

**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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" 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)
EMILY's List

A.	Full Name (Last, First, Middle Initial) Isabel Allende	Transaction ID: SB28A-157854 Date of Disbursement 06 / 23 / 2011
	Mailing Address 116 Caledonia St	Amount of Each Disbursement this Period 500.00
	City Sausalito State CA Zip Code 94965	
	Purpose of Disbursement Refund	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Edward Boucha	Transaction ID: SB28A-157855 Date of Disbursement 06 / 23 / 2011
	Mailing Address PO Box 606	Amount of Each Disbursement this Period 50.00
	City Hampden State ME Zip Code 04444	
	Purpose of Disbursement Refund	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Anne Johnson	Transaction ID: SB28A-157856 Date of Disbursement 06 / 27 / 2011
	Mailing Address	Amount of Each Disbursement this Period 2000.00
	City Bethesda State MD Zip Code 20816	
	Purpose of Disbursement Refund	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2550.00
TOTAL This Period (last page this line number only)	