

**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 145 OF 145	
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Rick Santorum for President		Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2011
Mailing Address PO Box 37		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB21.32346
City Verona	State PA	
Zip Code 15147	Purpose of Disbursement Donation	Category/ Type 011
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 01	

Full Name (Last, First, Middle Initial) B. TODD AKIN FOR SENATE		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2011
Mailing Address PO BOX 31222		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB21.32699
City ST LOUIS	State MO	
Zip Code 63131	Purpose of Disbursement Donation	Category/ Type 011
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 01	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	4000.00
TOTAL This Period (last page this line number only).....	8575.00