

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

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NAME OF COMMITTEE (In Full)
Peter Hoekstra for Congress

Full Name (Last, First, Middle Initial)
A. DeMint for Senate

Mailing Address 900 2nd St NE Ste 114

City Washington State DC Zip Code 20003-

Purpose of Disbursement
Donation to campaign

Candidate Name
JAMESW DEMINT

Office Sought: House
X Senate
President
State: SC District: D0

Disbursement For: 2004
X Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: D413200458E862
Date of Disbursement

03 / 15 / 2004

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

1000.00

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

1000.00