

**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)  
**Dickstein Shapiro LLP PAC**

Full Name (Last, First, Middle Initial)

**A. BERGER FOR CONGRESS**

Mailing Address PO BOX 3117

City EDEN State NC Zip Code 27289

Purpose of Disbursement  
Contribution

Candidate Name

**PHILIP EDWARD JR BERGER**

Office Sought:  House  
 Senate  
 President  
State: NC District: 06

Disbursement For: 1000  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2014

**Transaction ID : SB23.9664**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. BUTTERFIELD FOR CONGRESS COMMITTEE**

Mailing Address PO Box 2571

City Wilson State NC Zip Code 27894

Purpose of Disbursement  
contribution

Candidate Name

**G K BUTTERFIELD**

Office Sought:  House  
 Senate  
 President  
State: NC District: 01

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 12 / 2014

**Transaction ID : SB23.9654**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Dickstein Shapiro, LLP**

Mailing Address 1825 Eye St.

City Washington State DC Zip Code 20006

Purpose of Disbursement  
In-kind admin contribution

Candidate Name

**G K BUTTERFIELD**

Office Sought:  House  
 Senate  
 President  
State: NC District: 01

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 12 / 2014

**Transaction ID : SB23.9647**

Amount of Each Disbursement this Period

60.79

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

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

6060.79