

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (In full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines

NORTH CAROLINA FARM BUREAU FEDERATION INC POL ACT CMTE INC (AKA) NC FARM BUREAU FARMPAQ

ADDRESS (number and street)

5301 GLENWOOD AVENUE

Check if different than previously reported. (ACC)

RALEIGH

NC

27612

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00216754

3. IS THIS REPORT

X

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report(Q1)
- X July 15 Quarterly Report(Q2)
- October 15 Quarterly Report(Q3)
- January 31 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2)

May 20 (M5)

Aug 20 (M8)

Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3)

Jun 20 (M6)

Sep 20 (M9)

Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4)

Jul 20 (M7)

Oct 20 (M10)

Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

in the State of

(d) 30-Day Post -Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

04

01

2004

through

06

30

2004

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

NCFARMPAC

Signature of Treasurer

Electronically Filed by NCFARMPAC

Date

07

12

2004

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only

**FEC FORM 3X**  
(Rev. 02/2003)

**SUMMARY PAGE**

**OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

NORTH CAROLINA FARM BUREAU FEDERATION INC POL ACT CMTE INC (AKA) NC FARM BUREAU  
FARMPAC

Report Covering the Period: From: <sup>M</sup>04 <sup>D</sup>01 <sup>Y</sup>2004 To: <sup>M</sup>06 <sup>D</sup>30 <sup>Y</sup>2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <sup>Y</sup> 2004 <sup>Y</sup>		21446.93
(b) Cash on Hand at Beginning of Reporting Period .....	39102.12	
(c) Total Receipts (from Line 19) .....	9719.43	30384.23
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	48821.55	51831.16
<hr/>		
7. Total Disbursements (from Line 31) .....	13536.61	16546.22
<hr/>		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	35284.94	35284.94
<hr/>		
9. Debts and Obligations owed TO the committee (itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed BY the committee (itemize all on Schedule C and/or Schedule D) .....	0.00	

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

NORTH CAROLINA FARM BUREAU FEDERATION INC POL ACT CMTE INC (AKA) NC FARM BUREAU  
FARMPAC

Report Covering the Period: From: <sup>M</sup>04 <sup>-</sup>01 <sup>-</sup>2004 To: <sup>M</sup>06 <sup>-</sup>30 <sup>-</sup>2004

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	3400.00	
(ii) Unitemized .....	6300.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii)) .....	9700.00	30351.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	9700.00	30351.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	19.43	33.23
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)) .....	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	9719.43	30384.23
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	9719.43	30384.23

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	13500.00	16500.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ▶	0.00	0.00
29. Other Disbursements.....	36.61	46.22
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share.....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds.....	0.00	0.00
(c) Total Federal Election ActMty (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	13536.61	16546.22
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 31).....	13536.61	16546.22

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	9700.00	30351.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	9700.00	30351.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 11  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
 NORTH CAROLINA FARM BUREAU FEDERATION INC POL ACT CMTE INC (AKA) NC FARM BUREAU FARM PAC

Full Name (Last, First, Middle Initial) <b>A. Beth Crawford</b>		Date of Receipt M / D / Y 04 / 07 / 2004
Mailing Address 248 Snow Hill Lane		Transaction ID: SA11A1.4202
City Elk Park	State NC	Zip Code 28622
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer Self	Occupation Insurance Sales	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. Joseph Graham</b>		Date of Receipt M / D / Y 06 / 01 / 2004
Mailing Address 4333 Winforde Road		Transaction ID: SA11A1.4187
City Wilmington	State NC	Zip Code 28412
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 400.00
Name of Employer Self	Occupation Insurance Sales	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C. Marvin Matton</b>		Date of Receipt M / D / Y 06 / 01 / 2004
Mailing Address 7396 Baypointe Drive		Transaction ID: SA11A1.4185
City Denver	State NC	Zip Code 28037
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 400.00
Name of Employer Self	Occupation Insurance Sales	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>1100.00</b>
TOTAL This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 11

(check only one)  
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NAME OF COMMITTEE (In Full)  
 NORTH CAROLINA FARM BUREAU FEDERATION INC POL ACT CMTE INC (AKA) NC FARM BUREAU FARM PAC

Full Name (Last, First, Middle Initial) <b>A. Ricky Sandy</b>		Date of Receipt MM / DD / YYYY 04 / 07 / 2004
Mailing Address PD Box 418		Transaction ID: SA11A1.4204
City	State	Zip Code
Raeford	NC	28376
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer Self	Occupation Insurance Sales	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. Sidney Sauls</b>		Date of Receipt MM / DD / YYYY 06 / 01 / 2004
Mailing Address 10579 NC 50 North		Transaction ID: SA11A1.4191
City	State	Zip Code
Angier	NC	27501
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Self	Occupation Insurance Sales	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. Cheryl Stallings</b>		Date of Receipt MM / DD / YYYY 04 / 07 / 2004
Mailing Address 4901 Pioneer Lane		Transaction ID: SA11A1.4206
City	State	Zip Code
Indian Trail	NC	28079
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 400.00
Name of Employer Self	Occupation Insurance Sales	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>1200.00</b>
TOTAL This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8/11

(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
 NORTH CAROLINA FARM BUREAU FEDERATION INC POL ACT CMTE INC (AKA) NC FARM BUREAU FARM PAC

Full Name (Last, First, Middle Initial) A. John Willis, Jr.		Date of Receipt M / D / Y 04 / 10 / 2004
Mailing Address 1113 Bilbury Court		Transaction ID: SA11A1.4209
City Raleigh	State NC	Zip Code 27614
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 400.00
Name of Employer Self	Occupation Insurance Sales	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Todd Yates		Date of Receipt M / D / Y 04 / 07 / 2004
Mailing Address 5105 Clairemont Drive		Transaction ID: SA11A1.4200
City Brown Summit	State NC	Zip Code 27214
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer Self	Occupation Insurance Sales	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Michael Zigler		Date of Receipt M / D / Y 08 / 01 / 2004
Mailing Address 100B Lissa Anne Lane		Transaction ID: SA11A1.4197
City Winston-Salem	State NC	Zip Code 27104
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 400.00
Name of Employer Self	Occupation Insurance Sales	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>1100.00</b>
TOTAL This Period (last page this line number only) .....	▶	<b>3400.00</b>



**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)

PAGE 9 / 11

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORTH CAROLINA FARM BUREAU FEDERATION INC POL ACT CMTE INC (AKA) NC FARM BUREAU FARM PAC

Full Name (Last, First, Middle Initial) <b>A. Erskine Bowles</b>		Transaction ID: SB23.4172 Date of Disbursement 05 / 20 / 2004	
Mailing Address PO Box 26147		Amount of Each Disbursement this Period 500.00	
City Raleigh State NC Zip Code 27611	Purpose of Disbursement Contribution Candidate Name	Category/ Type	
Office Sought: House <input checked="" type="checkbox"/> Senate President State: NC District	Disbursement For: 2004 Primary <input checked="" type="checkbox"/> General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Bob Etheridge</b>		Transaction ID: SB23.4174 Date of Disbursement 06 / 28 / 2004	
Mailing Address PO Box 26001		Amount of Each Disbursement this Period 1000.00	
City Raleigh State NC Zip Code 27611-8001	Purpose of Disbursement Contribution Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House Senate President State: NC District 2	Disbursement For: 2004 Primary <input checked="" type="checkbox"/> General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Robert Hayes</b>		Transaction ID: SB23.4167 Date of Disbursement 04 / 19 / 2004	
Mailing Address PO Box 2000		Amount of Each Disbursement this Period 1000.00	
City Concord State NC Zip Code 28026	Purpose of Disbursement Contribution Candidate Name Robert Hayes	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House Senate President State: NC District 8	Disbursement For: 2004 Primary <input checked="" type="checkbox"/> General Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>2500.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 / 11

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORTH CAROLINA FARM BUREAU FEDERATION INC POL ACT CMTE INC (AKA) NC FARM BUREAU  
FARMPAC

Full Name (Last, First, Middle Initial) <b>A. Mike McIntyre</b>		Transaction ID: SB23.4170 Date of Disbursement 04 / 30 / 2004	
Mailing Address 301 Green Street Room 21B		Amount of Each Disbursement this Period 1000.00	
City Fayetteville	State NC	Zip Code 28901	Category/ Type
Purpose of Disbursement Contribution			
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼		
State: NC      District: 7			

Full Name (Last, First, Middle Initial) <b>B. PCIPAC</b>		Transaction ID: SB23.4188 Date of Disbursement 04 / 30 / 2004	
Mailing Address 2600 South River Road		Amount of Each Disbursement this Period 5000.00	
City Des Plaines	State IL	Zip Code 60018-3286	Category/ Type
Purpose of Disbursement Contribution			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼		
State:            District:			

Full Name (Last, First, Middle Initial) <b>C. The Leadership Circle</b>		Transaction ID: SB23.4182 Date of Disbursement 04 / 12 / 2004	
Mailing Address 414 Fayetteville Street Mall		Amount of Each Disbursement this Period 5000.00	
City Raleigh	State NC	Zip Code 27601	Category/ Type
Purpose of Disbursement Contribution			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼		
State:            District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>11000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>13500.00</b>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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FOR LINE NUMBER:  
(check only one)

PAGE 11 / 11

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORTH CAROLINA FARM BUREAU FEDERATION INC POL ACT CMTE INC (AKA) NC FARM BUREAU  
FARMPAC

Full Name (Last, First, Middle Initial) <b>A. BB&amp;T</b>		Transaction ID: SB29.4175 Date of Disbursement 04 / 30 / 2004	
Mailing Address PO Box 27861		Amount of Each Disbursement this Period 15.98	
City Raleigh State NC Zip Code 27612	Purpose of Disbursement Service Charges Candidate Name	001 Category/ Type	
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. BB&amp;T</b>		Transaction ID: SB29.4176 Date of Disbursement 05 / 31 / 2004	
Mailing Address PO Box 27861		Amount of Each Disbursement this Period 7.55	
City Raleigh State NC Zip Code 27612	Purpose of Disbursement Candidate Name	001 Category/ Type	
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. BB&amp;T</b>		Transaction ID: SB29.4177 Date of Disbursement 06 / 30 / 2004	
Mailing Address PO Box 27861		Amount of Each Disbursement this Period 13.10	
City Raleigh State NC Zip Code 27612	Purpose of Disbursement Service Charges Candidate Name	001 Category/ Type	
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>36.61</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>36.61</b>