

**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)
ACPAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. ANDREWS FOR SENATE

Mailing Address 215 FOURTH AVENUE
SUITE 200

City HADDON HEIGHTS State NJ Zip Code 08035

Purpose of Disbursement
Campaign Contribution

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: NJ District: 00

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2010

Transaction ID : SB23.4208

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. BOYD FOR CONGRESS

Mailing Address P.O. Box 15703

City Tallahassee State FL Zip Code 32317

Purpose of Disbursement
Campaign Contribution

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: FL District: 02

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 06 / 2010

Transaction ID : SB23.4206

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. FIMIAN FOR CONGRESS 2010 (FIMIAN 2010)

Mailing Address PO BOX 3131

City OAKTON State VA Zip Code 22124

Purpose of Disbursement
Campaign Contribution

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: VA District: 11

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 06 / 2010

Transaction ID : SB23.4204

Amount of Each Disbursement this Period

1000.00

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

6000.00

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