

**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)
Turkish Coaliton USA PAC (TC-USA PAC)

A. Full Name (Last, First, Middle Initial) LEADERSHIP THAT LISTENS PAC <hr/> Mailing Address PO BOX 44084 <hr/> City FORT WASHINGTON State MD Zip Code 20749 <hr/> Purpose of Disbursement Contribution Candidate Name	Transaction ID: SB23.6807 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 1 1
	Amount of Each Disbursement this Period 1000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Category/Type 011	

B. Full Name (Last, First, Middle Initial) MONTANANS FOR REHBERG <hr/> Mailing Address PO BOX 1597 <hr/> City HELENA State MT Zip Code 59624 <hr/> Purpose of Disbursement Contribution Candidate Name DENNIS R REHBERG	Transaction ID: SB23.6800 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 1 1
	Amount of Each Disbursement this Period 1000.00
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Category/Type 011	

C. Full Name (Last, First, Middle Initial) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE <hr/> Mailing Address 320 FIRST STREET <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement Contribution Candidate Name	Transaction ID: SB23.6824 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 1 1
	Amount of Each Disbursement this Period 5000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Category/Type 011	

SUBTOTAL of Disbursements This Page (optional) ▶	7000.00
TOTAL This Period (last page this line number only) ▶	