

**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)

SEIU COPE (Service Employees International Union Committee On Political Education)

Full Name (Last, First, Middle Initial)

A. NEW MILLENNIUM PAC

Mailing Address ONE GATEWAY CENTER, SUITE 520

City NEWARK State NJ Zip Code 07102

Purpose of Disbursement
Contribution

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
0	1		1	2		2	0	1	2

Transaction ID : D266021

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. Rob Garagiola for Congress

Mailing Address PO BOX 833

City FREDERICK State MD Zip Code 21705

Purpose of Disbursement
Contribution

Candidate Name

ROBERT J GARAGIOLA

Office Sought: House Senate President
State: MD District: 06

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	9		2	0	1	2

Transaction ID : D265918

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)

C. VAN HOLLEN FOR CONGRESS

Mailing Address 10537 St. Paul Street

City Kenington State MD Zip Code 20895

Purpose of Disbursement
Voided Check from 12/21/2011

Candidate Name

Chris Van Hollen

Office Sought: House Senate President
State: MD District: 08

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	3		2	0	1	2

Transaction ID : D266022

Amount of Each Disbursement this Period

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

5	0	0	0	0	0	0	0	0	0
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TOTAL This Period (last page this line number only)..... ▶

5	0	0	0	0	0	0	0	0	0
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