# 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)
SOLAR ENERGY INDUSTRIES ASSOCIATION PAC

**A.**
Full Name (Last, First, Middle Initial): FRIENDS OF LOIS CAPPS
Mailing Address: PO BOX 23140
City: SANTA BARBARA State: CA Zip Code: 93121
Purpose of Disbursement: CONTRIBUTION
Candidate Name: REP. LOIS CAPPS
Office Sought: [X] House [ ] Senate [ ] President
State: CA District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Category/Type:
Date of Disbursement: 09 27 2006
Amount of Each Disbursement this Period: 500 00

**B.**
Full Name (Last, First, Middle Initial): SNOWE FOR SENATE
Mailing Address: PO BOX 2006
City: PORTLAND State: ME Zip Code: 04104
Purpose of Disbursement: CONTRIBUTION
Candidate Name: SEN. OLYMPIA SNOWE
Office Sought: [ ] House [X] Senate [ ] President
State: ME District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Category/Type:
Date of Disbursement: 09 29 2006
Amount of Each Disbursement this Period: 500 00

**C.**
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Candidate Name:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Category/Type:
Date of Disbursement: M M / D D / Y Y Y Y
Amount of Each Disbursement this Period:

**SUBTOTAL** of Disbursements This Page (optional) ▶
**TOTAL** This Period (last page this line number only) ▶ 4000 00

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