

**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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" 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)
NORPAC

A.	Full Name (Last, First, Middle Initial) Jeffrey Weinstein	Transaction ID: SB28A.20009
	Mailing Address 11 Anthony Ave.	Date of Disbursement 07 / 06 / 2007
	City Edison State NJ Zip Code 08820	Amount of Each Disbursement this Period 1930.00
	Purpose of Disbursement refund cause - family emergency	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Rachel Weinstein	Transaction ID: SB28A.20020
	Mailing Address 8 Elm St #3L	Date of Disbursement 07 / 24 / 2007
	City Westfield State NJ Zip Code 07090	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement refund cause - family emergency	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Sarah Weinstein	Transaction ID: SB28A.20062
	Mailing Address 1816 New Hampshire Ave, NW	Date of Disbursement 08 / 23 / 2007
	City Washington State DC Zip Code 20009	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement refund cause - family emergency	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	11930.00
TOTAL This Period (last page this line number only)	▶	11930.00