

**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)  
**PANCAKE POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MONTANANS FOR REHBERG**

Mailing Address PO BOX 1597

City HELENA State MT Zip Code 59624

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**MONTANANS FOR REHBERG**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: MT District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	1		2	0	1	2

**Transaction ID : SB23.4398**

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
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Full Name (Last, First, Middle Initial)

**B. PAT MEEHAN FOR CONGRESS**

Mailing Address 50 S. PROVIDENCE ROAD

City MEDIA State PA Zip Code 19063

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**PAT MEEHAN FOR CONGRESS**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: PA District: 07

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	0		2	0	1	2

**Transaction ID : SB23.4392**

Amount of Each Disbursement this Period

5	0	0	.	0	0
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Full Name (Last, First, Middle Initial)

**C. PLUMMER FOR CONGRESS**

Mailing Address PO BOX 1272

City O'FALLON State IL Zip Code 62269

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**PLUMMER FOR CONGRESS**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: IL District: 12

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	1		2	0	1	2

**Transaction ID : SB23.4413**

Amount of Each Disbursement this Period

5	0	0	.	0	0
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

3	5	0	0	.	0	0
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3	5	0	0	.	0	0
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