SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
TRIAD HOSPITALS INC GOOD GOVERNMENT FUND

A.
Full Name (Last, First, Middle Initial): PEARCE FOR CONGRESS
Mailing Address: PO BOX 2696
City: HOBBS State: NM Zip Code: 88241
Purpose of Disbursement: campaign
Candidate Name: PEARCE FOR CONGRESS
Category/Type
Office Sought: X House / Senate / President
State: NM District: 02
Disbursement For: 2004 Primary X General Other (specify)
Transaction ID: SB23.5556
Date of Disbursement: 06/23/2004
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial): Pete Sessions for Congress
Mailing Address: PO Box 38585
City: Dallas State: TX Zip Code: 75238
Purpose of Disbursement: Campaign
Candidate Name: Pete Sessions for Congress
Category/Type
Office Sought: X House / Senate / President
State: TX District: 32
Disbursement For: 2004 Primary X General Other (specify)
Transaction ID: SB23.5385
Date of Disbursement: 06/23/2004
Amount of Each Disbursement this Period: 1000.00

C.
Full Name (Last, First, Middle Initial): Rely on Your Beliefs Fund
Mailing Address: 209 Pennsylvania Ave, SE
City: Washington State: DC Zip Code: 20003
Purpose of Disbursement: annual fundraiser
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: 2004 Primary General X Other (specify)
Transaction ID: SB23.5444
Date of Disbursement: 04/28/2004
Amount of Each Disbursement this Period: 2000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **4000.00**

TOTAL This Period (last page this line number only) ..... ▶