

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 type="checkbox"/> | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input checked="" 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)
Westmoreland for Congress

| | | |
|---|-------------------|--|
| Full Name (Last, First, Middle Initial) A. Beauprez for Congress | | Transaction ID: 50328.E1356 Date of Disbursement 03 / 25 / 2005 |
| Mailing Address P.O. Box 501 | | Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Wheat Ridge State CO Zip Code 80034- | | |
| Purpose of Disbursement Candidate Name BOB BEAUPREZ Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 07 | Category/ Type | |
| Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|-------------------|---|
| Full Name (Last, First, Middle Initial) B. Michael Fitzpatrick for Congress | | Transaction ID: 50328.E1357 Date of Disbursement 03 / 25 / 2005 |
| Mailing Address P.O. Box 1772 | | Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Michael Fitzpatrick PA8 |
| City Doylestown State PA Zip Code 18901- | | |
| Purpose of Disbursement Candidate Name MICHAEL FITZPATRICK PA8 Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Category/ Type | |
| Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|--|-------------------|--|
| Full Name (Last, First, Middle Initial) C. Gerlach for Congress | | Transaction ID: 50328.E1358 Date of Disbursement 03 / 25 / 2005 |
| Mailing Address 911 Welsh Ayres Way | | Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Downingtown State PA Zip Code 19335- | | |
| Purpose of Disbursement Candidate Name JIM GERLACH Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 06 | Category/ Type | |
| Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 1500.00 |
| TOTAL This Period (last page this line number only) ▶ | _____ |