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)
Citizens for Eleanor Holmes Norton

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

Mailing Address 677 South 200 West
Suite A

City: Salt Lake City
State: UT
Zip Code: 84101

Purpose of Disbursement
Candidate Contribution

Candidate Name
Matheson for Congress

Office Sought: X House / Senate / President
State: UT District: 2

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

Transaction ID: SB21.5534
Date of Disbursement
04 / 28 / 2004

Amount of Each Disbursement this Period
1000.00

Category/Type

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

SUBTOTAL of Disbursements This Page (optional) ..... ▶	1000.00
TOTAL This Period (last page this line number only) ..... ▶	1000.00