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)
Graves for Congress

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

Mailing Address P.O. Box 16538

City: Greenville | State: SC | Zip Code: 29606-

Purpose of Disbursement: CAMPAIGN CONTRIBUTION

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District

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

Transaction ID: 1002200329E61B
Date of Disbursement: 09 / 20 / 2003

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)
Bush for President

Mailing Address P.O. Box 10648

City: Arlington | State: VA | Zip Code: 22210-

Purpose of Disbursement: CAMPAIGN CONTRIBUTION

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District

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

Transaction ID: 1002200329E824
Date of Disbursement: 07 / 23 / 2003

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)
Capito for Congress

Mailing Address P.O. Box 11519

City: Charleston | State: WV | Zip Code: 25339-

Purpose of Disbursement: CAMPAIGN CONTRIBUTION

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District

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

Transaction ID: 1002200329E819
Date of Disbursement: 07 / 14 / 2003

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) ..... ▶