

**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)

PROTECTIVE GROUP INC POLITICAL ACTION COMMITTEE; THE

Full Name (Last, First, Middle Initial)

A. BYRNE FOR CONGRESS INC

Mailing Address PO BOX 2743

City MOBILE State AL Zip Code 36652

Purpose of Disbursement Contribution

011

Candidate Name

BRADLEY ROBERTS BYRNE

Category/Type

Office Sought: House Senate President
State: AL District: 01

Disbursement For: 2014
 Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 09 / 2014

Transaction ID : SB23.4512

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. COMMITTEE TO RE-ELECT LORETTA SANCHEZ

Mailing Address PO BOX 6037

City SANTA ANA State CA Zip Code 92706

Purpose of Disbursement Contribution

011

Candidate Name

LORETTA SANCHEZ

Category/Type

Office Sought: House Senate President
State: CA District: 46

Disbursement For: 2014
 Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 09 / 2014

Transaction ID : SB23.4517

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. KEN CALVERT FOR CONGRESS COMMITTEE

Mailing Address PO BOX 78376

City CORONA State CA Zip Code 92877

Purpose of Disbursement Contribution

011

Candidate Name

KEN CALVERT

Category/Type

Office Sought: House Senate President
State: CA District: 42

Disbursement For: 2014
 Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 09 / 2014

Transaction ID : SB23.4521

Amount of Each Disbursement this Period

1000.00

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

3000.00

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