

**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)
SIERRA CLUB POLITICAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. Friends of Pete Gallego

Mailing Address PO Box 1781

City San Antonio State TX Zip Code 78296

Purpose of Disbursement
Direct Contribution

011

Candidate Name

PETE GALLEGO

Category/
Type

Office Sought: House
 Senate
 President
State: TX District: 23

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 30 / 2012

Transaction ID : **SB23.41379**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Garamendi for Congress

Mailing Address PO Box 440

City Walnut Grove State CA Zip Code 95690

Purpose of Disbursement
Direct Contribution

011

Candidate Name

JOHN GARAMENDI

Category/
Type

Office Sought: House
 Senate
 President
State: CA District: 03

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 30 / 2012

Transaction ID : **SB23.41380**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. Gary McDowell for Congress

Mailing Address PO Box 2107

City Sault Sainte Marie State MI Zip Code 48783

Purpose of Disbursement
Direct Contribution

011

Candidate Name

GARY J. HON. MCDOWELL

Category/
Type

Office Sought: House
 Senate
 President
State: MI District: 01

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 30 / 2012

Transaction ID : **SB23.41381**

Amount of Each Disbursement this Period

500.00

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

4000.00

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