

**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)
Gridiron-PAC

A.	Full Name (Last, First, Middle Initial) LUNGREN FOR CONGRESS	Transaction ID: SB23.4468 Date of Disbursement
	Mailing Address 9321 Silverbend Lane	<input type="text" value="09"/> / <input type="text" value="17"/> / <input type="text" value="2009"/>
	City Elk Grove State CA Zip Code 95624	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name LUNGREN FOR CONGRESS	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 03	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) LUNGREN FOR CONGRESS	Transaction ID: SB23.4535 Date of Disbursement
	Mailing Address 9321 Silverbend Lane	<input type="text" value="12"/> / <input type="text" value="14"/> / <input type="text" value="2009"/>
	City Elk Grove State CA Zip Code 95624	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="4000.00"/>
	Candidate Name LUNGREN FOR CONGRESS	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 03	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) MEL WATT FOR CONGRESS COMMITTEE	Transaction ID: SB23.4425 Date of Disbursement
	Mailing Address PO BOX 36831	<input type="text" value="07"/> / <input type="text" value="10"/> / <input type="text" value="2009"/>
	City CHARLOTTE State NC Zip Code 28236	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="5000.00"/>
	Candidate Name MEL WATT FOR CONGRESS COMMITTEE	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="10000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>