

**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)

PROGRESSIVES ADVANCING UNITED LEADERSHIP (PAUL PAC)

Full Name (Last, First, Middle Initial)

A. FRIENDS OF JOHN BARROW

Mailing Address PO BOX 1001

City AUGUSTA State GA Zip Code 30903

Purpose of Disbursement
Campaign Contribution

011

Candidate Name

JOHN J. BARROW

Category/
Type

Office Sought: House
 Senate
 President
State: GA District: 12

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2012			

Transaction ID : SB23.4277

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF JULIAN SCHREIBMAN

Mailing Address PO BOX 3151

City KINGSTON State NY Zip Code 12402

Purpose of Disbursement
Campaign Contribution

011

Candidate Name

JULIAN D SCHREIBMAN

Category/
Type

Office Sought: House
 Senate
 President
State: NY District: 19

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2012			

Transaction ID : SB23.4263

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. KIRKPATRICK FOR ARIZONA

Mailing Address PO BOX 12011

City CASA GRANDE State AZ Zip Code 85130

Purpose of Disbursement
Campaign Contribution

011

Candidate Name

ANN KIRKPATRICK

Category/
Type

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

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2012			

Transaction ID : SB23.4271

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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