

**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)  
Martin Olav Sabo for Congress Volunteer Committee

**A.** Full Name (Last, First, Middle Initial)  
Tim Walz for U.S. Congress

Mailing Address P.O. Box 938

City Mankato State MN Zip Code 56002

Purpose of Disbursement  
Contribution MN01

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

**Transaction ID:** D8308  
**Date of Disbursement**  
06 / 30 / 2007

**Amount of Each Disbursement this Period**  
2000.00

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

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

2000.00

**TOTAL** This Period (last page this line number only) ..... ►

2000.00