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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
MAX BURNS FOR CONGRESS

A.
Full Name (Last, First, Middle Initial)
Office Max

Mailing Address 725 Northside Drive East

City: Statesboro State: GA Zip Code: 30458

Purpose of Disbursement
Credit Card Memo-office supplies

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District

Disbursement For: 2004
X Primary General
Other (specify)

Transaction ID: SB17.13133
Date of Disbursement 02/23/2004

Amount of Each Disbursement this Period
32.58

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

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

Mailing Address P.O. BOX 2002

City: FINDLAY State: OH Zip Code: 45839

Purpose of Disbursement
In-kind - catering expense

Candidate Name

Category/Type

Office Sought: X House / Senate / President
State: OH District: 04

Disbursement For: 2004
X Primary General
Other (specify)

Transaction ID: SB17.13062
Date of Disbursement 03/09/2004

Amount of Each Disbursement this Period
698.40

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

C.
Full Name (Last, First, Middle Initial)
Phoenix Commercial Printers

Mailing Address 1026 Fenwick Street

City: Augusta State: GA Zip Code: 30901

Purpose of Disbursement
Printing

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District

Disbursement For: 2004
X Primary General
Other (specify)

Transaction ID: SB17.11432
Date of Disbursement 01/06/2004

Amount of Each Disbursement this Period
633.44

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

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **1331.84**

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