

**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)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF AMATA**

Mailing Address PO BOX 6171

City PAGO PAGO State AS Zip Code 96799

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**RADEWAGEN AMATA**

Office Sought:  House  Senate  President  
State: AS District: 00  
Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	5		2	0	1	2

**Transaction ID : SB23-0.029342**

Amount of Each Disbursement this Period

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

**B. AMERICAN EXPRESS**

Mailing Address PO BOX 1270

City NEWARK State NJ Zip Code 07101-1270

Purpose of Disbursement  
CREDIT CARD PAYMENT

Candidate Name  
**MICHAEL G FITZPATRICK**

Office Sought:  House  Senate  President  
State: PA District: 08  
Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

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

**Transaction ID : SB23-0.029595**

Amount of Each Disbursement this Period

1	9	5	0	8	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

**C. FACEBOOK**

Mailing Address 1601 S CALIFORNIA AVE

City PALO ALTO State CA Zip Code 34304

Purpose of Disbursement  
MEDIA

Candidate Name

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

Date of Disbursement

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

**Transaction ID : SB23-0.99991**

Amount of Each Disbursement this Period

1	9	0	0	0	0	0	0	0	0
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**[MEMO ITEM]**

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

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

5	1	9	5	0	8	0	0	0	0
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5	1	9	5	0	8	0	0	0	0
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