

Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Obama for America

A.	Full Name (Last, First, Middle Initial) Sharon Young <hr/> Mailing Address 4619 Park Lane <hr/> City Dallas State TX Zip Code 75220 <hr/> Purpose of Disbursement Contribution Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-104608 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 1000.00
B.	Full Name (Last, First, Middle Initial) Tom Creed <hr/> Mailing Address 57 Market St. <hr/> City Venice State CA Zip Code 90291 <hr/> Purpose of Disbursement Contribution Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-104656 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 0 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 250.00
C.	Full Name (Last, First, Middle Initial) Trey Laird <hr/> Mailing Address 475 10th Ave. <hr/> City New York State NY Zip Code 10018-1120 <hr/> Purpose of Disbursement Contribution Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-104635 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 3 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 770.00

SUBTOTAL of Disbursements This Page (optional) ▶	2020.00
TOTAL This Period (last page this line number only) ▶	