

**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)

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<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)
WellPoint, Inc. WELLPAC

A. Full Name (Last, First, Middle Initial) Coleman for Senate 08 <hr/> Mailing Address 680 Transfer Road Suite A <hr/> City St Paul State MN Zip Code 55114 <hr/> Purpose of Disbursement Contribution Candidate Name Norm Coleman <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 25470-8330804705619 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 9 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
	011 Category/Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Committee for Restoring Confidence in Government Pac <hr/> Mailing Address 499 S Capitol St SW Suite 404 <hr/> City Washington State DC Zip Code 20003 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Transaction ID: 92568-8347894549369 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 8
	Amount of Each Disbursement this Period 1500.00
	011 Category/Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Donna Christensen Campaign <hr/> Mailing Address PO Box 5197 <hr/> City St. Croix State VI Zip Code 00823 <hr/> Purpose of Disbursement Contribution Candidate Name Donna Marie Christian-Christensen <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VI District: 01 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 26053-2577020525932 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 9 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
	011 Category/Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

3500.00

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