

**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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Purdue Pharma Inc. Political Action Committee (Purdue PAC)

A. Full Name (Last, First, Middle Initial) Citizens for Turner Mailing Address 120 W. Second Street Suite 1510 City Dayton State OH Zip Code 45402 Purpose of Disbursement Contribution Candidate Name Michael R Turner Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 03 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B332570 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00 Category/Type 011
B. Full Name (Last, First, Middle Initial) Friends of John Loughlin Mailing Address P.O. Box 244 City Adamsville State RI Zip Code 02801 Purpose of Disbursement Contribution Candidate Name John Loughlin, II Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 01 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B330906 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00 Category/Type 011

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

5000.00