

**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)

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<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)
UBS AMERICAS FUND FOR BETTER GOVERNMENT

Full Name (Last, First, Middle Initial)
A. CITIZENS FOR HOPE, RESPONSIBILITY INDEPENDENCE & SERVICE PAC

Mailing Address 607 14TH STREET NW SUITE 800

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
Contribution by check no. 1174

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General Other (specify) ▼

Category/Type

Transaction ID: SB23.10226
Date of Disbursement
12 / 19 / 2003

Amount of Each Disbursement this Period
5000.00

Full Name (Last, First, Middle Initial)
B. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE
2nd Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution by check no. 1168

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General Other (specify) ▼

Category/Type

Transaction ID: SB23.10231
Date of Disbursement
12 / 09 / 2003

Amount of Each Disbursement this Period
15000.00

Full Name (Last, First, Middle Initial)
C. DEMOCRATIC NATIONAL COMMITTEE

Mailing Address 430 SOUTH CAPITOL STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
Contribution by check no. 1177

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General Other (specify) ▼

Category/Type

Transaction ID: SB23.10223
Date of Disbursement
12 / 19 / 2003

Amount of Each Disbursement this Period
15000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **35000.00**

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