

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 checked="" 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 type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
FRIENDS OF SCOTT DESJARLAIS

A. Full Name (Last, First, Middle Initial) Shell Oil <hr/> Mailing Address 1330 Vultee Ave <hr/> City Nashville State TN Zip Code 37217- <hr/> Purpose of Disbursement Travel Expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 01013.E368 Date of Disbursement M M / D D / Y Y Y Y 07 / 26 / 2010
	Amount of Each Disbursement this Period 51.98
	Category/ Type TRAVEL EXPENSE
	TRAVEL EXPENSE
B. Full Name (Last, First, Middle Initial) Shell Oil <hr/> Mailing Address 1330 Vultee Ave <hr/> City Nashville State TN Zip Code 37217- <hr/> Purpose of Disbursement Travel Expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 01014.E394 Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2010
	Amount of Each Disbursement this Period 49.47
	Category/ Type TRAVEL EXPENSE
	TRAVEL EXPENSE
C. Full Name (Last, First, Middle Initial) Shell Oil <hr/> Mailing Address 1330 Vultee Ave <hr/> City Nashville State TN Zip Code 37217- <hr/> Purpose of Disbursement Travel Expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 01014.E396 Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2010
	Amount of Each Disbursement this Period 55.08
	Category/ Type TRAVEL EXPENSE
	TRAVEL EXPENSE

SUBTOTAL of Disbursements This Page (optional) ►

156.53

TOTAL This Period (last page this line number only) ►