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)
Hastert for Congress Committee

A.
Full Name (Last, First, Middle Initial)
Porter for Congress

Mailing Address P. O. Box 26087

City: Las Vegas State: NV Zip Code: 89126-

Purpose of Disbursement: FEDERAL CONTRIBUTION

Candidate Name: JONCJR. PORTER

Office Sought: X House / Senate / President
State: NV District: 3

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

Category/Type

Transaction ID: D1022D0435E13784
Date of Disbursement: 12 / 23 / 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)
Porter for Congress

Mailing Address P. O. Box 26087

City: Las Vegas State: NV Zip Code: 89126-

Purpose of Disbursement: FEDERAL CONTRIBUTION

Candidate Name: JONCJR. PORTER

Office Sought: X House / Senate / President
State: NV District: 3

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

Category/Type

Transaction ID: D1022D0435E13785
Date of Disbursement: 12 / 23 / 2003

Amount of Each Disbursement this Period: 1000.00

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

C.
Full Name (Last, First, Middle Initial)
Citizens for Pritchard

Mailing Address 15105 Duffy

City: Hinckley State: IL Zip Code: 60520-

Purpose of Disbursement: NON-FEDERAL DONATION

Candidate Name:

Office Sought: House / Senate / President
State: District:

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

Category/Type

Transaction ID: D1022D0434E13734
Date of Disbursement: 12 / 17 / 2003

Amount of Each Disbursement this Period: 2000.00

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

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **4000.00**

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