

**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)
AGL Resources Inc. Political Action Committee, Inc. (AGL PAC)

Full Name (Last, First, Middle Initial)

A. SCOTT RIGELL FOR CONGRESS

Mailing Address 915 FIRST COLONIAL ROAD
SUITE 100

City VIRGINIA BEACH State VA Zip Code 23454

Purpose of Disbursement

Candidate Name
EDWARD SCOTT MR. RIGELL

Office Sought: House Senate President
State: VA District: 02
Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	1	4

Transaction ID : SB23.17201

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. SENGER FOR CONGRESS

Mailing Address PO BOX 4883

City NAPERVILLE State IL Zip Code 60567

Purpose of Disbursement

Candidate Name
DARLENE SENGER

Office Sought: House Senate President
State: IL District: 11
Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	1	4

Transaction ID : SB23.17198

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. TOM REED FOR CONGRESS

Mailing Address PO BOX 450

City VICTOR State NY Zip Code 14564

Purpose of Disbursement

Candidate Name
THOMAS W II REED

Office Sought: House Senate President
State: NY District: 29
Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	1	4

Transaction ID : SB23.17206

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

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

3	0	0	0	0	0	0	0	0	0

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

3	0	0	0	0	0	0	0	0	0