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)
Nancy Pelosi for Congress

A.
Full Name (Last, First, Middle Initial)
Connealy 04

Mailing Address 2999 Old Highway 116

City: Decatur | State: NE | Zip Code: 68020

Purpose of Disbursement
Contr.

Candidate Name
Matthew James Connealy

Category/Type

Office Sought: X House / Senate / President
State: NE District: 01

Disbursement For: 2004
Primary / X General / Other (specify)

Transaction ID: D6068
Date of Disbursement
09 / 27 / 2004

Amount of Each Disbursement this Period
1000.00

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

B.
Full Name (Last, First, Middle Initial)
D.C.C.C.

Mailing Address 430 South Capital Street

City: Washington | State: DC | Zip Code: 20003

Purpose of Disbursement
Excess funds (2 USC 439a)

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District

Disbursement For: 2004
Primary / X General / Other (specify)

Transaction ID: D5914
Date of Disbursement
09 / 24 / 2004

Amount of Each Disbursement this Period
105000.00

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

C.
Full Name (Last, First, Middle Initial)
Daly for Congress

Mailing Address P.O. Box 241088

City: Apple Valley | State: MN | Zip Code: 55124

Purpose of Disbursement
Contr.

Candidate Name
Teresa A. Daly

Category/Type

Office Sought: X House / Senate / President
State: MN District: 02

Disbursement For: 2004
Primary / X General / Other (specify)

Transaction ID: D6042
Date of Disbursement
09 / 27 / 2004

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) ..... ▶ **107000.00**

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