

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 21 / 29

<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

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)
The National Right to Work Committee PAC

A.	Full Name (Last, First, Middle Initial) LAMBERTI FOR CONGRESS Mailing Address PO BOX 785 City ANKENY State IA Zip Code 50021 Purpose of Disbursement Campaign contribution Candidate Name JEFFREY LAMBERTI Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 03 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.16929 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td>/</td><td>1</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">1000.00</td> </tr> </table> Category/Type <table border="1"> <tr> <td style="text-align: center;">011</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	1	4	/	2	0	0	6	1000.00	011
M	M	/	D	D	/	Y	Y	Y	Y															
0	9	/	1	4	/	2	0	0	6															
1000.00																								
011																								
B.	Full Name (Last, First, Middle Initial) LAMBORN FOR CONGRESS Mailing Address 5170 NORTH UNION BLVD City COLORADO SPRINGS State CO Zip Code 80918 Purpose of Disbursement Campaign contribution Candidate Name DOUGLAS L LAMBORN Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 15 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.16963 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td>/</td><td>2</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">1000.00</td> </tr> </table> Category/Type <table border="1"> <tr> <td style="text-align: center;">011</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	2	5	/	2	0	0	6	1000.00	011
M	M	/	D	D	/	Y	Y	Y	Y															
0	9	/	2	5	/	2	0	0	6															
1000.00																								
011																								
C.	Full Name (Last, First, Middle Initial) MAC COLLINS FOR CONGRESS Mailing Address P.O. Box 962 City Jackson State GA Zip Code 30233 Purpose of Disbursement Campaign contribution Candidate Name MICHAEL ALLEN COLLINS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 08 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.16986 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td>/</td><td>2</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">2000.00</td> </tr> </table> Category/Type <table border="1"> <tr> <td style="text-align: center;">011</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	2	6	/	2	0	0	6	2000.00	011
M	M	/	D	D	/	Y	Y	Y	Y															
0	9	/	2	6	/	2	0	0	6															
2000.00																								
011																								

SUBTOTAL of Disbursements This Page (optional) ▶	<table border="1"> <tr> <td style="text-align: center;">4000.00</td> </tr> </table>	4000.00
4000.00		
TOTAL This Period (last page this line number only) ▶	<table border="1"> <tr> <td style="text-align: center;"> </td> </tr> </table>	