

**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 117 OF 148			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Votesane PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2012
Mailing Address P.O. Box 2713		Amount of Each Disbursement this Period 745.25 <b>Transaction ID : D338070</b>
City Alexandria	State VA	
Zip Code 22301	Purpose of Disbursement Processing Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Votesane PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2012
Mailing Address P.O. Box 2713		Amount of Each Disbursement this Period 75.00 <b>Transaction ID : D338071</b>
City Alexandria	State VA	
Zip Code 22301	Purpose of Disbursement Processing Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Wall for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2012
Mailing Address P.O. BOX 1145		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : D333122</b>
City Green Bay	State WI	
Zip Code 54305	Purpose of Disbursement Contribution	Category/ Type 012
Candidate Name <b>James Richard Jr.</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General	
State: WI District: 08	Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	745.25
<b>TOTAL</b> This Period (last page this line number only).....	