

**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)
Lincoln Davis for Congress

Full Name (Last, First, Middle Initial) A. Bob Clement for Mayor		Transaction ID: SB21.19631 Date of Disbursement 08 / 16 / 2007
Mailing Address PO Box 24727		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 Nashville	State TN	
Zip Code 37221		
Purpose of Disbursement Contribution Candidate Name LINCOLN DAVIS Category/Type 011		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TN District: 04		

Full Name (Last, First, Middle Initial) B. Democratic Congressional Campaign Committee - Contributions		Transaction ID: SB21.19659 Date of Disbursement 09 / 27 / 2007
Mailing Address 430 South Capitol Street SE 2nd Floor		Amount of Each Disbursement this Period 5000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Washington	State DC	
Zip Code 20003		
Purpose of Disbursement Donation Candidate Name LINCOLN DAVIS Category/Type 012		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TN District: 04		

Full Name (Last, First, Middle Initial) C. ELLSWORTH FOR CONGRESS COMMITTEE		Transaction ID: SB21.19660 Date of Disbursement 09 / 28 / 2007
Mailing Address P.O. Box 62		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 Evansville	State IN	
Zip Code 47701		
Purpose of Disbursement Contribution Candidate Name LINCOLN DAVIS Category/Type 011		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IN District: 08		

SUBTOTAL of Disbursements This Page (optional)	7000.00
TOTAL This Period (last page this line number only)	