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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Ben Cardin for Congress

A.
Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Commit

Mailing Address 430 S Capitol St SE

City: Washington
State: DC
Zip Code: 20003-4024

Purpose of Disbursement: Contribution
Candidate Name:
Category/Type: 011

Office Sought: House / Senate / President
State: District:
Disbursement For: 2004 Primary X General Other (specify)

Transaction ID: D90210
Date of Disbursement: 06 / 22 / 2004
Amount of Each Disbursement this Period: 15000.00
Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial)
Schwartz for Congress

Mailing Address PO Box 45076

City: Philadelphia
State: PA
Zip Code: 19141

Purpose of Disbursement: Contribution
Candidate Name:
Category/Type: 011

Office Sought: House / Senate / President
State: PA District: 13
Disbursement For: 2004 Primary X General Other (specify)

Transaction ID: D90204
Date of Disbursement: 06 / 23 / 2004
Amount of Each Disbursement this Period: 1000.00
Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial)
Towson Area Fourth of July Parade, Inc.

Mailing Address PO Box 5418

City: Baltimore
State: MD
Zip Code: 21285-5418

Purpose of Disbursement: Donation
Candidate Name:
Category/Type: 012

Office Sought: House / Senate / President
State: District:
Disbursement For: 2004 Primary X General Other (specify)

Transaction ID: D90192
Date of Disbursement: 06 / 03 / 2004
Amount of Each Disbursement this Period: 125.00
Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **16125.00**

TOTAL This Period (last page this line number only) ..... ▶ **16405.00**