

**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 OF | |
| | <input type="checkbox"/> 21b <input type="checkbox"/> 27 | <input type="checkbox"/> 22 <input type="checkbox"/> 28a | <input checked="" type="checkbox"/> 23 <input type="checkbox"/> 28b | <input type="checkbox"/> 24 <input type="checkbox"/> 28c |
| | | | <input type="checkbox"/> 26 <input type="checkbox"/> 30b | |

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)
OKLAHOMA COMMUNITY ACTION PROGRAM PAC

| | | |
|--|----------------------------|---|
| Full Name (Last, First, Middle Initial) A. RICE FOR U.S. SENATE | | Date of Disbursement MM/DD/YYYY 03/25/2008 |
| Mailing Address P.O. BOX 1027 | | Amount of Each Disbursement this Period 200.00 |
| City OKLAHOMA CITY | State OK | |
| Zip Code 73102 | | Category/ Type 011 |
| Purpose of Disbursement CONTRIBUTION | | |
| Candidate Name ANDREW RICE | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: OK District: | |

| | | |
|---|------------------|--|
| Full Name (Last, First, Middle Initial) B. | | Date of Disbursement MM/DD/YYYY |
| Mailing Address | | Amount of Each Disbursement this Period |
| City | State | |
| Zip Code | | Category/ Type |
| Purpose of Disbursement | | |
| Candidate Name | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: District: | |

| | | |
|---|------------------|--|
| Full Name (Last, First, Middle Initial) C. | | Date of Disbursement MM/DD/YYYY |
| Mailing Address | | Amount of Each Disbursement this Period |
| City | State | |
| Zip Code | | Category/ Type |
| Purpose of Disbursement | | |
| Candidate Name | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: District: | |

| | |
|---|---------------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 200.00 |
| TOTAL This Period (last page this line number only).....▶ | 200.00 |

28039712129