

**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)

Political Action Committee of the American Association of Orthopaedic Surgeons

Full Name (Last, First, Middle Initial)

A. Guthrie for Congress

Mailing Address P.O. Box 9639

City Bowling Green State KY Zip Code 42102

Purpose of Disbursement

Candidate Name

Rep. Brett Guthrie

Office Sought: House
 Senate
 President

State: KY District: 02

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			27			2012			

Transaction ID : B7A5DC6ACC4404F19BED

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Joe Wilson for Congress Committee

Mailing Address P.O. Box 2145

City West Columbia State SC Zip Code 29171

Purpose of Disbursement

Candidate Name

Rep. Joe Wilson

Office Sought: House
 Senate
 President

State: SC District: 02

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			27			2012			

Transaction ID : B39015651115D40A2BBA

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Larry Kissell for Congress

Mailing Address 106 East Main Street
P.O. Box 1530

City Biscoe State NC Zip Code 27209

Purpose of Disbursement

Candidate Name

Rep. Larry Kissell

Office Sought: House
 Senate
 President

State: NC District: 08

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			27			2012			

Transaction ID : BFB9EFD33B49F44E2ABD

Amount of Each Disbursement this Period

2000.00

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

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

8000.00

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