

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 Pro-Life Alliance PAC

Full Name (Last, First, Middle Initial)

A. JEFF MILLER FOR CONGRESS

Mailing Address P. O. Box 126

City Pensacola State FL Zip Code 32591

Purpose of Disbursement

011

Candidate Name

JEFFERSON B. MILLER

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: FL District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		24		2012

Transaction ID : SB23.23002

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. JIM RENACCI FOR CONGRESS

Mailing Address 150 Smokerise Drive

City Wadsworth State OH Zip Code 44281

Purpose of Disbursement

011

Candidate Name

JAMES B RENACCI

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: OH District: 16

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		25		2012

Transaction ID : SB23.23107

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. JOE WALSH FOR CONGRESS COMMITTEE, INC.

Mailing Address P.O. BOX 56 830 W. ROUTE 22

City LAKE ZURICH State IL Zip Code 60047

Purpose of Disbursement

011

Candidate Name

JOE WALSH

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: IL District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		24		2012

Transaction ID : SB23.23020

Amount of Each Disbursement this Period

1000.00

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

2500.00

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

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