

**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)

CMS Energy Corporation Employees for Better Government- Federal

Full Name (Last, First, Middle Initial)

A. GOAL PAC

Mailing Address PO BOX 30344

City BETHESDA State MD Zip Code 20824

Purpose of Disbursement

011

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 18 / 2014

Transaction ID : 60848707

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Kurt Schrader For Congress

Mailing Address Kevin Neely, Treasurer
PO Box 3314

City Oregon City State OR Zip Code 97045

Purpose of Disbursement

011

Candidate Name

Rep. Kurt Schrader

Category/
Type

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify) ▼

State: OR District: 05

Date of Disbursement

MM / DD / YYYY
07 / 18 / 2014

Transaction ID : 60848708

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Upper Hand Fund

Mailing Address Robert F. Carlin, Treasurer
PO Box 2485

City Springfield State VA Zip Code 22152

Purpose of Disbursement

011

Candidate Name

Upper Hand Fund

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 18 / 2014

Transaction ID : 60848709

Amount of Each Disbursement this Period

5000.00

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

8500.00

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