

**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)
American Podiatric Medical Association Political Action Committee

A.	Full Name (Last, First, Middle Initial) Van Hollen For Congress	Transaction ID: 18626350 Date of Disbursement 10 / 06 / 2010
	Mailing Address 10537 St. Paul St.	Amount of Each Disbursement this Period 2500.00
	City Kensington State MD Zip Code 20895	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. Chris Van Hollen	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 08	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Walden For Congress	Transaction ID: 18626351 Date of Disbursement 10 / 06 / 2010
	Mailing Address PO Box 1091	Amount of Each Disbursement this Period 2500.00
	City Hood River State OR Zip Code 97031	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. Gregory P. Walden	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 02	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Congressman Bill Young Campaign Committee	Transaction ID: 18626355 Date of Disbursement 10 / 06 / 2010
	Mailing Address P. O. Box 47025	Amount of Each Disbursement this Period 1000.00
	City St. Petersburg State FL Zip Code 33743	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. C.W. Bill Young	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 10	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	6000.00
TOTAL This Period (last page this line number only)	