

**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)						PAGE 1 OF 1
	<input type="checkbox"/> 21b <input type="checkbox"/> 27	<input type="checkbox"/> 22 <input type="checkbox"/> 28a	<input checked="" type="checkbox"/> 23 <input type="checkbox"/> 28b	<input type="checkbox"/> 24 <input type="checkbox"/> 28c	<input type="checkbox"/> 25 <input type="checkbox"/> 29	<input type="checkbox"/> 26 <input type="checkbox"/> 30b	

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NAME OF COMMITTEE (In Full)
INDEPENDENT OIL PRODUCERS' AGENCY

Full Name (Last, First, Middle Initial) A. KEVIN MCCARTHY FOR CONGRESS		Date of Disbursement MM / DD / YYYY 05 / 15 / 2014
Mailing Address PO BOX 12667		Amount of Each Disbursement this Period 500.00
City BAKERSFIELD, CA	State Zip Code 93389	
Purpose of Disbursement CONTRIBUTION		Category/ Type []
Candidate Name KEVIN MCCARTHY		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. IPAA WILDCATTERS FUND		Date of Disbursement MM / DD / YYYY 06 / 17 / 2014
Mailing Address 1201 15TH STREET, NW, SUITE 300		Amount of Each Disbursement this Period 250.00
City WASHINGTON, DC	State Zip Code 20005	
Purpose of Disbursement CONTRIBUTION		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY [] / [] / []
Mailing Address		Amount of Each Disbursement this Period []
City	State Zip Code	
Purpose of Disbursement		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	750.00