

**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)

**Democratic Congressional Campaign Committee**

Full Name (Last, First, Middle Initial)

**A. National Democratic Club**

Mailing Address 30 Ivy Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
InKind Catering

Candidate Name

**Patrick Murphy**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: FL District: 18

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	3			2	0	1	2	

**Transaction ID : SB23-896995**

Amount of Each Disbursement this Period

1	2	2	.	2	1
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Full Name (Last, First, Middle Initial)

**B. National Democratic Club**

Mailing Address 30 Ivy Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
InKind Catering

Candidate Name

**Hon. Gary J McDowell**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: MI District: 01

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	3			2	0	1	2	

**Transaction ID : SB23-896996**

Amount of Each Disbursement this Period

1	2	2	.	2	1
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Full Name (Last, First, Middle Initial)

**C. National Democratic Club**

Mailing Address 30 Ivy Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
InKind Catering

Candidate Name

**Shelley Adler**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: NJ District: 03

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	3			2	0	1	2	

**Transaction ID : SB23-896997**

Amount of Each Disbursement this Period

1	2	2	.	2	1
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

3	6	6	.	3	6
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1	2	2	.	2	1
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