

# 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)  
PHYSICIAN HOSPITALS OF AMERICA POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
BRIGHT FOR CONGRESS.COM

Mailing Address P.O.Box 2106

City Montgomery State AL Zip Code 36102

Purpose of Disbursement  
Contribution

Candidate Name  
BOBBY NEAL BRIGHT, Sr.

Office Sought:  House  
 Senate  
 President  
State: AL District: 02

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.7044  
Date of Disbursement

10 / 16 / 2009

Amount of Each Disbursement this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
CASTLE CAMPAIGN FUND

Mailing Address PO Box 133

City Wilmington State DE Zip Code 19899

Purpose of Disbursement  
Contribution

Candidate Name  
MICHAEL N. CASTLE

Office Sought:  House  
 Senate  
 President  
State: DE District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.7061  
Date of Disbursement

10 / 19 / 2009

Amount of Each Disbursement this Period

2000.00

**C.** Full Name (Last, First, Middle Initial)  
CASTLE CAMPAIGN FUND

Mailing Address PO Box 133

City Wilmington State DE Zip Code 19899

Purpose of Disbursement  
Contribution

Candidate Name  
MICHAEL N. CASTLE

Office Sought:  House  
 Senate  
 President  
State: DE District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.7092  
Date of Disbursement

12 / 04 / 2009

Amount of Each Disbursement this Period

2000.00

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

5000.00

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