

**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)

Liberty Project

Full Name (Last, First, Middle Initial)

A. Bobby Schilling for Congress

Mailing Address 367 Avenue of the Cities
Suite D

City East Moline State IL Zip Code 61244

Purpose of Disbursement
Campaign contribution

Candidate Name

Robert Todd Schilling

Office Sought: House
 Senate
 President
State: IL District: 17

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 18 / 2014

Transaction ID : SB23.6214

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. DOUG OSE FOR CONGRESS

Mailing Address 9321 SILVERBEND LANE

City ELK GROVE State CA Zip Code 95624

Purpose of Disbursement
Campaign contribution

Candidate Name

DOUG OSE

Office Sought: House
 Senate
 President
State: CA District: 07

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 18 / 2014

Transaction ID : SB23.6219

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF DAN LOGUE FOR CONGRESS

Mailing Address PO BOX 984

City WILLOWS State CA Zip Code 95988

Purpose of Disbursement
Campaign contribution

Candidate Name

DANIEL LOGUE

Office Sought: House
 Senate
 President
State: CA District: 03

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 18 / 2014

Transaction ID : SB23.6220

Amount of Each Disbursement this Period

1000.00

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

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

3000.00