

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

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NAME OF COMMITTEE (In Full)  
**Lily for Congress**

Full Name (Last, First, Middle Initial)  
**A. Amnesty International**

Mailing Address  
**322 8th Avenue, New York, NY 10001**

City State Zip Code  
**Donation**

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) **donation**

State: District:

Date of Disbursement  
**08 / 08 / 2001**

Amount of Each Disbursement this Period  
**10000**

Category/Type  
**0 1 2**

Full Name (Last, First, Middle Initial)  
**B. Amnesty International**

Mailing Address  
**322 8th Avenue, New York NY 10001**

City State Zip Code  
**Donation**

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) **donation**

State: District:

Date of Disbursement  
**09 / 06 / 2001**

Amount of Each Disbursement this Period  
**5000**

Category/Type  
**0 1 2**

Full Name (Last, First, Middle Initial)  
**C. Democratic National Committee**

Mailing Address  
**P.O. Box 95685, Washington DC 20077**

City State Zip Code  
**Political Contribution**

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) **donation**

State: District:

Date of Disbursement  
**08 / 04 / 2001**

Amount of Each Disbursement this Period  
**25000**

Category/Type  
**0 1 1**

SUBTOTAL of Disbursements This Page (optional) **35000**

TOTAL This Period (last page this line number only) **35000**