

**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)  
**Giving Willingly Empowering Nationally (GWEN) PAC**

Full Name (Last, First, Middle Initial)

**A. Aimee Belgard for Congress**

Mailing Address PO BOX 35

City WILLINGBORO State NJ Zip Code 08046

Purpose of Disbursement Contribution

Candidate Name  
**AIMEE BELGARD**

Office Sought:  House  
 Senate  
 President  
State: NJ District: 03

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		29		2014

Transaction ID : **D633777**

Amount of Each Disbursement this Period

1000.00
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Full Name (Last, First, Middle Initial)

**B. Enyart for Congress**

Mailing Address PO Box 308

City Belleville State IL Zip Code 62222-0309

Purpose of Disbursement Contribution

Candidate Name  
**William Enyart**

Office Sought:  House  
 Senate  
 President  
State: IL District: 12

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		29		2014

Transaction ID : **D633780**

Amount of Each Disbursement this Period

1000.00
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Full Name (Last, First, Middle Initial)

**C. Friends of Cheri Bustos**

Mailing Address P.O. BOX 77

City EAST MOLINE State IL Zip Code 61244

Purpose of Disbursement Contribution

Candidate Name  
**CHERI BUSTOS**

Office Sought:  House  
 Senate  
 President  
State: IL District: 17

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		17		2014

Transaction ID : **D632848**

Amount of Each Disbursement this Period

1000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

3000.00
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