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)
Crowley for Congress

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

Mailing Address 2073 Dixie Highway

City: Fort Mitchell
State: KY
Zip Code: 41017

Purpose of Disbursement
contrib KY 4th

Candidate Name

Category/ Type

Office Sought: House / Senate / President
State: District

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

Transaction ID: D7061
Date of Disbursement
09 / 30 / 2004

Amount of Each Disbursement this Period
1000.00

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

B.
Full Name (Last, First, Middle Initial)
Stephanie Herseth For Congress

Mailing Address P.O. Box 75214 D.C.

City: Washington
State: DC
Zip Code: 20013

Purpose of Disbursement
Contrib FDAL

Candidate Name

Category/ Type

Office Sought: House / Senate / President
State: District

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

Transaction ID: D7083
Date of Disbursement
09 / 30 / 2004

Amount of Each Disbursement this Period
1000.00

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

C.
Full Name (Last, First, Middle Initial)
Tom Gallagher For Congress

Mailing Address 4300 E. Sunset Road Suite E-1

City: Henderson
State: NV
Zip Code: 89014

Purpose of Disbursement
contrib MV 03

Candidate Name

Category/ Type

Office Sought: House / Senate / President
State: District

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

Transaction ID: D7098
Date of Disbursement
09 / 30 / 2004

Amount of Each Disbursement this Period
1000.00

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

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **3000.00**

TOTAL This Period (last page this line number only) ..... ▶ **28260.00**