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): Northrup for Congres
Mailing Address:
City: State: Zip Code:
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: 10022D0329E621
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

B.
Full Name (Last, First, Middle Initial): Wilson for Congress
Mailing Address: 2988 Sunset Blvd.
City: West Columbia State: SC Zip Code: 29171-
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: 10022D0329E623
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) ▶	2000.00
TOTAL This Period (last page this line number only) ▶	8000.00