

**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)						PAGE	OF
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 20a	<input checked="" type="checkbox"/> 23 20b	<input type="checkbox"/> 24 20c	<input type="checkbox"/> 25 20	<input type="checkbox"/> 26 20b		

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NAME OF COMMITTEE (In Full)
RUNAWAY FOR CHANGE

A.

Full Name (Last, First, Middle Initial): **DEMOCRATIC NATIONAL COMMITTEE**

Mailing Address: **430 S. CAPITOL ST, SE**

City: **WASHINGTON** State: **DC** Zip Code: **20003**

Purpose of Disbursement: **Contribution**

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: **03 22 2004**

Amount of Each Disbursement This Period: **500.00**

Category/Type: **011**

B.

Full Name (Last, First, Middle Initial): _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Purpose of Disbursement: _____

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: _____

Amount of Each Disbursement This Period: _____

Category/Type: _____

C.

Full Name (Last, First, Middle Initial): _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Purpose of Disbursement: _____

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: _____

Amount of Each Disbursement This Period: _____

Category/Type: _____

SUBTOTAL of Disbursements This Page (optional): _____

TOTAL This Period (last page this line number only): _____

500.00