

**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)
BLUE DOG POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. BRAVE PAC

Mailing Address 499 SOUTH CAPITOL ST SW SUITE 404

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2013
 Primary General
 Other (specify) Other

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 04 / 2013

Transaction ID : SB23.12385

Amount of Each Disbursement this Period

5000.00

Category/
Type

Full Name (Last, First, Middle Initial)

B. DAWG PAC - DEMOCRATS AGAINST WASTE IN GOVERNMENT

Mailing Address PO BOX 30336

City BETHESDA State MD Zip Code 20824

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2013
 Primary General
 Other (specify) Other

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 04 / 2013

Transaction ID : SB23.12374

Amount of Each Disbursement this Period

5000.00

Category/
Type

Full Name (Last, First, Middle Initial)

C. FRIENDS OF CHERI BUSTOS

Mailing Address P.O. BOX 77

City EAST MOLINE State IL Zip Code 61244

Purpose of Disbursement
Contribution

Candidate Name

CHERI BUSTOS

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) Other

State: IL District: 17

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 12 / 2013

Transaction ID : SB23.12364

Amount of Each Disbursement this Period

5000.00

Category/
Type

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

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

15000.00