

**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)		PAGE 67 OF 67	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SIMPSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BIG BROTHERS BIG SISTERS		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2012
Mailing Address 2060 E LOBELIA		Amount of Each Disbursement this Period 500 Transaction ID : B-E-32443
City MERIDIAN State ID Zip Code 83646	Purpose of Disbursement Sponsorship 012 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. JO BONNER FOR CONGRESS COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 02 / 08 / 2012
Mailing Address PO Box 851232		Amount of Each Disbursement this Period 492.03 Transaction ID : B-I-32748
City Mobile State AL Zip Code 36685-1232	Purpose of Disbursement Fundraiser meals 011 Category/Type	
Candidate Name JOSIAH ROBIAS BONNER	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Inkind Donation Made
State: AL District: 01		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	500.00