

**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)
Bluepac - Blue Cross Blue Shield Association Pac

Full Name (Last, First, Middle Initial)

A. Majority Committee PAC--Mc PAC

Mailing Address PO Box 10134

City Bakersfield State CA Zip Code 93389

Purpose of Disbursement
2012 Contribution

011

Candidate Name

Majority Committee PAC--Mc PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Contribution

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	2

Transaction ID : 9EFBC1F43D8A255D3E7

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
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Full Name (Last, First, Middle Initial)

B. Mike McIntyre for Congress

Mailing Address PO Box 1

City Lumberton State NC Zip Code 28359

Purpose of Disbursement
2012 General

011

Candidate Name

Mike McIntyre

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NC District: 07

Contribution

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	1	2

Transaction ID : D07766EF15ED8146F14

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
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Full Name (Last, First, Middle Initial)

C. Moderate Democrats PAC

Mailing Address 303 Massachusetts Avenue, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
2012 Contribution

011

Candidate Name

Moderate Democrats PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Contribution

Date of Disbursement

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

Transaction ID : C4AD36442BCAD2B1851

Amount of Each Disbursement this Period

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

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

7	5	0	0	.	0	0
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2	5	0	0	.	0	0
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