

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c
<input type="checkbox"/> 29				

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NAME OF COMMITTEE (In Full)
R DUFFY WALL & ASSOCIATES INC POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. FRIENDS OF JIM INHOFE

Date of Disbursement

M	D	Y	M	Y
04	30	2001		

Mailing Address
PO BOX 13300
City
OKLAHOMA CITY
State
OK
Zip Code
73113

Amount of Each Disbursement this Period

50.00

Purpose of Disbursement
In-Kind Contrib: FR Svcs
Candidate Name
JAMES M INHOFE

Category/ Type

[MEMO ITEM]

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)
State: OK District: 00

Transaction ID: SB23.5302.0

Full Name (Last, First, Middle Initial)
B. GORDON SMITH FOR US SENATE 2002 INC

Date of Disbursement

M	D	Y	M	Y
04	30	2001		

Mailing Address
228 S WASHINGTON ST SUITE 200
City
ALEXANDRIA
State
VA
Zip Code
22314

Amount of Each Disbursement this Period

50.00

Purpose of Disbursement
In-Kind Contrib: FR Svcs
Candidate Name
GORDON HAROLD SMITH

Category/ Type

[MEMO ITEM]

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)
State: OR District: 00

Transaction ID: SB23.5302.1

Full Name (Last, First, Middle Initial)
C. FRIENDS OF JIM SAXTON

Date of Disbursement

M	D	Y	M	Y
04	30	2001		

Mailing Address
P O BOX 785
City
MT HOLLY
State
NJ
Zip Code
08060

Amount of Each Disbursement this Period

50.00

Purpose of Disbursement
In-Kind Contrib: FR Svcs
Candidate Name
H JAMES SAXTON

Category/ Type

[MEMO ITEM]

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)
State: NJ District: 00

Transaction ID: SB23.5302.2

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)