

**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 43 OF 45	
	<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)  
**Austin Scott for Congress Inc**

Full Name (Last, First, Middle Initial) <b>A. TOM REED FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address PO BOX 391		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : BC01C23F9E8734E65838</b>
City GENEVA State NY Zip Code 14456	Purpose of Disbursement Contribution	
Candidate Name <b>Rep. Thomas W Reed II</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 29		

Full Name (Last, First, Middle Initial) <b>B. Friends of Joe Heck</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address PO Box 750114		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : BC842D0A4CAB8457AA2D</b>
City Las Vegas State NV Zip Code 89136-0114	Purpose of Disbursement Contribution	
Candidate Name <b>Rep. Joseph J. Heck</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NV District: 03		

Full Name (Last, First, Middle Initial) <b>c. Bobby Schilling for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address 367 Avenue of the Cities Ste D		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : B054AB1A5BD86480D843</b>
City East Moline State IL Zip Code 61244-4053	Purpose of Disbursement Contribution	
Candidate Name <b>Rep. Bobby T. Schilling</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IL District: 17		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5500.00
<b>TOTAL</b> This Period (last page this line number only).....	