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)
Akaka in 2006

A. Full Name (Last, First, Middle Initial)
Democratic Party of Hawaii

Mailing Address P.O. Box 23031

City Honolulu State HI Zip Code 96823

Purpose of Disbursement
Transfer of excess campaign funds

Candidate Name

Category/Type 008

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Transaction ID: SB21.4895
Date of Disbursement 04 / 06 / 2004

Amount of Each Disbursement this Period 2500.00

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

B. Full Name (Last, First, Middle Initial)
Democratic Senatorial Campaign Committee

Mailing Address 430 South Capitol Street, S.E.

City Washington State DC Zip Code 20003

Purpose of Disbursement
Transfer of excess campaign funds

Candidate Name

Category/Type 008

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Transaction ID: SB21.4896
Date of Disbursement 04 / 06 / 2004

Amount of Each Disbursement this Period 25000.00

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

SUBTOTAL of Disbursements This Page (optional) ▶ 27500.00

TOTAL This Period (last page this line number only) ▶ 27500.00