

**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)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Bilirakis for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) National Republican Congressional Committee <hr/> Mailing Address 320 1st Street SE <hr/> City Washington State DC Zip Code 20003-1838 Purpose of Disbursement Political Contribution: Excess Funds Candidate Name National Republican Congressional Committee Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-E-28021 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 3 / 2 0 1 0
	Amount of Each Disbursement this Period 45000.00 Category/Type 011
<b>B.</b> Full Name (Last, First, Middle Initial) Operation Helping Hand <hr/> Mailing Address PO Box 6383 <hr/> City Tampa State FL Zip Code 33608-0383 Purpose of Disbursement Charitable Donation: Charity Donation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-E-28020 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 3 / 2 0 1 0
	Amount of Each Disbursement this Period 4200.00 Category/Type 012

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

49200.00

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

49200.00