

**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 Rental Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. SCOTT PETERS FOR CONGRESS

Mailing Address PO BOX 70980

City WASHINGTON State DC Zip Code 20024

Purpose of Disbursement Contribution

011

Candidate Name

SCOTT PETERS

Category/Type

Office Sought: House Senate President

Disbursement For: 2016
 Primary General Other (specify) ▼

State: CA District: 52

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 10 / 2016

Transaction ID : **SB23.8761**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. TEAM RYAN

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement Contribution

011

Candidate Name

PAUL D RYAN

Category/Type

Office Sought: House Senate President

Disbursement For: 2016
 Primary General Other (specify) ▼

State: WI District: 01

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 21 / 2016

Transaction ID : **SB23.8757**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. TOM RICE FOR CONGRESS

Mailing Address PO BOX 70098

City MYRTLE BEACH State SC Zip Code 29572

Purpose of Disbursement Contribution

011

Candidate Name

TOM RICE

Category/Type

Office Sought: House Senate President

Disbursement For: 2016
 Primary General Other (specify) ▼

State: SC District: 07

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 03 / 2016

Transaction ID : **SB23.8771**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

4500.00

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