

**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)  
GENE GREEN CONGRESSIONAL CAMPAIGN

A.	Full Name (Last, First, Middle Initial) BAKER FOR CONGRESS	Transaction ID: SB21.16026 Date of Disbursement
	Mailing Address PO Box 312	<input type="text" value="10"/> <input type="text" value="17"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Columbia State MO Zip Code 65295	Amount of Each Disbursement this Period
	Purpose of Disbursement Federal Contribution	<input type="text" value="2000.00"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 09	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) BRIGHT FOR CONGRESS.COM	Transaction ID: SB21.16027 Date of Disbursement
	Mailing Address P.O.Box 2106	<input type="text" value="10"/> <input type="text" value="17"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Montgomery State AL Zip Code 36102	Amount of Each Disbursement this Period
	Purpose of Disbursement Federal Contribution	<input type="text" value="2000.00"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 02	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) CARMOUCHE FOR CONGRESS INC	Transaction ID: SB21.16085 Date of Disbursement
	Mailing Address 912 KINGS HIGHWAY	<input type="text" value="11"/> <input type="text" value="20"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City SHREVEPORT State LA Zip Code 71104	Amount of Each Disbursement this Period
	Purpose of Disbursement Federal Contribution	<input type="text" value="2000.00"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 04	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-General

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="6000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>