SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
☐ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☒ 21

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

A.
Full Name (Last, First, Middle Initial)
RICHARD BURR COMMITTEE

Mailing Address POST OFFICE BOX 5928

City WINSTON-SALEM State NC Zip Code 27113

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Category/ Type

Office Sought: House / X Senate / President
State: NC District: 00

Disbursement For: 2004
X Primary / General / Other (specify)

Transaction ID: SB21.6867
Date of Disbursement
05 / 15 / 2003

Amount of Each Disbursement this Period
1000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial)
SIMMONS FOR CONGRESS

Mailing Address 12 ROOSEVELT AVE

City MYSTIC State CT Zip Code 06355

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Category/ Type

Office Sought: X House / Senate / President
State: CT District: 02

Disbursement For: 2004
X Primary / General / Other (specify)

Transaction ID: SB21.6715
Date of Disbursement
06 / 26 / 2003

Amount of Each Disbursement this Period
1000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **2000.00**

TOTAL This Period (last page this line number only) ..... ▶ **15500.00**