

# 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

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)  
Union Pacific Corp. Fund for Effective Government

<p><b>A.</b> Full Name (Last, First, Middle Initial) Adrian Smith For Congress</p> <p>Mailing Address 3321 Avenue I Suite 6</p> <p>City Scottsbluff State NE Zip Code 69361</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Adrian Smith</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 03</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 16892376</p> <p>Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/Type</p> <p>Contribution</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Napolitano For Congress</p> <p>Mailing Address 555 Capitol Mall, Suite 1425</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. Grace F. Napolitano</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 38</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 16892378</p> <p>Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>011 Category/Type</p> <p>Contribution</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Citizens For Altmire</p> <p>Mailing Address P.O. Box 1776</p> <p>City Freedom State PA Zip Code 15042</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. Jason Altmire</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 04</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 16892379</p> <p>Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/Type</p> <p>Contribution</p>

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

7500.00

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