

**SCHEDULE B (FEC Form 3X)
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"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Next Generation

Full Name (Last, First, Middle Initial) A. The Regency Hotel		Transaction ID: 60616.E1414 Date of Disbursement
Mailing Address 540 Park Avenue		<input type="text" value="05"/> / <input type="text" value="22"/> / <input type="text" value="2006"/>
City New York	State NY	Zip Code 10021-
Purpose of Disbursement CATERING/ROOM RENTAL		Amount of Each Disbursement this Period <input type="text" value="753.20"/>
Candidate Name MARIA CANTWELL		Category/ Type <input type="text"/>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	IN KIND: CATERING/ROOM RENTAL
State: WA	District: 00	

Full Name (Last, First, Middle Initial) B. The Regency Hotel		Transaction ID: 60616.E1412 Date of Disbursement
Mailing Address 540 Park Avenue		<input type="text" value="05"/> / <input type="text" value="22"/> / <input type="text" value="2006"/>
City New York	State NY	Zip Code 10021-
Purpose of Disbursement CATERING/ROOM RENTAL		Amount of Each Disbursement this Period <input type="text" value="753.21"/>
Candidate Name DEBBIE STABENOW		Category/ Type <input type="text"/>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	IN KIND: CATERING/ROOM RENTAL
State: MI	District: 00	

Full Name (Last, First, Middle Initial) C. The Regency Hotel		Transaction ID: 60616.E1413 Date of Disbursement
Mailing Address 540 Park Avenue		<input type="text" value="05"/> / <input type="text" value="22"/> / <input type="text" value="2006"/>
City New York	State NY	Zip Code 10021-
Purpose of Disbursement CATERING/ROOM RENTAL		Amount of Each Disbursement this Period <input type="text" value="753.21"/>
Candidate Name BILL NELSON		Category/ Type <input type="text"/>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	IN KIND: CATERING/ROOM RENTAL
State: FL	District: 00	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2259.62"/>
TOTAL This Period (last page this line number only)	<input type="text"/>