

**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 108 / 109

<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)
Jim Ryun for Congress

Full Name (Last, First, Middle Initial) A. Birthright		Transaction ID: 60110.E3746 Date of Disbursement 11 / 07 / 2005
Mailing Address PO Box 1323		Amount of Each Disbursement this Period 2250.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Lawrence	State KS	
Zip Code 66044-		
Purpose of Disbursement DISGORGEMENT OF FUNDS		
Candidate Name		Category/ Type
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. Crisis Pregnancy Outreach		Transaction ID: 60110.E3745 Date of Disbursement 11 / 07 / 2005
Mailing Address 2041 SW McAllister		Amount of Each Disbursement this Period 2250.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Topeka	State KS	
Zip Code 66604-		
Purpose of Disbursement DISGORGEMENT OF FUNDS		
Candidate Name		Category/ Type
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. Natl Republican Congressional Comm.		Transaction ID: 60110.E3840 Date of Disbursement 12 / 08 / 2005
Mailing Address 320 First Street, SE		Amount of Each Disbursement this Period 5000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Washington	State DC	
Zip Code 20003-		
Purpose of Disbursement NRCC CONTRIBUTION		
Candidate Name		Category/ Type
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:	

SUBTOTAL of Disbursements This Page (optional) ▶	9500.00
TOTAL This Period (last page this line number only) ▶