

**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)  
TRUST PAC TEAM REPUBLICANS FOR UTILIZING SENSIBLE TACTICS

Full Name (Last, First, Middle Initial) <b>A. Bob Latta for Congress Committee</b>		<b>Transaction ID: SB23.4596</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 7
Mailing Address 300 North Main Street		Amount of Each Disbursement this Period 1000.00
City Bowling Green State OH Zip Code 43402	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name Bob Latta for Congress Committee		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 5	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-General	

Full Name (Last, First, Middle Initial) <b>B. CAMPAIGN FOR MARYLAND</b>		<b>Transaction ID: SB23.4586</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 7
Mailing Address 220 BROADWAY		Amount of Each Disbursement this Period 2000.00
City CENTREVILLE State MD Zip Code 21617	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name		
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) ▼	

Full Name (Last, First, Middle Initial) <b>C. CHARLIE DENT FOR CONGRESS</b>		<b>Transaction ID: SB23.4548</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 5 / 2 0 0 7
Mailing Address PO Box 442		Amount of Each Disbursement this Period 1000.00
City Allentown State PA Zip Code 18105	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name CHARLIE DENT FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 15	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....