

**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)

**Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC**

Full Name (Last, First, Middle Initial)

**A. COMMITTEE TO RE-ELECT LINDA SANCHEZ**

Mailing Address 1212 S. Victory Blvd  
SUITE 211

City BURBANK State CA Zip Code 91502

Purpose of Disbursement

011

Candidate Name

**COMMITTEE TO RE-ELECT LINDA SANCHEZ**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: CA District: 39

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	1		2	0	1	1

**Transaction ID : SB23.11586**

Amount of Each Disbursement this Period

1	5	0	0	.	0	0
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Full Name (Last, First, Middle Initial)

**B. Dan Burton for Congress**

Mailing Address

City State Zip Code

Purpose of Disbursement  
Contribution of 11/1/06 was never accepted

011

Candidate Name

**Dan Burton for Congress**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

**Transaction ID : SB23.11617**

Amount of Each Disbursement this Period

-	1	0	0	.	0	0
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Full Name (Last, First, Middle Initial)

**C. DEMOCRATIC FRESHMEN PAC**

Mailing Address 607 14th Street NW  
Suite 800

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Contribution of 12/18/07 was never accepted

011

Candidate Name

**DEMOCRATIC FRESHMEN PAC**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

**Transaction ID : SB23.11623**

Amount of Each Disbursement this Period

-	2	5	0	.	0	0
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

-	2	0	0	.	0	0
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