

**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)
EXCELSIOR PAC

Full Name (Last, First, Middle Initial)

A. RATCLIFFE FOR CONGRESS

Mailing Address 2931 RIDGE ROAD SUITE 101
PMB #217

City State Zip Code
ROCKWALL TX 75032

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

JOHN RATCLIFFE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TX District: 04

Date of Disbursement

MM / DD / YYYY
10 / 10 / 2014

Transaction ID : **SB23.4297**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. SOUTHERLAND FOR CONGRESS

Mailing Address PO BOX 1692

City State Zip Code
LYNN HAVEN FL 32444

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

WILLIAM STEVE SOUTHERLAND II

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: FL District: 02

Date of Disbursement

MM / DD / YYYY
10 / 10 / 2014

Transaction ID : **SB23.4308**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. STEVE RUSSELL FOR CONGRESS

Mailing Address 10600 S PENN AVE STE 16-284

City State Zip Code
OKLAHOMA CITY OK 73170

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

STEVEN RUSSELL

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: OK District: 05

Date of Disbursement

MM / DD / YYYY
10 / 10 / 2014

Transaction ID : **SB23.4295**

Amount of Each Disbursement this Period

500.00

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

2000.00

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