

**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)

**SALEM COMMUNICATIONS CORPORATION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. AMODEI FOR NEVADA**

Mailing Address 503 N DIVISION ST

City CARSON CITY State NV Zip Code 89703

Purpose of Disbursement  
For reception hosted by Goodlatte in Washington DC 3/13/13

Candidate Name  
**AMODEI FOR NEVADA**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼  
State: NV District: 02

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	2			2	0	1	3		

**Transaction ID : SB23.12225**

Amount of Each Disbursement this Period

5	0	0	.	0	0
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Full Name (Last, First, Middle Initial)

**B. UPTON FOR ALL OF US**

Mailing Address P.O. Box 490

City St. Joseph State MI Zip Code 49085

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼  
State: MI District: 06

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	6			2	0	1	3		

**Transaction ID : SB23.12227**

Amount of Each Disbursement this Period

1	5	0	.	0	0
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Full Name (Last, First, Middle Initial)

**C. Walden For Congress**

Mailing Address P.O. Box 1091

City Hood River State OR Zip Code 97031

Purpose of Disbursement  
February Event 2013

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	6			2	0	1	3		

**Transaction ID : SB23.12228**

Amount of Each Disbursement this Period

1	5	0	.	0	0
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

3	5	0	.	0	0
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**TOTAL** This Period (last page this line number only)..... ▶

3	5	0	.	0	0
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