

**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)

VETERANS ALLIANCE FOR SECURITY AND DEMOCRACY PAC (VETPAC)

Full Name (Last, First, Middle Initial)

A. BEAVEN FOR CONGRESS

Mailing Address P.O. BOX 350097

City PALM COAST State FL Zip Code 32135

Purpose of Disbursement
Contribution

011

Candidate Name

HEATHER M BEAVEN

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: FL District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	21	/	2012

Transaction ID : SB23.4738

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. BILL OWENS FOR CONGRESS

Mailing Address PO BOX 1575

City PLATTSBURGH State NY Zip Code 12901

Purpose of Disbursement
Contribution

011

Candidate Name

WILLIAM OWENS

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NY District: 21

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	13	/	2012

Transaction ID : SB23.4734

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. DENNY HECK FOR CONGRESS

Mailing Address PO BOX 235

City OLYMPIA State WA Zip Code 98507

Purpose of Disbursement
Contribution

011

Candidate Name

DENNIS HECK

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: WA District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	13	/	2012

Transaction ID : SB23.4731

Amount of Each Disbursement this Period

1000.00

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

2500.00

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

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