

**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 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)

Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

**A.** Full Name (Last, First, Middle Initial)  
BARBARA LEE FOR CONGRESS

Mailing Address 1736 FRANKLIN STREET #400

City OAKLAND State CA Zip Code 94612

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

State: CA District: 09

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.9957

Date of Disbursement

07 / 28 / 2009

Amount of Each Disbursement this Period

1500.00

Category/  
Type

**B.** Full Name (Last, First, Middle Initial)  
BLUE DOG POLITICAL ACTION COMMITTEE

Mailing Address 6849 Old Dominion Drive  
Suite 222

City McLean State VA Zip Code 22101

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.9954

Date of Disbursement

07 / 16 / 2009

Amount of Each Disbursement this Period

5000.00

Category/  
Type

**C.** Full Name (Last, First, Middle Initial)  
COMMITTEE TO RE-ELECT HENRY HANK JOHNSON

Mailing Address 6440 Old Hillandale Drive  
Suite 262

City Lithonia State GA Zip Code 30058

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

State: GA District: 04

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.9961

Date of Disbursement

07 / 28 / 2009

Amount of Each Disbursement this Period

1000.00

Category/  
Type

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

7500.00

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