

**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)
Business Software Alliance PAC

Full Name (Last, First, Middle Initial)

A. Gillibrand for Senate

Mailing Address 236 Massachusetts Avenue NE Suite

City Washington State DC Zip Code 20002

Purpose of Disbursement
Contribution

011

Candidate Name

Kirsten Gillibrand

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NY District:

Date of Disbursement

MM / DD / YYYY
03 / 29 / 2012

Transaction ID : B407946

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Langevin for Congress

Mailing Address 181-A Knight Street

City Warwick State RI Zip Code 02886

Purpose of Disbursement
Contribution

011

Candidate Name

James Langevin

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: RI District: 02

Date of Disbursement

MM / DD / YYYY
01 / 04 / 2012

Transaction ID : B402862

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Whitehouse for Senate

Mailing Address 10 G Street NE Suite 570

City Washington State DC Zip Code 20002

Purpose of Disbursement
Contribution

011

Candidate Name

Sheldon Whitehouse

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: RI District:

Date of Disbursement

MM / DD / YYYY
03 / 29 / 2012

Transaction ID : B407948

Amount of Each Disbursement this Period

500.00

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

2500.00

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