINGTON State DC Zip Code 20003

Amount of Each Disbursement this Period

3920.00

Purpose of Disbursement
General Contribution

011
Category/ Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y

Mailing Address

Amount of Each Disbursement this Period

--

City State Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

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

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

7840.00

7840.00
