

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
PROGRESSIVE CHOICES PAC

**A.** Full Name (Last, First, Middle Initial)  
ELLEN SIMON FOR CONGRESS

Mailing Address PO BOX 20435

City SEDONA State AZ Zip Code 86341

Purpose of Disbursement  
Contribution

Candidate Name  
ELLEN SIMON

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: AZ District: 01

Transaction ID: SB23.4844

Date of Disbursement

10 / 27 / 2006

Amount of Each Disbursement this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
FRIENDS OF TAMMY DUCKWORTH

Mailing Address 416 W 22ND ST

City LOMBARD State IL Zip Code 60148

Purpose of Disbursement  
Contribution

Candidate Name  
L. TAMMY DUCKWORTH

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: IL District: 06

Transaction ID: SB23.4871

Date of Disbursement

11 / 02 / 2006

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
GILLIBRAND FOR CONGRESS

Mailing Address PO BOX 1279

City HUDSON State NY Zip Code 12534

Purpose of Disbursement  
Contribution

Candidate Name  
KIRSTEN E GILLIBRAND

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: NY District: 20

Transaction ID: SB23.4869

Date of Disbursement

11 / 02 / 2006

Amount of Each Disbursement this Period

2000.00

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

4000.00

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