

**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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c
				<input checked="" type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Political Action Committee of the American Association of Orthopaedic Surgeons

Full Name (Last, First, Middle Initial) <b>A. National Republican Senatorial Committee</b>			Date of Disbursement 01 / 29 / 2002	
Mailing Address 425 Second Street NW City: Washington State: DC Zip Code: 20002			Amount of Each Disbursement this Period 5000.00	
Purpose of Disbursement YTD: \$5000.00			Category/ Type	
Candidate Name				
Office Sought: House Senate President	Disbursement For: 2002 Primary General <input checked="" type="checkbox"/> Other (specify) ▼	Transaction ID: 10000000353700056		
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Democratic Congressional Campaign Committee</b>			Date of Disbursement 03 / 08 / 2002	
Mailing Address 430 S Capitol St SE City: Washington State: DC Zip Code: 20003			Amount of Each Disbursement this Period 5000.00	
Purpose of Disbursement YTD: \$5000.00 Dues			Category/ Type	
Candidate Name				
Office Sought: House Senate President	Disbursement For: 2002 Primary General <input checked="" type="checkbox"/> Other (specify) ▼	Transaction ID: 10000000368400056		
State: District:				

**C.**

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>10000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>10000.00</b>