

**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)  
BRINGING LEADERSHIP BACK PAC

A.	Full Name (Last, First, Middle Initial) MCDOWELL FOR CONGRESS COMMITTEE	Transaction ID: SB23.4536 Date of Disbursement
	Mailing Address 10820 GLEN STREET	<input type="text" value="08"/> <input type="text" value="03"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City RUDYARD State MI Zip Code 49780	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name GARY J MCDOWELL	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) RAJ GOYLE FOR CONGRESS, INC.	Transaction ID: SB23.4535 Date of Disbursement
	Mailing Address P.O. Box 780971	<input type="text" value="08"/> <input type="text" value="03"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Wichita State KS Zip Code 67278	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name RAJ GOYLE	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 04	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) TIM BISHOP FOR CONGRESS	Transaction ID: SB23.4523 Date of Disbursement
	Mailing Address PO Box 437	<input type="text" value="08"/> <input type="text" value="02"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Farmingville State NY Zip Code 11738	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name TIMOTHY BISHOP	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="3000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="9000.00"/>