

**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)
Cbeyond, Inc. PAC

Full Name (Last, First, Middle Initial)

A. Snowe For Senate

Mailing Address PO Box 2012

City Portland State ME Zip Code 04104

Purpose of Disbursement
Contribution

011

Candidate Name

Sen. Olympia J. Snowe

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: ME District:

Date of Disbursement

MM / DD / YYYY
09 / 19 / 2011

Transaction ID : 10286254

Amount of Each Disbursement this Period

2500.00

Contribution

Full Name (Last, First, Middle Initial)

B. Wilson For Senate

Mailing Address PO Box 10248

City Albuquerque State NM Zip Code 87184

Purpose of Disbursement
Contribution

011

Candidate Name

Ms. Heather Wilson

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NM District:

Date of Disbursement

MM / DD / YYYY
09 / 29 / 2011

Transaction ID : 10302927

Amount of Each Disbursement this Period

500.00

Contribution

Full Name (Last, First, Middle Initial)

C. Klobuchar For Minnesota 2012

Mailing Address PO Box 4146

City St Paul State MN Zip Code 55104

Purpose of Disbursement
Contribution

011

Candidate Name

Sen. Amy Klobuchar

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MN District:

Date of Disbursement

MM / DD / YYYY
09 / 29 / 2011

Transaction ID : 10302929

Amount of Each Disbursement this Period

1000.00

Contribution

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

4000.00

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