

**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)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. BARTLETT FOR CONGRESS COMMITTEE

Mailing Address PO BOX 280

City BYCKEYSTOWN State MD Zip Code 21717

Purpose of Disbursement
CONTRIBUTION

Candidate Name
ROSCOE G BARTLETT JR

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: MD District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	9		2	0	1	2

Transaction ID : **SB23-0.023991**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

B. BENISHEK FOR CONGRESS

Mailing Address PO BOX 2012

City KINGSFORD State MI Zip Code 49802-2012

Purpose of Disbursement
CONTRIBUTION

Candidate Name
DANIEL BENISHEK

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: MI District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	9		2	0	1	2

Transaction ID : **SB23-0.023992**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

C. BRIAN BILBRAY FOR CONGRESS

Mailing Address 970 SEACOAST DR
UNIT 7

City IMPERIAL BEACH State CA Zip Code 91932

Purpose of Disbursement
CONTRIBUTION

Candidate Name
BRIAN P BILBRAY

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: CA District: 52

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	9		2	0	1	2

Transaction ID : **SB23-0.023993**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
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SUBTOTAL of Disbursements This Page (optional)..... ▶

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

1	5	0	0	0	0	0	0	0	0
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5	0	0	0	0	0	0	0	0	0
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