

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 50 OF 51	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Brian Higgins for Congress

Full Name (Last, First, Middle Initial) A. Schauer for Congress		Date of Disbursement M M / D D / Y Y Y Y 07 / 26 / 2010
Mailing Address PO Box 100		Amount of Each Disbursement this Period 2000.00 Transaction ID : D310087
City Battle Creek	State MI	
Zip Code 49016-0100	Purpose of Disbursement contribution	Category/ Type 011
Candidate Name Mr. Mark H. Schauer	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2010	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI	District: 07	

Full Name (Last, First, Middle Initial) B. Zeller for Congress		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2010
Mailing Address PO Box 47		Amount of Each Disbursement this Period 1000.00 Transaction ID : D310210
City Victor	State NY	
Zip Code 14564-0047	Purpose of Disbursement contribution	Category/ Type 011
Candidate Name Mr. Matthew Zeller	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2010	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 29	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	18475.00