

**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)

| | | | |
|------------------------------|------------------------------|------------------------------|--|
| <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)
Steve Israel For Congress Committee

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Kellam for Congress | | Transaction ID: D9127 Date of Disbursement 08 / 26 / 2006 |
| Mailing Address PO Box 46254 | | Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Virginia Beach | State VA | |
| Zip Code 23456 | Category/Type 011 | |
| Purpose of Disbursement Contributions | | |
| Candidate Name Philip Kellam | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: VA District: 02 | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Linda Stender for Congress | | Transaction ID: D9129 Date of Disbursement 08 / 26 / 2006 |
| Mailing Address PO Box 730 | | Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Scotch Plains | State NJ | |
| Zip Code 07076 | Category/Type 011 | |
| Purpose of Disbursement Contributions | | |
| Candidate Name Linda Stender | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: NJ District: 07 | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Mike Weaver for Congress | | Transaction ID: D9142 Date of Disbursement 09 / 29 / 2006 |
| Mailing Address 131 Mayer Lane | | Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Elizabethtown | State KY | |
| Zip Code 42701 | Category/Type 011 | |
| Purpose of Disbursement Contributions | | |
| Candidate Name Michael Weaver | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: KY District: 02 | | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 3000.00 |
| TOTAL This Period (last page this line number only) ▶ | _____ |