

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 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)
BOB BRADY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mary Mason Community Foundation		Transaction ID: D713200327E528 Date of Disbursement 05 / 07 / 2003
Mailing Address The Wanamaker Bldg. Suite 800		Amount of Each Disbursement this Period 1000.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Philadelphia	State PA Zip Code 19107-	
Purpose of Disbursement TICKETS / CONTRIBUTION	Category/ Type	
Candidate Name		
Office Sought: House Senate President	Disbursement For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District	Other	

Full Name (Last, First, Middle Initial) B. Friends of Congressman Tim Holden		Transaction ID: D713200327E537 Date of Disbursement 06 / 12 / 2003
Mailing Address 31 PEARLE STREET		Amount of Each Disbursement this Period 2000.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Saint Clair	State PA Zip Code 17970-	
Purpose of Disbursement CONTRIBUTION	Category/ Type	
Candidate Name		
Office Sought: House Senate President	Disbursement For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District	Other	

Full Name (Last, First, Middle Initial) C. Sister Clara Muhammed School		Transaction ID: D713200327E528 Date of Disbursement 04 / 11 / 2003
Mailing Address 4700 WYALUSING AVENUE		Amount of Each Disbursement this Period 1250.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Philadelphia	State PA Zip Code 19131-	
Purpose of Disbursement CONTRIBUTION/TICKETS	Category/ Type	
Candidate Name		
Office Sought: House Senate President	Disbursement For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District	Other	

SUBTOTAL of Disbursements This Page (optional)	▶	4250.00
TOTAL This Period (last page this line number only)	▶	