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)
Congressman Bart Gordon Committee

A.
Full Name (Last, First, Middle Initial): Leonard Boswell For Congress
Mailing Address: 900 Maple Street
City: Des Moines State: IA Zip Code: 50309-
Purpose of Disbursement: DONATION
Candidate Name
Office Sought: House / Senate / President
State: District
Disbursement For: 2004 X Primary General Other (specify)
Transaction ID: 101420031E15895
Date of Disbursement: 09 30 2003
Amount of Each Disbursement this Period: 500.00
Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Category/Type

B.
Full Name (Last, First, Middle Initial): Lisa Quigley For Congress
Mailing Address: Box 442
City: Fresno State: CA Zip Code: 03709-0442
Purpose of Disbursement: DONATION
Candidate Name
Office Sought: House / Senate / President
State: District
Disbursement For: 2004 X Primary General Other (specify)
Transaction ID: 101420031E15895
Date of Disbursement: 09 25 2003
Amount of Each Disbursement this Period: 500.00
Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Category/Type

C.
Full Name (Last, First, Middle Initial): Rick Larsen For Congress
Mailing Address: P.O. Box 326
City: Everett State: WA Zip Code: 98206-
Purpose of Disbursement: DONATION
Candidate Name
Office Sought: House / Senate / President
State: District
Disbursement For: 2004 X Primary General Other (specify)
Transaction ID: 101420031E15904
Date of Disbursement: 09 30 2003
Amount of Each Disbursement this Period: 500.00
Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Category/Type

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **1500.00**

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