

**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)

**Engineers Political Education Committee (EPEC)/International Union of Operating Engineers**

Full Name (Last, First, Middle Initial)

**A. Citizens For Waters**

Mailing Address 3700 Wilshire Blvd., Ste. 1050-B

City Los Angeles State CA Zip Code 90010

Purpose of Disbursement

011

Candidate Name

**Rep. Maxine Waters**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CA District: 43

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	6		2	0	1	4

**Transaction ID : 59637417**

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
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Full Name (Last, First, Middle Initial)

**B. John Carney For Congress**

Mailing Address PO Box 2162

City Wilmington State DE Zip Code 19899

Purpose of Disbursement

011

Candidate Name

**John Carney**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: DE District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	6		2	0	1	4

**Transaction ID : 59637419**

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
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Full Name (Last, First, Middle Initial)

**C. Capuano For Congress Committee**

Mailing Address PO Box 440305

City Somerville State MA Zip Code 02144

Purpose of Disbursement

011

Candidate Name

**Rep. Michael E. Capuano**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: MA District: 07

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	6		2	0	1	4

**Transaction ID : 59637420**

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

7	5	0	0	.	0	0
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2	5	0	0	.	0	0
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