

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 43			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Tom Rooney for Congress

Full Name (Last, First, Middle Initial) A. Dold for Congress		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2011
Mailing Address PO Box 8145		Amount of Each Disbursement this Period 1000.00 Transaction ID : 11007.E1662
City Northfield	State IL	
Purpose of Disbursement CONTRIBUTION		Category/ Type
Candidate Name ROBERT JAMES DOLD JR		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IL	District: 10	

Full Name (Last, First, Middle Initial) B. Michael Grimm for Congress		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2011
Mailing Address PO Box 270		Amount of Each Disbursement this Period 1000.00 Transaction ID : 11007.E1664
City Staten Island	State NY	
Purpose of Disbursement CONTRIBUTION		Category/ Type
Candidate Name MICHAEL GRIMM		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 13	

Full Name (Last, First, Middle Initial) c. Hannahs Home of South Florida		Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2011
Mailing Address 4390 County Line Rd		Amount of Each Disbursement this Period 4600.00 Transaction ID : 10906.E1654
City Tequesta	State FL	
Purpose of Disbursement DONATION		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional)	6600.00
TOTAL This Period (last page this line number only)	