

**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"/> 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)
Hoops PAC

A. KLOBUCHAR FOR MINNESOTA

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 4146

City Saint Paul State MN Zip Code 55104-0146

Purpose of Disbursement Political Contribution

Candidate Name Klobuchar, Amy, , ,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: MN District: 00

Date of Disbursement: 06 / 27 / 2017

FEC Identification Number: C00410191
Transaction ID : VPECBA6F43
Amount of Each Disbursement this Period: 5000.00

Memo Item

B. MANCHIN FOR WEST VIRGINIA

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 5202

City Charleston State WV Zip Code 25361-0202

Purpose of Disbursement Political Contribution

Candidate Name MANCHIN III, JOE, , ,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: WV District: 00

Date of Disbursement: 03 / 28 / 2017

FEC Identification Number: C00486563
Transaction ID : VPECBA6DPI
Amount of Each Disbursement this Period: 5000.00

Memo Item

C. MANCHIN FOR WEST VIRGINIA

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 5202

City Charleston State WV Zip Code 25361-0202

Purpose of Disbursement Political Contribution

Candidate Name MANCHIN III, JOE, , ,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: WV District: 00

Date of Disbursement: 06 / 19 / 2017

FEC Identification Number: C00486563
Transaction ID : VPECBA6FP
Amount of Each Disbursement this Period: 5000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 15000.00

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