

**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)  
**Int'l Union of Bricklayers and Allied Craftworkers PAC**

Full Name (Last, First, Middle Initial)

**A. IKAIKA FOR HAWAII**

Mailing Address PO BOX 862

City HONOLULU State HI Zip Code 96808

Purpose of Disbursement  
Contribution

Candidate Name  
**IKAIKA ANDERSON**

Office Sought:  House  
 Senate  
 President  
State: HI District: 01

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	0		2	0	1	4

**Transaction ID : D338288**

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

**B. KIRKPATRICK FOR ARIZONA**

Mailing Address PO Box G

City Flagstaff State AZ Zip Code 86002

Purpose of Disbursement  
Contribution

Candidate Name  
**Ann Kirkpatrick**

Office Sought:  House  
 Senate  
 President  
State: AZ District: 01

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	4

**Transaction ID : D338293**

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

**C. KYRSTEN SINEMA FOR CONGRESS**

Mailing Address PO BOX 25879

City TEMPE State AZ Zip Code 85285

Purpose of Disbursement  
Contribution

Candidate Name  
**KYRSTEN SINEMA**

Office Sought:  House  
 Senate  
 President  
State: AZ District: 09

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	4

**Transaction ID : D338294**

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

7	0	0	0	0	0	0	0	0	0
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**TOTAL** This Period (last page this line number only)..... ▶

7	0	0	0	0	0	0	0	0	0
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