

**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)				PAGE 10 / 10
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 18b 21	

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NAME OF COMMITTEE (In Full)
TORRICELLI FOR U S SENATE INC

Full Name (Last, First, Middle Initial) A. NEW JERSEY DEMOCRATIC STATE COMMITTEE		Transaction ID: SB21.5134 Date of Disbursement
Mailing Address 150 West State Street		M M D D J J Y Y Y Y 10 11 2006
City Trenton	State NJ	Zip Code 08608
Purpose of Disbursement Contribution/Excess Campaign Funds		Amount of Each Disbursement this Period 50000.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. North Bergen Democratic Municipal Cmte.		Transaction ID: SB21.5124 Date of Disbursement
Mailing Address Re-elect Nick Sacco Mayor 7202 Hudson Avenue		M M D D J J Y Y Y Y 10 11 2006
City North Bergen	State NJ	Zip Code 07047
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	51000.00
TOTAL This Period (last page this line number only)	112000.00

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