

**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 118 / 121
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Kay Bailey Hutchison for Senate Committee

Full Name (Last, First, Middle Initial) A. Mr. W. A. Moncrief, Jr.		Transaction ID: D4282 Date of Disbursement 07 30 2003	
Mailing Address Moncrief Building 950 Commerce St.		Amount of Each Disbursement this Period 2000.00	
City Fort Worth	State TX	Zip Code 76102-5418	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Refund of 7/22/03 excess contribution		Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Mr. Bill Sims		Transaction ID: D4226 Date of Disbursement 07 30 2003	
Mailing Address 4234 Shorecrest Dr.		Amount of Each Disbursement this Period 1000.00	
City Dallas	State TX	Zip Code 75209	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement 6/02/03 excess contribution refund		Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Mr. Bill Sims		Transaction ID: D4280 Date of Disbursement 07 30 2003	
Mailing Address 4234 Shorecrest Dr.		Amount of Each Disbursement this Period 1000.00	
City Dallas	State TX	Zip Code 75209	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement 8/02/03 excess contribution refund		Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	4000.00
TOTAL This Period (last page this line number only)	