

**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)

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<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)  
Michigan Infrastructure & Transportation Association Federal PAC

A.	Full Name (Last, First, Middle Initial) SCHAUER FOR CONGRESS	Transaction ID: SB23.4131 Date of Disbursement
	Mailing Address PO BOX 100	<input type="text" value="09"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City BATTLE CREEK State MI Zip Code 49016	Amount of Each Disbursement this Period
	Purpose of Disbursement Direct Contribution	<input type="text" value="1000.00"/>
	Candidate Name MARK HAMILTON SCHAUER	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 07	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) SCHAUER FOR CONGRESS	Transaction ID: SB23.4137 Date of Disbursement
	Mailing Address PO BOX 100	<input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2009"/>
	City BATTLE CREEK State MI Zip Code 49016	Amount of Each Disbursement this Period
	Purpose of Disbursement Direct Contribution	<input type="text" value="300.00"/>
	Candidate Name MARK HAMILTON SCHAUER	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 07	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1300.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="1300.00"/>