

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 32	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Committee to Re-elect Henry Hank Johnson**

Full Name (Last, First, Middle Initial) <b>A. AL LAWSON FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2012
Mailing Address 400 N ADAMS ST		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : D425633</b>
City TALLAHASSEE State FL Zip Code 32301	Purpose of Disbursement Contribution	
Candidate Name <b>ALFRED J JR LAWSON</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 02		

Full Name (Last, First, Middle Initial) <b>B. Democratic Congressional Campaign Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2012
Mailing Address 430 South Capitol St SE		Amount of Each Disbursement this Period 10000.00 <b>Transaction ID : D425607</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement Unlimited transfer to national committee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Democratic Party of Georgia</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2012
Mailing Address 1100 Spring St., NW Ste 408		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : D425615</b>
City Atlanta State GA Zip Code 30309	Purpose of Disbursement Contribution	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	12000.00
<b>TOTAL</b> This Period (last page this line number only).....	