

**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)
TURKISH COALITION MIDWEST PAC AKA TC-MIDWEST-PAC

Full Name (Last, First, Middle Initial)

A. GEORGE HOLDING FOR CONGRESS INC.

Mailing Address PO BOX 97187

City RALEIGH State NC Zip Code 27624

Purpose of Disbursement
Contribution

011

Candidate Name

GEORGE E. B. MR. HOLDING

Category/
Type

Office Sought: House
 Senate
 President
State: NC District: 13

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 04 / 2013

Transaction ID : SB23.4144

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. KINZINGER FOR CONGRESS

Mailing Address PO BOX 2365

City OTTAWA State IL Zip Code 61350

Purpose of Disbursement
Contribution

011

Candidate Name

ADAM KINZINGER

Category/
Type

Office Sought: House
 Senate
 President
State: IL District: 16

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 05 / 2013

Transaction ID : SB23.4148

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. KRISTI FOR CONGRESS

Mailing Address PO BOX 852

City SIOUX FALLS State SD Zip Code 57101

Purpose of Disbursement
Contribution

011

Candidate Name

KRISTI LYNN NOEM

Category/
Type

Office Sought: House
 Senate
 President
State: SD District: 00

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 08 / 2013

Transaction ID : SB23.4152

Amount of Each Disbursement this Period

1000.00

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

4000.00

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