

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
EMILY's List

A.	Full Name (Last, First, Middle Initial) Robert Gordon Mailing Address 608 Upland Rd City Louisville State KY Zip Code 40206 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-140011 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 1 0 Amount of Each Disbursement this Period 25.00
B.	Full Name (Last, First, Middle Initial) Kenneth Cooney Mailing Address 4125 Oro St City Redding State CA Zip Code 96001 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-140012 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 1 0 Amount of Each Disbursement this Period 25.00
C.	Full Name (Last, First, Middle Initial) Miriam Kass Mailing Address 2812 Sunset Blvd City Southside Place State TX Zip Code 77005 Purpose of Disbursement Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-140013 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 1 0 Amount of Each Disbursement this Period 25.00

SUBTOTAL of Disbursements This Page (optional)	75.00
TOTAL This Period (last page this line number only)	