

**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)

<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)
Friends of Bennie Thompson

A.	Full Name (Last, First, Middle Initial) Kendrick Meek for Florida	Transaction ID: 90401.E7315 Date of Disbursement 03 / 27 / 2009
	Mailing Address 111 NW 183rd St., Suite 325	Amount of Each Disbursement this Period 2300.00
	City Miami State FL Zip Code 33169-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement CAMPAIGN CONTRIBUTION Candidate Name KENDRICK B MEEK Category/Type	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 00 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Kendrick Meek for Florida	Transaction ID: 90401.E7310 Date of Disbursement 03 / 27 / 2009
	Mailing Address 111 NW 183rd St., Suite 325	Amount of Each Disbursement this Period 4800.00
	City Miami State FL Zip Code 33169-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement CAMPAIGN CONTRIBUTION Candidate Name KENDRICK B MEEK Category/Type	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 00 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Kendrick Meek for Florida	Transaction ID: 90401.E7316 Date of Disbursement 03 / 27 / 2009
	Mailing Address 111 NW 183rd St., Suite 325	Amount of Each Disbursement this Period 2300.00
	City Miami State FL Zip Code 33169-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement CAMPAIGN CONTRIBUTION Candidate Name KENDRICK B MEEK Category/Type	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 00 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	9400.00
TOTAL This Period (last page this line number only)	