

**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)
NEBRASKA SANDHILLS PAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF JIM INHOFE

Mailing Address PO BOX 13300

City OKLAHOMA CITY State OK Zip Code 73113

Purpose of Disbursement
Political Contribution

011

Candidate Name

JAMES M INHOFE

Category/
Type

Office Sought: House
 Senate
 President
State: OK District: 00

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 19 / 2014

Transaction ID : **SB23.4324**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. JIM RISCH FOR U S SENATE COMMITTEE

Mailing Address 407 W JEFFERSON

City BOISE State ID Zip Code 83702

Purpose of Disbursement
Political Contribution

011

Candidate Name

JAMES E RISCH

Category/
Type

Office Sought: House
 Senate
 President
State: ID District: 00

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 19 / 2014

Transaction ID : **SB23.4319**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. MCFADDEN FOR SENATE

Mailing Address PO BOX 4039

City SAINT PAUL State MN Zip Code 55104

Purpose of Disbursement
Political Contribution

011

Candidate Name

MICHAEL MCFADDEN

Category/
Type

Office Sought: House
 Senate
 President
State: MN District: 00

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 05 / 2014

Transaction ID : **SB23.4314**

Amount of Each Disbursement this Period

2500.00

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

5500.00

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