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)
☐ 21b ☐ 22 ☒ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

PAGE | OF

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NAME OF COMMITTEE (In Full)
Employers Mutual Casualty Co Political Action Committee for Responsible Federal Government

A.
Full Name (Last, First, Middle Initial)
Majority Committee PAC
Mailing Address
PO Box 10134
City: Bakersfield | State: CA | Zip Code: 93389-0134
Purpose of Disbursement: Political Contributions
Candidate Name
Category/ Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 05 / 04 / 2018
FEC Identification Number: C
Amount of Each Disbursement this Period: 100000
☐ Memo Item

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City | State | Zip Code
Purpose of Disbursement
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement
FEC Identification Number: C
Amount of Each Disbursement this Period
☐ Memo Item

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City | State | Zip Code
Purpose of Disbursement
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement
FEC Identification Number: C
Amount of Each Disbursement this Period
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 100000

TOTAL This Period (last page this line number only) ▶ 100000

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