

**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)				PAGE 20 / 25	
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b

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NAME OF COMMITTEE (In Full)
Burson-Marsteller/Young & Rubicam Political Action Committee

Full Name (Last, First, Middle Initial) A. HENRY E BROWN JR FOR CONGRESS		Transaction ID: SB23.5875 Date of Disbursement 02 / 24 / 2003
Mailing Address P. O. Box 61886		Amount of Each Disbursement this Period 1000.00
City North Charleston	State SC Zip Code 29419	
Purpose of Disbursement Contribution	Candidate Name	
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House Senate President State: SC District: D1	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. HOBSON FOR CONGRESS		Transaction ID: SB23.5834 Date of Disbursement 03 / 11 / 2003
Mailing Address 82 West Columbia		Amount of Each Disbursement this Period 1000.00
City Springfield	State OH Zip Code 45503	
Purpose of Disbursement Contribution	Candidate Name	
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House Senate President State: OH District: D7	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. JESSE JACKSON JR FOR CONGRESS COMMITTEE		Transaction ID: SB23.5845 Date of Disbursement 03 / 31 / 2003
Mailing Address 7016 S. Euclid Avenue		Amount of Each Disbursement this Period 500.00
City Chicago	State IL Zip Code 60649	
Purpose of Disbursement Contribution	Candidate Name	
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House Senate President State: IL District: D2	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	2500.00
TOTAL This Period (last page this line number only)	