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)
Levin for Congress Committee

A. Full Name (Last, First, Middle Initial)
MOORE FOR CONGRESS

Mailing Address PO BOX 14631

City: Shawnee Mission
State: KS
Zip Code: 66285

Purpose of Disbursement
Donation to candidate

Candidate Name

Category/ Type

Office Sought: X House / Senate / President

State: KS District: 03

Disbursement For: 2006
X Primary / General / Other (specify)

Transaction ID: D10986

Date of Disbursement
03 / 30 / 2005

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) ..... ▶	1000.00
TOTAL This Period (last page this line number only) ..... ▶	34000.00