

**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)  
**I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.**

Full Name (Last, First, Middle Initial)

**A. ALLEN WEST FOR CONGRESS**

Mailing Address PO Box 1028

City Deerfield Beach State FL Zip Code 33443

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: FL District: 22

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			03			2011					

Transaction ID : SB23.7578

Amount of Each Disbursement this Period

1000.00
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Full Name (Last, First, Middle Initial)

**B. BERG FOR SENATE**

Mailing Address PO BOX 9394

City FARGO State ND Zip Code 58106

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: ND District: 00

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			03			2011					

Transaction ID : SB23.7581

Amount of Each Disbursement this Period

1000.00
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Full Name (Last, First, Middle Initial)

**C. BOBBY SCHILLING FOR CONGRESS**

Mailing Address 367 Avenue of The Cities Suite D

City East Moline State IL Zip Code 61244

Purpose of Disbursement  
void ck# 1625 dtd 5/16/2011

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: IL District: 17

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			04			2011					

Transaction ID : SB23.7548

Amount of Each Disbursement this Period

-1000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

1000.00
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