

# 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)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Doheny for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Mr. Robert J White</p> <p>Mailing Address 49 Parkway Drive</p> <p>City Rye State NY Zip Code 10580</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p><b>Transaction ID:</b> SB20A.4564</p> <p>Date of Disbursement 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 4800.00</p> <p>010 Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Mr. Anthony A Yoseloff</p> <p>Mailing Address 15 Central Park West Apt.34D</p> <p>City New York State NY Zip Code 10023</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p><b>Transaction ID:</b> SB20A.4565</p> <p>Date of Disbursement 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 2400.00</p> <p>010 Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Nanar N Yoseloff</p> <p>Mailing Address 15 Central Park West Apt 34D</p> <p>City New York State NY Zip Code 10023</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p><b>Transaction ID:</b> SB20A.4566</p> <p>Date of Disbursement 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 2400.00</p> <p>010 Category/Type</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

9600.00

**TOTAL** This Period (last page this line number only) ..... ▶