

# 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)

American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends Of Roy Blunt</p> <p>Mailing Address 333 Park Central East Suite 818</p> <p>City Springfield State MO Zip Code 65806</p> <p>Purpose of Disbursement candidate contribution</p> <p>Candidate Name Mr. Roy Blunt</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MO District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 30132175 <b>Date of Disbursement</b> 06 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/ Type</p> <p>candidate contribution</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Hatch Election Committee</p> <p>Mailing Address 257 E. 200th South, #950 c/o Stan DeWaal</p> <p>City Salt Lake City State UT Zip Code 84111</p> <p>Purpose of Disbursement candidate contribution</p> <p>Candidate Name Orrin G. Hatch</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: UT District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 30132176 <b>Date of Disbursement</b> 06 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/ Type</p> <p>candidate contribution</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Committee To Elect Chris Murphy</p> <p>Mailing Address P.O. Box 127</p> <p>City Cheshire State CT Zip Code 06410</p> <p>Purpose of Disbursement candidate contribution</p> <p>Candidate Name Rep. Christopher S. Murphy</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 30132177 <b>Date of Disbursement</b> 06 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p> <p>candidate contribution</p>

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

8500.00

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