

# 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 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)  
Force Protection, Inc Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Friends Of Jim Clyburn <hr/> Mailing Address PO BOX 12567 <hr/> City COLUMBIA State SC Zip Code 29211 <hr/> Purpose of Disbursement Campaign Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 06 <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4239 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 2 / 2 0 0 9
	Amount of Each Disbursement this Period 1500.00
	Category/ Type
	Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Fund For America's Future <hr/> Mailing Address P.O. Box 1373 <hr/> City Columbia State SC Zip Code 29202 <hr/> Purpose of Disbursement Campaign Contribution Candidate Name Lindsey Graham <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 00 <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4232 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 9
	Amount of Each Disbursement this Period 2400.00
	Category/ Type
	Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Henry E. Brown Jr. For Congress <hr/> Mailing Address P. O. Box 61886 <hr/> City North Charleston State SC Zip Code 29419 <hr/> Purpose of Disbursement Campaign Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 01 <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4237 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 2 / 2 0 0 9
	Amount of Each Disbursement this Period 2000.00
	Category/ Type
	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]