

**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)
INTERNATIONAL ASSOCIATION OF FIREFIGHTERS INTERESTED IN REGISTRATION AND EDUCATION PAC

Full Name (Last, First, Middle Initial)

A. NRCC

Mailing Address 320 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 11 / 2016

Transaction ID : D31155

Amount of Each Disbursement this Period

15000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. O'MALLEY FOR PRESIDENT

Mailing Address 1501 ST PAUL STREET SUITE 114

City BALTIMORE State MD Zip Code 21202

Purpose of Disbursement
Contribution - Debt Retirement

Candidate Name

MARTIN JOSEPH O'MALLEY

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 01 / 2016

Transaction ID : D31144

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. OWENS FOR CONGRESS

Mailing Address PO BOX 2786

City SALT LAKE CITY State UT Zip Code 84110

Purpose of Disbursement
Contribution

Candidate Name

H DOUGLAS OWENS

Office Sought: House
 Senate
 President
State: UT District: 04

Disbursement For: 2016
 Primary General
 Other (specify) ▼
Convention

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 22 / 2016

Transaction ID : D31172

Amount of Each Disbursement this Period

2500.00

Memo Item

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

22500.00

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