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 [X] 21

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NAME OF COMMITTEE (In Full)
John Breaux Committee

A. Full Name (Last, First, Middle Initial)
MCCASKILL FOR MISSOURI

Mailing Address PO BOX 6771

City ST LOUIS State MO Zip Code 63144

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: [ ] House [X] Senate [ ] President
State: MO District: 00

Disbursement For: 2006
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB21.10586
Date of Disbursement 07 / 12 / 2006

Amount of Each Disbursement this Period
500.00

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

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

Mailing Address Post Office Box 52956
333 Texas Street Suite 1900

City Shreveport State LA Zip Code 71135

Purpose of Disbursement
Refund of Excess Contribution

Candidate Name

Category/Type

Office Sought: [X] House [ ] Senate [ ] President
State: LA District: 04

Disbursement For:
[ ] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB21.10610
Date of Disbursement 08 / 09 / 2006

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)
WELCH FOR CONGRESS

Mailing Address PO BOX 1086

City MONTPELIER State VT Zip Code 05601

Purpose of Disbursement
Contribution

Candidate Name

Category/Type

Office Sought: [X] House [ ] Senate [ ] President
State: VT District: 00

Disbursement For: 2006
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB21.10597
Date of Disbursement 09 / 28 / 2006

Amount of Each Disbursement this Period
500.00

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

SUBTOTAL of Disbursements This Page (optional) ▶ 500.00

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

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