

**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)	PAGE 40 OF 43			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Committee to Re-elect Henry Hank Johnson

Full Name (Last, First, Middle Initial) A. Democratic Congressional Campaign Committee		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2012
Mailing Address 430 South Capitol St SE		Amount of Each Disbursement this Period 5000.00 Transaction ID : D382818
City Washington State DC Zip Code 20003	Purpose of Disbursement Unlimited transfer to national committee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Democratic Congressional Campaign Committee		Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2012
Mailing Address 430 South Capitol St SE		Amount of Each Disbursement this Period 5000.00 Transaction ID : D382808
City Washington State DC Zip Code 20003	Purpose of Disbursement Unlimited transfer to national committee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Democratic Congressional Campaign Committee		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2012
Mailing Address 430 South Capitol St SE		Amount of Each Disbursement this Period 5000.00 Transaction ID : D382764
City Washington State DC Zip Code 20003	Purpose of Disbursement Unlimited transfer to national committee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	15000.00