

**SCHEDULE B (FEC Form 3)
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"/>	17	<input checked="" type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
SIMPSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) NRCC		Transaction ID: 90410.E4569	
	Mailing Address 320 First Street, S.E.		Date of Disbursement MM / DD / YYYY 03 / 12 / 2009	
City Washington		State DC	Zip Code 20003-	
Purpose of Disbursement Transfer of excess campaign funds			Amount of Each Disbursement this Period 50000.00	
Candidate Name			<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:		Other		

SUBTOTAL of Disbursements This Page (optional)

50000.00

TOTAL This Period (last page this line number only)

50000.00