

**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)
Abercrombie for Congress

Full Name (Last, First, Middle Initial)
A. Chet Edwards for Congress

Mailing Address P.O. Box 29273

City Waco State TX Zip Code 76702-

Purpose of Disbursement
CONTRIBUTION

Candidate Name
CHET EDWARDS

Office Sought: House
Senate
President

State: TX District: 17

Disbursement For: 2004
Primary General
Other (specify) ▼

Category/
Type

Transaction ID: D930200432E2819
Date of Disbursement

09 / 13 / 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 Clayton Hee

Mailing Address P.O. Box 4484

City Kaneohe State HI Zip Code 06744-

Purpose of Disbursement
NONFEDERAL CONTRIBUTION

Candidate Name

Office Sought: House
Senate
President

State: District

Disbursement For: 2004
 Primary General
Other (specify) ▼

Category/
Type

Transaction ID: D913200447E2808
Date of Disbursement

09 / 13 / 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 Clayton Hee

Mailing Address P.O. Box 4484

City Kaneohe State HI Zip Code 06744-

Purpose of Disbursement
NONFEDERAL CONTRIBUTION

Candidate Name

Office Sought: House
Senate
President

State: District

Disbursement For: 2004
Primary General
Other (specify) ▼

Category/
Type

Transaction ID: 0930200432E2829
Date of Disbursement

09 / 21 / 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) ▶