

**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 28 / 28

<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)  
 Peter Hoekstra for Congress

A. Full Name (Last, First, Middle Initial)  
 Myrah Kirkwood for Congress

Transaction ID: 1007200350E764  
 Date of Disbursement

09 / 23 / 2003

Mailing Address PO Box 60

City Flint State MI Zip Code 48501-0060

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement  
 Contribution to Kirkwood

011  
 Category/  
 Type

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

Candidate Name  
 MYRAHLYNN KIRKWOOD

Office Sought:  House  
 Senate  
 President  
 State: MI District: D5

Disbursement For: 2004  
 Primary  General  
 Other (specify) ▼  
 P-2004

SUBTOTAL of Disbursements This Page (optional) .....	▶	1000.00
TOTAL This Period (last page this line number only) .....	▶	1000.00