

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Engel for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Alan Mollohan for Congress <hr/> Mailing Address PO Box 1343 <hr/> City Fairmont State WV Zip Code 26555 <hr/> Purpose of Disbursement Contribution for WV01 Candidate Name Alan Mollohan for Congress Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B5867F4843B224386A60 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	State: District:
<b>B.</b> Full Name (Last, First, Middle Initial) Gifford for Congress <hr/> Mailing Address PO Box 27565 <hr/> City Tuscon State AZ Zip Code 85726 <hr/> Purpose of Disbursement Contribution AZ08 Candidate Name Gifford for Congress Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B4C1CBA33F3D5408694B Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	State: District:
<b>C.</b> Full Name (Last, First, Middle Initial) Schauer for Congress <hr/> Mailing Address PO Box 100 <hr/> City Battle Creek State MI Zip Code 49016 <hr/> Purpose of Disbursement Contribution to MI07 Candidate Name Schauer for Congress Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B1819A846021B4C218CC Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	State: District:

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

3000.00

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

10750.00