

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)

PAGE 23 / 27

<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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
American Gas Association Political Action Committee

A. Full Name (Last, First, Middle Initial) Friends of John Boehner <hr/> Mailing Address 7908 Cincinnati-Dayton Road Suite I <hr/> City West Chester State OH Zip Code 45069 <hr/> Purpose of Disbursement <input type="text"/> <hr/> Candidate Name Rep. John A. Boehner Category/Type <input type="text"/>	Transaction ID: B17FB3A07D6CD4761820 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2010
	Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 08 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Scott Murphy for Congress <hr/> Mailing Address 615 Glen Street <hr/> City Glens Falls State NY Zip Code 12801 <hr/> Purpose of Disbursement <input type="text"/> <hr/> Candidate Name Rep. Scott Murphy Category/Type <input type="text"/>	Transaction ID: B42548A5D648C4E4C92C Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2010
	Amount of Each Disbursement this Period <input type="text" value="500.00"/>
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Stephanie Herseth Sandlin for South Dakota <hr/> Mailing Address P.O. Box 75214 <hr/> City Washington State DC Zip Code 20013 <hr/> Purpose of Disbursement <input type="text"/> <hr/> Candidate Name Rep. Stephanie Herseth Sandlin Category/Type <input type="text"/>	Transaction ID: B6D005DFB4B9B42A2853 Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2010
	Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SD District: 01 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶