

**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 220 / 220

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" 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)  
Volunteer PAC

Full Name (Last, First, Middle Initial) <b>A. Mercedes Cecchi</b>		<b>Transaction ID: 60818.E7608</b> Date of Disbursement 08 / 18 / 2006
Mailing Address 1209 Aldebaran Dr.		Amount of Each Disbursement this Period 500.00
City McLean State VA Zip Code 22101-	Purpose of Disbursement Refund of Contribution Excessive contrib Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	010 Category/Type

Full Name (Last, First, Middle Initial) <b>B. Leonard Litwin</b>		<b>Transaction ID: 60914.E7784</b> Date of Disbursement 08 / 30 / 2006
Mailing Address 18 Broadlawn Ave.		Amount of Each Disbursement this Period 2500.00
City Great Neck State NY Zip Code 11024-1537	Purpose of Disbursement Refund of Contribution Refund of Excessi Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	010 Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3000.00
<b>TOTAL</b> This Period (last page this line number only) .....	3000.00