

**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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial)

A. Dan 10

Mailing Address 1088 Bishop Street Suite 1009

City Honolulu State HI Zip Code 96813

Purpose of Disbursement

011

Candidate Name

Sen. Daniel K. Inouye

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: HI District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		24		2011

Transaction ID : 42626971

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Lofgren For Congress

Mailing Address 123 E. San Carlos St., #531

City San Jose State CA Zip Code 95112

Purpose of Disbursement

011

Candidate Name

Ms. Zoe Lofgren

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CA District: 16

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		24		2011

Transaction ID : 42626972

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Anna Eshoo For Congress

Mailing Address 555 Capitol Mall, Suite 1425

City Sacramento State CA Zip Code 95814

Purpose of Disbursement

011

Candidate Name

Ms. Anna Eshoo

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CA District: 14

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		24		2011

Transaction ID : 42626973

Amount of Each Disbursement this Period

1000.00

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

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

3000.00

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