

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBERS: (check only one)						PAGE	OF
	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26		
	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 29	<input type="checkbox"/> 29	<input type="checkbox"/> 30		

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NAME OF COMMITTEE (in full)
Commercial Federal Political Action Committee

A. NEBRASKA REPUBLICAN PARTY

Full Name (Last, First, Middle Initial):
NEBRASKA REPUBLICAN PARTY

Date of Disbursement: 10/20/2004

Mailing Address: 1010 N STREET

City: LINCOLN State: NE Zip Code: 68508

Purpose of Disbursement: CONTRIBUTION

Candidate Name:

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: District:

Amount of Each Disbursement this Period: 1000.00

Category/Type: 011

B. REPUBLICAN PARTY OF IOWA

Full Name (Last, First, Middle Initial):
REPUBLICAN PARTY OF IOWA

Date of Disbursement: 10/20/2004

Mailing Address: 621 EAST 9TH STREET

City: DES MOINES State: IA Zip Code: 50309

Purpose of Disbursement: CONTRIBUTION

Candidate Name:

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: District:

Amount of Each Disbursement this Period: 1000.00

Category/Type: 011

C.

Full Name (Last, First, Middle Initial):

Date of Disbursement:

Mailing Address:

City: State: Zip Code:

Purpose of Disbursement:

Candidate Name:

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: District:

Amount of Each Disbursement this Period:

Category/Type:

SUBTOTAL of Disbursements This Page (optional): 2000.00

TOTAL This Period (last page this line number only): 2000.00