

# 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)

United Services Automobile Association Employee PAC - USAA EMPLOYEE PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Long Leaf Pine Pac <hr/> Mailing Address 700 13th Street, NW Suite 600 <hr/> City Washington State DC Zip Code 20005 <hr/> Purpose of Disbursement 2011 Contribution Candidate Name Long Leaf Pine Pac <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution	Transaction ID: 948079D31E7D034EDB7 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 1 1
	Amount of Each Disbursement this Period 5000.00
	Category/ Type 011
	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution
<b>B.</b> Full Name (Last, First, Middle Initial) Next Century Fund <hr/> Mailing Address 116 S Royal Street <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement 2011 Contribution Candidate Name Next Century Fund <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution	Transaction ID: 06D1C2CECC57756D226 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 1 1
	Amount of Each Disbursement this Period 3000.00
	Category/ Type 011
	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution
<b>C.</b> Full Name (Last, First, Middle Initial) South Dakota First <hr/> Mailing Address PO Box 155 <hr/> City Sioux Falls State SD Zip Code 57101 <hr/> Purpose of Disbursement 2011 Contribution Candidate Name South Dakota First <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution	Transaction ID: 3AB7506018A1991CA82 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 1 1
	Amount of Each Disbursement this Period 5000.00
	Category/ Type 011
	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution

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

13000.00

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