

**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) M. Jolly	Transaction ID: SB28A-147468 Date of Disbursement 09 / 20 / 2010
	Mailing Address PO bxo 87	Amount of Each Disbursement this Period 50.00
	City Jemez Springs State NM Zip Code 87025	
	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) Marlene Pritz	Transaction ID: SB28A-147469 Date of Disbursement 09 / 20 / 2010
	Mailing Address 1865 S Ocean Drive Apt 14J	Amount of Each Disbursement this Period 10.00
	City Hallandale Beach State FL Zip Code 33009	
	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) Delores VanZyl	Transaction ID: SB28A-147470 Date of Disbursement 09 / 20 / 2010
	Mailing Address 4950 US Highway 89 S	Amount of Each Disbursement this Period 20.00
	City Livingston State MT Zip Code 59047	
	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) ..... ► **80.00**

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