

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF JOHN LAFALCE

Full Name (Last, First, Middle Initial)
A. Canisius College

Mailing Address 2001 Main Street

City Buffalo State NY Zip Code 14208

Purpose of Disbursement
donation

Candidate Name
FRIENDS OF JOHN LAFALCE

Office Sought: House
Senate
President

State: NY District 29

Disbursement For: 2006
 Primary General
Other (specify) ▼

Category/
Type

Transaction ID: SB17.8954
Date of Disbursement

02 / 29 / 2005

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. Cristo Rey Jesuit High School

Mailing Address 1852 West 22nd Place

City Chicago State IL Zip Code 60608

Purpose of Disbursement
donation

Candidate Name
FRIENDS OF JOHN LAFALCE

Office Sought: House
Senate
President

State: NY District 29

Disbursement For: 2006
 Primary General
Other (specify) ▼

012
Category/
Type

Transaction ID: SB17.8952
Date of Disbursement

02 / 29 / 2005

Amount of Each Disbursement this Period

500.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
[MEMO ITEM]

Full Name (Last, First, Middle Initial)
C. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE - EXPENDITURES

Mailing Address 430 S CAPITOL ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
contribution

Candidate Name
FRIENDS OF JOHN LAFALCE

Office Sought: House
Senate
President

State: NY District 29

Disbursement For: 2006
 Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: SB17.8959
Date of Disbursement

03 / 29 / 2005

Amount of Each Disbursement this Period

5000.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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