

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)

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<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)
Becerra for Congress

A. Full Name (Last, First, Middle Initial) Bill Owens for Congress Mailing Address P.O. Box 1575 City State Zip Code Plattsburgh NY 12901 Purpose of Disbursement Contribution 2010 NY-H-23 Special Candidate Name Bill Owens Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special	Transaction ID: D386907 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 9
	Amount of Each Disbursement this Period 2000.00
	Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special
B. Full Name (Last, First, Middle Initial) Calif. Democratic Party Mailing Address 1401 21st Street Suite 200 City State Zip Code Sacramento CA 95811 Purpose of Disbursement Contribution Candidate Name Calif. Democratic Party Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D387648 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 9
	Amount of Each Disbursement this Period 3000.00
	Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Costco Mailing Address 2901 Los Feliz Blvd. City State Zip Code Los Angeles CA 90038 Purpose of Disbursement 11/3 Policy Dinner - Beverages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D387690 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 9
	Amount of Each Disbursement this Period 70.30
	Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	5070.30
TOTAL This Period (last page this line number only) ▶	(Empty box)