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

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NAME OF COMMITTEE (In Full)
National Emergency Medicine Political Action Committee

A. Full Name (Last, First, Middle Initial)
Committee To Elect Lindsey Graham

Mailing Address
P.O. Box 1155 PO Box 1155
City: Seneca State: SC Zip Code: 29679

Purpose of Disbursement
YTD:$1,000.00 LINDSEY GRAHAM/HOUSE/SC/3R

Category/Type: 011

Candidate Name
Congressman Lindsey Graham

Office Sought: X House / Senate / President
State: SC District: 3

Disbursement For: Primary / General / X Other (specify)
2002 General

Date of Disbursement: 03 / 21 / 2001

Amount of Each Disbursement this Period: 1000.00

LINDSEY GRAHAM/HOUSE/SC/3RD DIST

Transaction ID: 2466

B. Full Name (Last, First, Middle Initial)
Billy Tauzin Congressional Committee

Mailing Address
550 South Van
City: Houma State: LA Zip Code: 70361

Purpose of Disbursement
YTD:$2,500.00 WJ TAUZIN/HOUSE/LA/3RD DIS

Category/Type: 011

Candidate Name
Congressman W.J. Tauzin

Office Sought: X House / Senate / President
State: LA District: 3

Disbursement For: Primary / General / X Other (specify)
2002 General

Date of Disbursement: 03 / 21 / 2001

Amount of Each Disbursement this Period: 2500.00

WJ TAUZIN/HOUSE/LA/3RD DIST

Transaction ID: 2464

C. Full Name (Last, First, Middle Initial)
Friends Of Lois Capps

Mailing Address
Post Office Box 23940
City: Santa Barbara State: CA Zip Code: 93121

Purpose of Disbursement
YTD:$1,000.00 LOIS CAPPS/HOUSE/CA/22ND D

Category/Type: 011

Candidate Name
Congresswoman Lois Capps

Office Sought: X House / Senate / President
State: CA District: 22

Disbursement For: Primary / General / X Other (specify)
2002 General

Date of Disbursement: 03 / 21 / 2001

Amount of Each Disbursement this Period: 1000.00

LOIS CAPPS/HOUSE/CA/22ND DIST

Transaction ID: 2467

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **4500.00**

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