

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)
AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) MIKE ROSS FOR CONGRESS CMTE	Transaction ID: SB23.82346
	Mailing Address PO BOX 360	Date of Disbursement 12 / 09 / 2009
	City PRESCOTT State AR Zip Code 71857	Amount of Each Disbursement this Period 1500.00
	Purpose of Disbursement	Category/ Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 04	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) NATIONAL LEADERSHIP PAC	Transaction ID: SB23.82360
	Mailing Address PO BOX 5577	Date of Disbursement 12 / 16 / 2009
	City NEW YORK State NY Zip Code 10027	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement 2009 CONTRIBUTION	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) OUR CONGRESS PAC	Transaction ID: SB23.82380
	Mailing Address PO BOX 344	Date of Disbursement 12 / 22 / 2009
	City PRESCOTT State AR Zip Code 71857	Amount of Each Disbursement this Period 1500.00
	Purpose of Disbursement 2009 CONTRIBUTION	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	5500.00
TOTAL This Period (last page this line number only)	