

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)
Dewey & LeBoeuf LLP Political Action Committee

| | | | |
|-----------|--|---|--|
| A. | Full Name (Last, First, Middle Initial) FRIENDS OF WILL BARCLAY | Transaction ID: SB23.7356 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 9 | |
| | Mailing Address ONE PARK PLACE 300 SOUTH STATE ST | | Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">250.00</div> |
| | City SYRACUSE State NY Zip Code 13202 | | |
| | Purpose of Disbursement | | |
| | Candidate Name | Category/ Type | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. | Full Name (Last, First, Middle Initial) JERRY BROWN 2010 | Transaction ID: SB23.7343 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 9 / 2 0 0 9 | |
| | Mailing Address 2633 TELEGRAPH AVENUE STE 406 | | Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">5000.00</div> |
| | City OAKLAND State CA Zip Code 94612 | | |
| | Purpose of Disbursement | | |
| | Candidate Name | Category/ Type | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. | Full Name (Last, First, Middle Initial) JIM TEDISCO FOR CONGRESS | Transaction ID: SB23.7364 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 0 9 | |
| | Mailing Address 1707 Route 9 | | Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">1000.00</div> |
| | City Halfmoon State NY Zip Code 12065 | | |
| | Purpose of Disbursement | | |
| | Candidate Name | Category/ Type | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|--|
| SUBTOTAL of Disbursements This Page (optional) | <div style="border: 1px solid black; padding: 5px;">6250.00</div> |
| TOTAL This Period (last page this line number only) | <div style="border: 1px solid black; padding: 5px; height: 20px;"></div> |