

**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)  
NCR CORPORATION POLITICAL ACTION COMMITTEE (NCRPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) FRIENDS OF JIM MARSHALL <hr/> Mailing Address PO BOX 125 <hr/> City MACON State GA Zip Code 31201 <hr/> Purpose of Disbursement Contrib. Rep. Jim Marshall (D-GA) Candidate Name Rep. Jim Marshall Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 03 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D63029 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 5 / 2 0 0 8
	Amount of Each Disbursement this Period 500.00
	Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT MCHUGH <hr/> Mailing Address 228 S. Washington St. Ste. 115 <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Contrib. Rep. McHugh (R-NY-23) Candidate Name Rep. John McHugh Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D63035 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 5 / 2 0 0 8
	Amount of Each Disbursement this Period 500.00
	Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) CITIZENS FOR TURNER <hr/> Mailing Address 131 N. Ludlow Street Suite 317 <hr/> City Dayton State OH Zip Code 45402 <hr/> Purpose of Disbursement Contrib. Rep. Mike Turner (R-OH) Candidate Name Rep. Michael Turner Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 03 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D63030 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 5 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

2000.00

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