

**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)

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<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"/> 28c
<input type="checkbox"/> 29				

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NAME OF COMMITTEE (In Full)
Lone Star Fund

Full Name (Last, First, Middle Initial) A. Richardson For Congress		Date of Disbursement 06 / 26 / 2002
Mailing Address P.O. Box 53012 City: Fayetteville State: NC Zip Code: 28305		Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement Contribution		Transaction ID: D714
Candidate Name William Richardson		
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	
State: NC District: 8		

Full Name (Last, First, Middle Initial) B. Stupak for Congress		Date of Disbursement 06 / 14 / 2002
Mailing Address P.O. Box 143 City: Menominee State: MI Zip Code: 49858		Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement Earmarked from ABA BANKPAC		[MEMO ITEM]
Candidate Name Bart Stupak		
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: D735
State: MI District: 1		

Full Name (Last, First, Middle Initial) C. Citizens For Mark Shriver		Date of Disbursement 06 / 25 / 2002
Mailing Address P.O. Box 342310 City: West Bethesda State: MD Zip Code: 20827		Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement Contribution		Transaction ID: D899
Candidate Name Mark Shriver		
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	
State: MD District: 8		

SUBTOTAL of Disbursements This Page (optional)	2000.00
TOTAL This Period (last page this line number only)	