

**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)  
**VANGUARD HEALTH MANAGEMENT INC PAC**

Full Name (Last, First, Middle Initial)

**A. CONGRESSMAN WAXMAN CAMPAIGN COMMITTEE**

Mailing Address 6380 Wilshire Blvd. #1612

City Los Angeles State CA Zip Code 90048

Purpose of Disbursement  
contribution

Candidate Name  
**HENRY A WAXMAN**

Office Sought:  House  
 Senate  
 President  
State: CA District: 33

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	09	/	2012

**Transaction ID : SB23.12376**

Amount of Each Disbursement this Period

1000.00
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Full Name (Last, First, Middle Initial)

**B. FRIENDS OF CHERI BUSTOS**

Mailing Address P.O. BOX 77

City EAST MOLINE State IL Zip Code 61244

Purpose of Disbursement  
campaign

Candidate Name  
**CHERI BUSTOS**

Office Sought:  House  
 Senate  
 President  
State: IL District: 17

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	09	/	2012

**Transaction ID : SB23.12373**

Amount of Each Disbursement this Period

1000.00
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Full Name (Last, First, Middle Initial)

**C. TENNESSEE REPUBLICAN PARTY FEDERAL ELECTION ACCOUNT**

Mailing Address 2424 21ST AVENUE  
SUITE 200

City NASHVILLE State TN Zip Code 37212

Purpose of Disbursement  
party contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	09	/	2012

**Transaction ID : SB23.12378**

Amount of Each Disbursement this Period

3000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

5000.00
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5000.00
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