

**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 75 OF 79
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Charles A. Gonzalez Congressional Campaign**

Full Name (Last, First, Middle Initial) <b>A. Committee to Elect Jesus Gonzalez</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2011
Mailing Address 366 Central Ave		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : D298620</b>
City Brooklyn	State NY	
Zip Code 11221-4541	Purpose of Disbursement Non-Federal Contribution	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Daniel Maki Campaign</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2011
Mailing Address PO Box 22118		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : D298592</b>
City Santa Fe	State NM	
Zip Code 87502	Purpose of Disbursement Non-Federal Contribution	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2011
Mailing Address 430 South Capitol Street SE 2nd Floor		Amount of Each Disbursement this Period 15000.00 <b>Transaction ID : D298594</b>
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Unlimited transfer to national party	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	16500.00
<b>TOTAL</b> This Period (last page this line number only).....	