

**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)  
SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

Full Name (Last, First, Middle Initial) <b>A. CHAFEE FOR SENATE</b>		Date of Disbursement 07 / 10 / 2002
Mailing Address PO BOX 7329 City: WARWICK State: RI Zip Code: 02887		Amount of Each Disbursement this Period 2000.00
Purpose of Disbursement		Transaction ID: SB23.5112
Candidate Name CHAFEE FOR SENATE		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	
State: RI District: 00		

Full Name (Last, First, Middle Initial) <b>B. CITIZENS FOR GILLMOR</b>		Date of Disbursement 07 / 10 / 2002
Mailing Address PO BOX 910 City: PORT CLINTON State: OH Zip Code: 43452		Amount of Each Disbursement this Period 2000.00
Purpose of Disbursement		Transaction ID: SB23.5116
Candidate Name CITIZENS FOR GILLMOR		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼	
State: OH District: 05		

Full Name (Last, First, Middle Initial) <b>C. COBLE FOR CONGRESS</b>		Date of Disbursement 07 / 10 / 2002
Mailing Address PO Box 1177 PO Box 1177 City: Greensboro State: NC Zip Code: 27402		Amount of Each Disbursement this Period 2000.00
Purpose of Disbursement		Transaction ID: SB23.5143
Candidate Name COBLE FOR CONGRESS		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼	
State: NC District: 08		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>6000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	