

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 checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Diane Gooch for Congress

A. Full Name (Last, First, Middle Initial) Charles Balsamo	Transaction ID: 00707.E106 Date of Disbursement																				
Mailing Address 233 Country Club Dr	<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>6</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	2		2	0	1	0												
City Manhasset State NY Zip Code 11030-3640	Amount of Each Disbursement this Period																				
Purpose of Disbursement Refund of Contribution Refund Candidate Name	<table border="1"> <tr> <td colspan="10">2400.00</td> </tr> </table>	2400.00																			
2400.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Anthony Belluzzi	Transaction ID: 00707.E107 Date of Disbursement																				
Mailing Address 225 Crestwood Ave	<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>6</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	2		2	0	1	0												
City Tuckahoe State NY Zip Code 10707-	Amount of Each Disbursement this Period																				
Purpose of Disbursement Refund of Contribution Refund Candidate Name	<table border="1"> <tr> <td colspan="10">2200.00</td> </tr> </table>	2200.00																			
2200.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Ana Blank	Transaction ID: 00707.E150 Date of Disbursement																				
Mailing Address 137 Avenue of Two Rivers	<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>6</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		3	0		2	0	1	0												
City Rumson State NJ Zip Code 07760-1808	Amount of Each Disbursement this Period																				
Purpose of Disbursement Refund of Contribution Refund Candidate Name	<table border="1"> <tr> <td colspan="10">2400.00</td> </tr> </table>	2400.00																			
2400.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

7000.00

TOTAL This Period (last page this line number only)