

# 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)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Anna Eshoo for Congress

A.

Full Name (Last, First, Middle Initial)  
Halvorson for Congress

Mailing Address 1395 C Main Street

City State Zip Code  
Crete IL 60417

Purpose of Disbursement  
Contribution

Candidate Name  
Halvorson for Congress

Office Sought:  House  
 Senate  
 President

State: IL District: 11

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Transaction ID: EXP.B.9124  
Date of Disbursement

05 / 09 / 2008

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)  
Kay for Congress

Mailing Address P.O. Box 14194

City State Zip Code  
Parkville MO 64152

Purpose of Disbursement  
Contribution

Candidate Name  
Kay for Congress

Office Sought:  House  
 Senate  
 President

State: MO District: 06

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Transaction ID: EXP.B.9121  
Date of Disbursement

05 / 09 / 2008

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)  
Kissell for Congress

Mailing Address 106 East Main Street

City State Zip Code  
Biscoe NC 27209

Purpose of Disbursement  
Contribution

Candidate Name  
Kissell for Congress

Office Sought:  House  
 Senate  
 President

State: NC District: 08

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Transaction ID: EXP.B.8909  
Date of Disbursement

04 / 23 / 2008

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) ..... ▶

3000.00

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