

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 19
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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)
Adrian Smith for Congress

Full Name (Last, First, Middle Initial) A. Nebraska Republican Party		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2012
Mailing Address 1610 N Street		Amount of Each Disbursement this Period 10000 Transaction ID : B-E-20364
City Lincoln	State NE	
Zip Code 68508-1871		Category/ Type 011
Purpose of Disbursement Political Contribution: Victory 2012		
Candidate Name Nebraska Republican Party		Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. Romney Victory Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2012
Mailing Address 585 Commercial Street		Amount of Each Disbursement this Period 25000 Transaction ID : B-E-20367
City Boston	State MA	
Zip Code 02109-1024		Category/ Type 011
Purpose of Disbursement Romney Contribution		
Candidate Name Mr. Mitt Romney		Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	35000.00
TOTAL This Period (last page this line number only).....	35000.00