

# 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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Marsha Blackburn for Congress, Inc.

A.	Full Name (Last, First, Middle Initial) Anne Northup for Congress  Mailing Address P.O. Box 7313  City Louisville State KY Zip Code 40257  Purpose of Disbursement Political Contribution Candidate Name Anne Northup  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 03  Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-5762 Date of Disbursement 09 / 27 / 2006  Amount of Each Disbursement this Period 500.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Max Burns for Congress  Mailing Address PO Box 1965  City Sylvania State GA Zip Code 30467-7165  Purpose of Disbursement Political Contribution Candidate Name Max Burns  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 12  Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-5742 Date of Disbursement 09 / 27 / 2006  Amount of Each Disbursement this Period 2000.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Jim Gerlach For Congress  Mailing Address PO Box 87  City Uwchland State PA Zip Code 19480-0087  Purpose of Disbursement Political Contribution Candidate Name Jim Gerlach  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 06  Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-5769 Date of Disbursement 09 / 27 / 2006  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

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____