

**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 type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" 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)
NORPAC

Full Name (Last, First, Middle Initial) A. MILLER, DON, , ,		Date of Disbursement MM / DD / YYYY 04 / 28 / 2017	
Mailing Address 445 Oceanpoint Ave		FEC Identification Number C [] Transaction ID : SB28A.45823 Amount of Each Disbursement this Period [] 125.00	
City Cedarhurst	State NY	Zip Code 11516	Category/ Type []
Purpose of Disbursement Mission Refund		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) ▼		<input type="checkbox"/> Memo Item
State: []	District: []		

Full Name (Last, First, Middle Initial) B. Zweig, Bernard, , ,		Date of Disbursement MM / DD / YYYY 04 / 14 / 2017	
Mailing Address 393 West End Ave.		FEC Identification Number C [] Transaction ID : SB28A.45819 Amount of Each Disbursement this Period [] 250.00	
City New York	State NY	Zip Code 10024	Category/ Type []
Purpose of Disbursement Mission Refund		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) ▼		<input type="checkbox"/> Memo Item
State: []	District: []		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY [] / [] / []	
Mailing Address		FEC Identification Number C [] Amount of Each Disbursement this Period []	
City	State	Zip Code	Category/ Type []
Purpose of Disbursement		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) ▼		<input type="checkbox"/> Memo Item
State: []	District: []		

SUBTOTAL of Disbursements This Page (optional).....▶	[] 375.00
TOTAL This Period (last page this line number only).....▶	[] 900.00