

**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)
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

A.	Full Name (Last, First, Middle Initial) Cantrell/Cutter	Transaction ID: SB23.28940 Date of Disbursement
	Mailing Address 1789 Olive Street	<input type="text" value="10"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Capital Heights State MD Zip Code 20743	Amount of Each Disbursement this Period
	Purpose of Disbursement In-kind: Printing	<input type="text" value="50.00"/>
	Candidate Name BETSY MARKEY	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: CO District: 04	

B.	Full Name (Last, First, Middle Initial) Cantrell/Cutter	Transaction ID: SB23.28941 Date of Disbursement
	Mailing Address 1789 Olive Street	<input type="text" value="10"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Capital Heights State MD Zip Code 20743	Amount of Each Disbursement this Period
	Purpose of Disbursement In-kind: Printing	<input type="text" value="50.00"/>
	Candidate Name JIM MCGOVERN	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: MA District: 03	

C.	Full Name (Last, First, Middle Initial) Cantrell/Cutter	Transaction ID: SB23.28942 Date of Disbursement
	Mailing Address 1789 Olive Street	<input type="text" value="10"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Capital Heights State MD Zip Code 20743	Amount of Each Disbursement this Period
	Purpose of Disbursement In-kind: Printing	<input type="text" value="50.00"/>
	Candidate Name ROBERT L MILLER	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: SC District: 02	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="150.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>