

**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)  
 Mike Honda for Congress

Full Name (Last, First, Middle Initial)  
**A. Driscoll for Congress**

Mailing Address 701 W. Broad St.  
 Suite 200

City San Jose State CA Zip Code 95113

Purpose of Disbursement  
 General-House-PA-15

Candidate Name

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

State: District

Category/  
 Type

Transaction ID: D3856  
 Date of Disbursement

10 / 26 / 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 Dave Ross**

Mailing Address 12443 Bel Red Road  
 Suite 360

City Bellevue State WA Zip Code 98005

Purpose of Disbursement  
 General-House-WA-08

Candidate Name

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

State: District

Category/  
 Type

Transaction ID: D3860  
 Date of Disbursement

10 / 26 / 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. Friends of Jon Jennings Committee**

Mailing Address 201 NW 4th St  
 #100

City Evansville State IN Zip Code 47708

Purpose of Disbursement  
 General-House-IN-08

Candidate Name

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

State: District

Category/  
 Type

Transaction ID: D3858  
 Date of Disbursement

10 / 26 / 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) ▶