

**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)

| | | | |
|------------------------------|------------------------------|------------------------------|--|
| <input type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input checked="" type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Rangel for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. WEAVER FOR CONGRESS 2006 | | Transaction ID: D12009 Date of Disbursement 09 / 18 / 2006 |
| Mailing Address PO BOX 807 | | Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City RADCLIFF State KY Zip Code 40159 | Purpose of Disbursement Contribution Category/Type 011 | |
| Candidate Name John Michael Weaver | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 02 | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. WELCH FOR CONGRESS | | Transaction ID: D12022 Date of Disbursement 09 / 18 / 2006 |
| Mailing Address PO BOX 1086 | | Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City MONTPELIER State VT Zip Code 05601 | Purpose of Disbursement Contribution Category/Type 011 | |
| Candidate Name Peter Welch | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 00 | | |

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|--|--|--|
| Full Name (Last, First, Middle Initial) C. Westchester Blk Women's Pol. | | Transaction ID: D12044 Date of Disbursement 09 / 27 / 2006 |
| Mailing Address PO Box 213 | | Amount of Each Disbursement this Period 250.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Elmsford State NY Zip Code 10523-0213 | Purpose of Disbursement Contribution Category/Type 012 | |
| Candidate Name | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 4250.00 |
| TOTAL This Period (last page this line number only) ▶ | _____ |