

**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)

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|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)  
NCR CORPORATION POLITICAL ACTION COMMITTEE (NCRPAC)

|   |                          |   |                   |
|---|--------------------------|---|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. Friends of Jim Marshall</b>  |                          | Transaction ID: D34797<br>Date of Disbursement<br>10 / 26 / 2006  |                   |
| Mailing Address    Box 125  |                          | Amount of Each Disbursement this Period<br>2000.00  |                   |
| City<br>Macon   | State<br>GA              | Zip Code<br>31202   | Category/<br>Type |
| Purpose of Disbursement<br>Contrib-Rep. Jim Marshall (R-GA-3)   |                          | Disbursement For:    2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |
| Candidate Name<br>Rep. Jim Marshall   |                          |   |                   |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: GA    District: 3 |   |                   |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <b>2000.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <b>2000.00</b> |