

# 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)

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<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)  
HEARPAC OF HEARING INDUSTRIES ASSOCIATION

A.	Full Name (Last, First, Middle Initial) KIND FOR CONGRESS COMMITTEE	Transaction ID: SB23.4597 Date of Disbursement 07 / 30 / 2009
	Mailing Address 205 South 5th Ave Suite 428	Amount of Each Disbursement this Period 1000.00
	City La Crosse State WI Zip Code 54601	
	Purpose of Disbursement	Category/Type
	Candidate Name RON KIND	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 03	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) KOSMAS FOR CONGRESS	Transaction ID: SB23.4613 Date of Disbursement 09 / 10 / 2009
	Mailing Address PO Box 1547	Amount of Each Disbursement this Period 1000.00
	City New Smyrna Beach State FL Zip Code 32170	
	Purpose of Disbursement	Category/Type
	Candidate Name SUZANNE KOSMAS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 24	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) MAJORITY COMMITTEE PAC--MC PAC	Transaction ID: SB23.4659 Date of Disbursement 12 / 03 / 2009
	Mailing Address P.O. BOX 10134	Amount of Each Disbursement this Period 500.00
	City BAKERSFIELD State CA Zip Code 93389	
	Purpose of Disbursement	Category/Type
	Candidate Name MAJORITY COMMITTEE PAC--MC PAC	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2500.00
<b>TOTAL</b> This Period (last page this line number only) .....	