

**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)

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<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)
Nadler for Congress, Inc.

Full Name (Last, First, Middle Initial)
A. Friends of Dave Ross

Mailing Address 12443 Bel Red Rd
Suite 36D

City Bellevue State WA Zip Code 98005-5801

Purpose of Disbursement
Contribution WA08

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

011
Category/
Type

Transaction ID: 41009.E3207
Date of Disbursement

10 / 02 / 2004

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)
B. Friends of Jon Jennings Committee

Mailing Address 201 NW 4th St

City Evansville State IN Zip Code 47708-1356

Purpose of Disbursement
Contribution IN08

Candidate Name
JONPAUL JENNINGS

Office Sought: x House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: IN District D8

011
Category/
Type

Transaction ID: 41009.E3205
Date of Disbursement

10 / 02 / 2004

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)
C. Gallagher for Congress

Mailing Address 4300 E Sunset Rd
Suite E-1

City Henderson State NV Zip Code 89014-2269

Purpose of Disbursement
Contribution NV03

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

011
Category/
Type

Transaction ID: 41009.E3204
Date of Disbursement

10 / 02 / 2004

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) ▶