

**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"/> 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 SOCIETY OF INTERVENTIONAL PAIN PHYSICIAN PAC

Full Name (Last, First, Middle Initial)

A. CARLA NELSON FOR CONGRESS

Mailing Address 931 22ND AVENUE SW

City ROCHESTER State MN Zip Code 55902

Purpose of Disbursement Contribution

Candidate Name

NELSON, CARLA JEAN, , ,

Office Sought: House Senate President
 Disbursement For: 2018 Primary General Other (specify) ▼

State: MN District: 01

Date of Disbursement

M M / D D / Y Y Y Y Y
 07 / 02 / 2018

FEC Identification Number

C C00657056

Transaction ID : SB23.12707

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. DONNELLY FOR INDIANA

Mailing Address 910 17TH ST NW STE 925

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement Contribution

Candidate Name

DONNELLY, JOSEPH S, , ,

Office Sought: House Senate President
 Disbursement For: 2018 Primary General Other (specify) ▼

State: IN District: 00

Date of Disbursement

M M / D D / Y Y Y Y Y
 07 / 24 / 2018

FEC Identification Number

C C00393652

Transaction ID : SB23.12715

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. NEW PIONEERS PAC

Mailing Address 228 S WASHINGTON ST STE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement 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 Y
 07 / 12 / 2018

FEC Identification Number

C C00459123

Transaction ID : SB23.12709

Amount of Each Disbursement this Period

5000.00

Memo Item

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

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

12500.00

12500.00