

**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)

US Investigations Services LLC For a Safer America PAC

Full Name (Last, First, Middle Initial)

A. Westmoreland for Congress

Mailing Address P.O. Box 458

City State Zip Code
Sharpsburg GA 30277

Purpose of Disbursement
Contribution

011

Candidate Name

Lynn A. Westmoreland

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: GA District: 03

Date of Disbursement

MM / DD / YYYY
06 / 04 / 2012

Transaction ID : B425511

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Pat Roberts for U S Senate Inc

Mailing Address PO Box 433

City State Zip Code
Great Bend KS 67530

Purpose of Disbursement
Contribution

011

Candidate Name

Pat Roberts

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: KS District:

Date of Disbursement

MM / DD / YYYY
06 / 13 / 2012

Transaction ID : B410462

Amount of Each Disbursement this Period

-2500.00

Voided: Original check dated 05/10/2012

Full Name (Last, First, Middle Initial)

C. Friends of John Delaney

Mailing Address PO Box 60320

City State Zip Code
Potomac MD 20854

Purpose of Disbursement
Contribution

011

Candidate Name

John Delaney

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MD District: 06

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2012

Transaction ID : B411650

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

2500.00

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