

**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)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Friends of Tammy Duckworth		Transaction ID: SB21.14977 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 2 / 2 0 0 6
Mailing Address 416 West 22nd Street		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Lombard State IL Zip Code 60148	Purpose of Disbursement Contribution - IL/06 Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 06	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Hafen for Congress		Transaction ID: SB21.14982 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 2 / 2 0 0 6
Mailing Address 1033 Copper Palm Court		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Henderson State NV Zip Code 89053	Purpose of Disbursement Contribution - NV/03 Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Harry Mitchell for Congress		Transaction ID: SB21.14980 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 2 / 2 0 0 6
Mailing Address 1222 E. Verlea Drive		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Tempe State AZ Zip Code 85282	Purpose of Disbursement Contribution - AZ/05 Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶