

**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 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)
Abbott Laboratories Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Friends of Barbara Boxer	Transaction ID: 30067014 Date of Disbursement
	Mailing Address PO Box 641751	<input type="text" value="06"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Los Angeles State CA Zip Code 90064	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="2000.00"/>
	Candidate Name Sen. Barbara Boxer	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Friends of John Barrasso	Transaction ID: 30067133 Date of Disbursement
	Mailing Address 6896 Casper Mountain Rd	<input type="text" value="06"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Casper State WY Zip Code 82601	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name Mr. John Barrasso	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WY District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) AdvaMed PAC	Transaction ID: 30067282 Date of Disbursement
	Mailing Address 1200 G St. NW Suite 400	<input type="text" value="06"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Washington State DC Zip Code 20005-3814	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name	<input type="text" value="011"/> 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)	<input type="text" value="4000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>