

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Friends of John Boehner

A.	Full Name (Last, First, Middle Initial) Tom Ganley for Congress Mailing Address PO Box 41331 City Brecksville State OH Zip Code 44141-0331 Purpose of Disbursement Contribution Candidate Name Thomas D Ganley Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 13 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-526690 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2010 Amount of Each Disbursement this Period 2000.00 011 Category/ Type
B.	Full Name (Last, First, Middle Initial) Tom Graves for Congress Mailing Address 103 Kelly Mill Road City Cumming State GA Zip Code 30040-2314 Purpose of Disbursement Contribution Candidate Name John Thomas Graves, Jr. Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 09 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-501511 Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2010 Amount of Each Disbursement this Period 2000.00 011 Category/ Type
C.	Full Name (Last, First, Middle Initial) Troy Area Chamber of Commerce Mailing Address 405 Public Square Suite 330 City Troy State OH Zip Code 45373-5200 Purpose of Disbursement Event Ticket Purchase Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-498321 Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2010 Amount of Each Disbursement this Period 15.00 012 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	4015.00
TOTAL This Period (last page this line number only) ▶	(Empty box)