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)
Norwood for Congress

A.
Full Name (Last, First, Middle Initial)
Charles Boustany

Mailing Address 2936 Johnson St.

City: Lafayette | State: LA | Zip Code: 70503-

Purpose of Disbursement
CAMPAIGN CONTRIBUTION

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District

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

Transaction ID: 41014.E6555
Date of Disbursement
10 / 14 / 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)
Charles Boustany

Mailing Address 2936 Johnson St.

City: Lafayette | State: LA | Zip Code: 70503-

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District

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

Transaction ID: 50526.E6886
Date of Disbursement
11 / 10 / 2004

Amount of Each Disbursement this Period
1000.00

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

In-Kind: contribution

C.
Full Name (Last, First, Middle Initial)
Geoffrey Davis

Mailing Address P.O. Box 17192

City: Covington | State: KY | Zip Code: 41017-

Purpose of Disbursement
CAMPAIGN CONTRIBUTION

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District

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

Transaction ID: 41014.E6556
Date of Disbursement
10 / 14 / 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) ..... ▶