

**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)
NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

A. Full Name (Last, First, Middle Initial) Massa For Congress <hr/> Mailing Address 60 East Market Street Suite 244 <hr/> City Corning State NY Zip Code 14830 <hr/> Purpose of Disbursement <hr/> Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B2F3643071546435AADE Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 7 / 2 0 0 9
	Amount of Each Disbursement this Period 500.00
	Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:
B. Full Name (Last, First, Middle Initial) Frank Kratovil For Congress <hr/> Mailing Address 222 Main Sail Drive PO Box 518 <hr/> City Stevensville State MD Zip Code 21666 <hr/> Purpose of Disbursement <hr/> Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: BA268E4D01B7F49A4983 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 7 / 2 0 0 9
	Amount of Each Disbursement this Period 500.00
	Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:
C. Full Name (Last, First, Middle Initial) Kissell For Congress <hr/> Mailing Address P.O. Box 1530 <hr/> City Biscoe State NC Zip Code 27209 <hr/> Purpose of Disbursement <hr/> Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: BC9BAB8B1E85749C3B73 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 9
	Amount of Each Disbursement this Period 500.00
	Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:

SUBTOTAL of Disbursements This Page (optional) ▶	1500.00
TOTAL This Period (last page this line number only) ▶	_____