

**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)	PAGE	OF
	<input type="checkbox"/> 21b <input type="checkbox"/> 27	<input type="checkbox"/> 22 <input type="checkbox"/> 28a	<input checked="" type="checkbox"/> 23 <input type="checkbox"/> 28b
	<input type="checkbox"/> 24 <input type="checkbox"/> 28c	<input type="checkbox"/> 25 <input type="checkbox"/> 29	<input type="checkbox"/> 26 <input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Indochinese American Political Action Committee

A. *Judy, Chu*

Full Name (Last, First, Middle Initial)

Date of Disbursement: *10/01/2012*

Mailing Address: *COAMB Consulting 1531 Purdue Ave.*

City: *Los Angeles* State: *CA* Zip Code: *90025*

Purpose of Disbursement: *Support candidate*

Candidate Name: *Judy Chu* Category/Type: *0.1.1*

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: *CA* District: *27*

Amount of Each Disbursement this Period: *1,500*

B. *Gloria, McLeod, N.*

Full Name (Last, First, Middle Initial)

Date of Disbursement: *10/06/2012*

Mailing Address: *P.O. Box 1095*

City: *Chino* State: *CA* Zip Code: *91708*

Purpose of Disbursement: *Support candidate*

Candidate Name: *Gloria N. McLeod* Category/Type: *0.1.1*

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: *CA* District: *35*

Amount of Each Disbursement this Period: *500*

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Amount of Each Disbursement this Period

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

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

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