

# 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)  
Turkish Coaliton USA PAC (TC-USA PAC)

**A.** Full Name (Last, First, Middle Initial)  
**EDDIE BERNICE JOHNSON FOR CONGRESS**

Mailing Address 3102 Maple Avenue Suite 605

City Dallas State TX Zip Code 75201

Purpose of Disbursement  
Contribution

**011**  
Category/  
Type

Candidate Name  
**EDDIE BERNICE JOHNSON**

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: TX District: 30

**Transaction ID: SB23.4984**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
**JIM GERLACH FOR CONGRESS COMMITTEE**

Mailing Address PO Box 87

City Uwchland State PA Zip Code 19480

Purpose of Disbursement  
Contribution

**011**  
Category/  
Type

Candidate Name  
**JIM GERLACH**

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: PA District: 06

**Transaction ID: SB23.4970**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
**MAJORITY COMMITTEE PAC--MC PAC**

Mailing Address P.O. BOX 10134

City BAKERSFIELD State CA Zip Code 93389

Purpose of Disbursement  
Contribution

**011**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

**Transaction ID: SB23.4980**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

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