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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 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)
Burlington Northern Santa Fe Corporation RAILPAC

A.
Full Name (Last, First, Middle Initial)
RELY ON YOUR BELIEFS (ROYB) FUND

Mailing Address: Attn: Eri Ann Hayes
209 Pennsylvania Ave., SE

City: Washington | State: DC | Zip Code: 20003

Purpose of Disbursement: Contr. Rely on Your Beliefs Fund (R)

Candidate Name

Category/Type

Office Sought: House / Senate / President | State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: D32068
Date of Disbursement: 05/02/2003

Amount of Each Disbursement this Period: 5000.00

B.
Full Name (Last, First, Middle Initial)
Republican Assembly Campaign Committee

Mailing Address: PO Box 215

City: Madison | State: WI | Zip Code: 53701-0215

Purpose of Disbursement: Contr. Republican Assembly Campa (WI-R)

Candidate Name

Category/Type

Office Sought: House / Senate / President | State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: D32081
Date of Disbursement: 05/02/2003

Amount of Each Disbursement this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
The Grassley Committee

Mailing Address: c/o Mary Jo Hoffman
5327 Holmes Run Parkway

City: Alexandria | State: VA | Zip Code: 22304

Purpose of Disbursement: Contr. Chuck E. Grassley (IA-SR)

Candidate Name: Chuck E. Grassley

Category/Type

Office Sought: House / X Senate / President | State: IA District

Disbursement For: 2004 X Primary / General / Other (specify)

Transaction ID: D32057
Date of Disbursement: 05/02/2003

Amount of Each Disbursement this Period: 3000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 8250.00

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