

**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)	PAGE 7 OF 11			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
FRIENDS OF BUD CRAMER

Full Name (Last, First, Middle Initial) A. ANNA ESHOO FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2012
Mailing Address 555 CAPITOL MALL, SUITE 1425		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.5265
City SACRAMENTO	State CA	
Zip Code 95814	Purpose of Disbursement contribution to candidate committee	011 Category/ Type
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: CA District: 18	

Full Name (Last, First, Middle Initial) B. BETTY SUTTON FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2012
Mailing Address PO BOX 14693		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.5261
City COPLEY	State OH	
Zip Code 44321	Purpose of Disbursement contribution to candidate committee	011 Category/ Type
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: OH District: 16	

Full Name (Last, First, Middle Initial) C. CHRIS COONS FOR DELAWARE		Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2012
Mailing Address PO BOX 9900		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.5269
City NEWARK	State DE	
Zip Code 19714	Purpose of Disbursement contribution to candidate committee	011 Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: DE District: 00	

SUBTOTAL of Disbursements This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	