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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 [ ] 18a [ ] 20a [ ] 20b [ ] 20c [X] 21

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NAME OF COMMITTEE (In Full)
Schroeder for Congress Committee, Inc.

A.
Full Name (Last, First, Middle Initial): Abercrombie for Congress
Mailing Address: 1357 Kapiolani Blvd., #1005
City, State, Zip Code: Honolulu, HI 96814
Purpose of Disbursement: Contribution
Category/Type: 011
Candidate Name: Neil Abercrombie
Office Sought: [X] House [ ] Senate [ ] President
State: HI District: 1
Disbursement For: [X] Primary [ ] General [ ] Other (specify)
ECTD: 1000.00
Date of Disbursement: 03 / 24 / 2003
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): Cantwell 2000
Mailing Address: 904 7th Ave. South
City, State, Zip Code: Edmonds, WA 98020
Purpose of Disbursement: Contribution
Category/Type: 011
Candidate Name: Maria Cantwell
Office Sought: [ ] House [X] Senate [ ] President
State: WA District:
Disbursement For: [ ] Primary [ ] General [X] Other (specify) General 2000
ECTD: 1000.00
Date of Disbursement: 01 / 16 / 2003
Amount of Each Disbursement this Period: 500 00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Cantwell 2000
Mailing Address: 904 7th Ave. South
City, State, Zip Code: Edmonds, WA 98020
Purpose of Disbursement: Contribution
Category/Type: 011
Candidate Name: Maria Cantwell
Office Sought: [ ] House [X] Senate [ ] President
State: WA District:
Disbursement For: [ ] Primary [ ] General [X] Other (specify) Primary 2000
ECTD: 2000.00
Date of Disbursement: 01 / 24 / 2003
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) ▶

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