

**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)  
RIGHT PRINCIPLES PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) NAN HAYWORTH</p> <p>Mailing Address P. O. Box 189</p> <p>City Mount Kisco State NY Zip Code 10549</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/> 011 Category/Type</p> <p>Candidate Name NAN HAYWORTH</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 19</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.4223 <b>Date of Disbursement:</b> 08 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 200.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) STEPHEN M KATZ</p> <p>Mailing Address 2675 DEER TRACK COURT</p> <p>City MOHEGAN LAKE State NY Zip Code 10547</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/> Category/Type</p> <p>Candidate Name STEPHEN M KATZ</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 00</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.4227 <b>Date of Disbursement:</b> 07 / 13 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) JERRY JR LABRIOLA</p> <p>Mailing Address 8 AUTUM LEAVES ROAD</p> <p>City WALLINGFORD State CT Zip Code 06492</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/> 011 Category/Type</p> <p>Candidate Name JERRY JR LABRIOLA</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 03</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.4220 <b>Date of Disbursement:</b> 08 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>700.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	