

**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)

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<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

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NAME OF COMMITTEE (In Full)  
 MURTHA FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)  
 A. Comm to Re-Elect Scott Andreassi, D.A.

Mailing Address R.D. 1, Box 298C

City East Brady State PA Zip Code 16026

Purpose of Disbursement  
 Contribution

Candidate Name

Office Sought: House Senate President  
 Disbursement For: Primary General Other (specify) ▼

State: District

Category/  
 Type

Transaction ID: SB21.24084

Date of Disbursement

10 / 12 / 2005

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. D.C.C.C.

Mailing Address 430 S. Capitol Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
 Excess Contribution

Candidate Name

Office Sought: House Senate President  
 Disbursement For: Primary General Other (specify) ▼

State: District

Category/  
 Type

Transaction ID: SB21.24086

Date of Disbursement

10 / 05 / 2005

Amount of Each Disbursement this Period

10000.00

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. D.C.C.C.

Mailing Address 430 S. Capitol Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
 Contribution

Candidate Name

Office Sought: House Senate President  
 Disbursement For: Primary General Other (specify) ▼

State: District

Category/  
 Type

Transaction ID: SB21.24255

Date of Disbursement

11 / 02 / 2005

Amount of Each Disbursement this Period

15000.00

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

26000.00

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