25990591674

04/26/2005 17 : 49

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (In full) — **USE FEC MAILING LABEL OR TYPE OR PRINT** ▼ — Example: If typing, type over the lines

HCA INC. GOOD GOVERNMENT FUND

ADDRESS (number and street) ▼

PO BOX 550

ONE PARK PLAZA

Check if different than previously reported. (ACC)

NASHVILLE | TN | 37203

2. **FEC IDENTIFICATION NUMBER** ▼ — CITY ▲ — STATE ▲ — ZIPCODE ▲

C00067231

3. IS THIS REPORT — NEW (N) **OR** X AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report(Q1)
- X July 15 Quarterly Report(Q2)
- October 15 Quarterly Report(Q3)
- January 31 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
Mar 20 (M3)	Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)	Jan 31 (YE)

(c) 12-Day **PRE**-Election Report for the: Primary (12P) — General (12G) — Runoff (12R) — Convention (12C) — Special (12G)

Election on — in the State of

(d) 30-Day **Post**-Election Report for the: General (30G) — Runoff (30R) — Special (30S)

Election on — in the State of

5. Covering Period 05 20 2004 through 06 30 2004

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer: David Anderson

Signature of Treasurer: Electronically Filed by David Anderson — Date 04 26 2005

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only							

FEC FORM 3X
(Rev. 02/2003)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name
HCA INC. GOOD GOVERNMENT FUND

Report Covering the Period: From: 05 20 2004 To: 06 30 2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2004		329900.71
(b) Cash on Hand at Begining of Reporting Period	223334.87	
(c) Total Receipts (from Line 19)	1425.45	11415.97
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	224760.32	341316.68
7. Total Disbursements (from Line 31)	25192.09	141748.45
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	199568.23	199568.23
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

HCA INC. GOOD GOVERNMENT FUND

Report Covering the Period: From: 05 20 2004 To: 06 30 2004

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	100.00	4500.00
(ii) Unitemized	110.00	4178.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	210.00	8678.50
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ▶	210.00	8678.50
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	1000.00	2000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	215.45	737.47
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	1425.45	11415.97
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	1425.45	11415.97

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	19450.00	110950.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	6100.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ▶	0.00	6100.00
29. Other Disbursements	5742.09	24698.45
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	25192.09	141748.45
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)	25192.09	141748.45

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	210.00	8678.50
34. Total Contribution Refunds (from Line 28(d))	0.00	6100.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	210.00	2578.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

25990591679

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 14
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
HCA INC. GOOD GOVERNMENT FUND

A. Full Name (Last, First, Middle Initial)
Gerald Fornoff

Mailing Address 41 Chateau Latour

City: Metairie
State: LA
Zip Code: 70065

FEC ID number of contributing federal political committee: C

Name of Employer: Lakeland Medical Center

Occupation: CEO

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 06 08 2004

Transaction ID: SA11A1.8408

Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 100.00

TOTAL This Period (last page this line number only) ..... ▶ 100.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 14
(check only one)
☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☒ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
HCA INC. GOOD GOVERNMENT FUND

A.
Full Name (Last, First, Middle Initial)
Friends of Joe Armstrong
Mailing Address PO Box 6597
City: Knoxville State: TN Zip Code: 37914
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 05 20 2004
Transaction ID: SA16.11487
Amount of Each Receipt this Period: 500.00
stop payment on check

B.
Full Name (Last, First, Middle Initial)
Robert Kiss
Mailing Address PO Box 2556
City: Beckley State: WV Zip Code: 25802
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 06 08 2004
Transaction ID: SA16.8402
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 1000.00

TOTAL This Period (last page this line number only) ..... ▶ 1000.00

25990591681

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 14
(check only one)
☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)
HCA INC. GOOD GOVERNMENT FUND

A.
Full Name (Last, First, Middle Initial)
Suntrust Bank
Mailing Address P.O. Box 622227
City: Orlando
State: FL
Zip Code: 32862-2227
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 633.66

Date of Receipt: 05 31 2004
Transaction ID: SA17.8437
Amount of Each Receipt this Period: 111.64
interest

B.
Full Name (Last, First, Middle Initial)
Suntrust Bank
Mailing Address P.O. Box 622227
City: Orlando
State: FL
Zip Code: 32862-2227
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 737.47

Date of Receipt: 06 01 2004
Transaction ID: SA17.8439
Amount of Each Receipt this Period: 103.81
interest

SUBTOTAL of Receipts This Page (optional) ..... ▶	215.45
TOTAL This Period (last page this line number only) ..... ▶	215.45

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)

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
HCA INC. GOOD GOVERNMENT FUND

A. Full Name (Last, First, Middle Initial)
America's Foundation

Mailing Address 128 North Columbus St.

City: Alexandria | State: VA | Zip Code: 22314

Purpose of Disbursement: fundraiser

Candidate Name:

Category/Type:

Office Sought: House / Senate / President

State: District:

Disbursement For: Primary / General / Other (specify)

Transaction ID: SB23.8425
Date of Disbursement: 06 / 14 / 2004

Amount of Each Disbursement this Period: 5000.00

B. Full Name (Last, First, Middle Initial)
CAPITO, SHELLEY MOORE

Mailing Address 2 COMSTOCK PLACE
HDWV02138

City: CHARLESTON | State: WV | Zip Code: 25314

Purpose of Disbursement: campaign

Candidate Name: CAPITO, SHELLEY MOORE

Category/Type:

Office Sought: X House / Senate / President

State: WV District: 02

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

Transaction ID: SB23.8430
Date of Disbursement: 06 / 23 / 2004

Amount of Each Disbursement this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
Friends of Clay Shaw

Mailing Address 2408 Rayburn House Office Bldg.

City: Washington | State: DC | Zip Code: 20515

Purpose of Disbursement: fundraiser

Candidate Name: Friends of Clay Shaw

Category/Type:

Office Sought: X House / Senate / President

State: FL District: 22

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

Transaction ID: SB23.8412
Date of Disbursement: 05 / 24 / 2004

Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **7000.00**

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

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)

21b	22	X 23	24	25	26
27	28a	28b	28c	29	30b

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NAME OF COMMITTEE (In Full)
HCA INC. GOOD GOVERNMENT FUND

A.
Full Name (Last, First, Middle Initial): LOBIONDO FOR CONGRESS
Mailing Address: C/O 7 Summit Court
City: MARMORA State: NJ Zip Code: 08223
Purpose of Disbursement:
Candidate Name: LOBIONDO FOR CONGRESS
Category/Type:
Office Sought: X House / Senate / President
State: NJ District: 02
Disbursement For: 2004 Primary X General Other (specify)
Transaction ID: SB23.8410
Date of Disbursement: 05 / 25 / 2004
Amount of Each Disbursement this Period: 200.00

B.
Full Name (Last, First, Middle Initial): MAX BURNS FOR CONGRESS
Mailing Address: P.O. Box 1965
City: Sylvania State: GA Zip Code: 30467
Purpose of Disbursement:
Candidate Name: MAX BURNS FOR CONGRESS
Category/Type:
Office Sought: X House / Senate / President
State: GA District: 12
Disbursement For: 2004 X Primary General Other (specify)
Transaction ID: SB23.8416
Date of Disbursement: 05 / 24 / 2004
Amount of Each Disbursement this Period: 1250.00

C.
Full Name (Last, First, Middle Initial): Republican National Committee
Mailing Address: 310 First St., SE
City: Washington State: DC Zip Code: 20003
Purpose of Disbursement:
Candidate Name: Republican National Committee
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary General Other (specify)
Transaction ID: SB23.8414
Date of Disbursement: 05 / 24 / 2004
Amount of Each Disbursement this Period: 10000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **11450.00**

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

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)

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
HCA INC. GOOD GOVERNMENT FUND

A. Full Name (Last, First, Middle Initial)
Ron Wyden for Senate

Mailing Address 123 NE 3rd St., Ste. 321

City: Portland
State: OR
Zip Code: 97232

Purpose of Disbursement
fundraiser

Candidate Name
Ron Wyden for Senate

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

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

Category/Type

Transaction ID: SB23.8428
Date of Disbursement
06 / 23 / 2004

Amount of Each Disbursement this Period
1000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 1000.00

TOTAL This Period (last page this line number only) ..... ▶ 19450.00

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)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
HCA INC. GOOD GOVERNMENT FUND

A.
Full Name (Last, First, Middle Initial): Bredesen for Governor
Mailing Address: 511 Union Street, Ste 1640
City: Nashville State: TN Zip Code: 37219
Purpose of Disbursement: fundraiser
Candidate Name: Bredesen for Governor
Category/Type
Office Sought: House / Senate / President
State: TN District:
Disbursement For: 2004 X Primary General Other (specify)
Transaction ID: SB29.8423
Date of Disbursement: 06 / 14 / 2004
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial): Friends of Joe Armstrong
Mailing Address: PO Box 6597
City: Knoxville State: TN Zip Code: 37914
Purpose of Disbursement: campaign
Candidate Name: Friends of Joe Armstrong
Category/Type
Office Sought: X House / Senate / President
State: TN District: 15
Disbursement For: 2004 X Primary General Other (specify)
Transaction ID: SB29.8422
Date of Disbursement: 06 / 14 / 2004
Amount of Each Disbursement this Period: 500.00

C.
Full Name (Last, First, Middle Initial): Kentucky Democratic House Caucus
Mailing Address: PO Box 6266
City: Louisville State: KY Zip Code: 40206
Purpose of Disbursement: fundraiser
Candidate Name:
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary General Other (specify)
Transaction ID: SB29.8432
Date of Disbursement: 06 / 25 / 2004
Amount of Each Disbursement this Period: 500.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 2000.00

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

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)

☐ 21b	☐ 22	☐ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
HCA INC. GOOD GOVERNMENT FUND

A. Full Name (Last, First, Middle Initial): Suntrust Bank
Mailing Address: P.O. Box 622227
City: Orlando | State: FL | Zip Code: 32862-2227
Purpose of Disbursement: account analysis fee
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District
Disbursement For: Primary / General / Other (specify)
Transaction ID: SB29.8438
Date of Disbursement: 05 / 31 / 2004
Amount of Each Disbursement this Period: 178.01

B. Full Name (Last, First, Middle Initial): Suntrust Bank
Mailing Address: P.O. Box 622227
City: Orlando | State: FL | Zip Code: 32862-2227
Purpose of Disbursement: check order fees
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District
Disbursement For: Primary / General / Other (specify)
Transaction ID: SB29.8441
Date of Disbursement: 06 / 17 / 2004
Amount of Each Disbursement this Period: 106.72

C. Full Name (Last, First, Middle Initial): Suntrust Bank
Mailing Address: P.O. Box 622227
City: Orlando | State: FL | Zip Code: 32862-2227
Purpose of Disbursement: account analysis fee
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District
Disbursement For: Primary / General / Other (specify)
Transaction ID: SB29.8440
Date of Disbursement: 06 / 18 / 2004
Amount of Each Disbursement this Period: 207.36

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 492.09

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

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)

☐ 21b	☐ 22	☐ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
HCA INC. GOOD GOVERNMENT FUND

A.
Full Name (Last, First, Middle Initial): Tennessee Republican Party
Mailing Address: 1922 West End Ave, PO Box 330729
City: Nashville State: TN Zip Code: 37203
Purpose of Disbursement: fundraiser
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District
Disbursement For: Primary / General / Other (specify)
Transaction ID: SB29.8420
Date of Disbursement: 06 / 10 / 2004
Amount of Each Disbursement this Period: 2000.00

B.
Full Name (Last, First, Middle Initial): Tennessee Republican Party
Mailing Address: 1922 West End Ave, PO Box 330729
City: Nashville State: TN Zip Code: 37203
Purpose of Disbursement: fundraiser
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District
Disbursement For: Primary / General / Other (specify)
Transaction ID: SB29.8436
Date of Disbursement: 06 / 28 / 2004
Amount of Each Disbursement this Period: 250.00

C.
Full Name (Last, First, Middle Initial): The Committee to elect Bo Watson
Mailing Address: 1304 Heritage Landing Dr.
City: Chattanooga State: TN Zip Code: 37405
Purpose of Disbursement: campaign
Candidate Name: The Committee to elect Bo Watson
Category/Type:
Office Sought: House / Senate / President
State: District
Disbursement For: 2004 X Primary / General / Other (specify)
Transaction ID: SB29.8418
Date of Disbursement: 06 / 10 / 2004
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶	3250.00
TOTAL This Period (last page this line number only) ..... ▶	5742.09