

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 checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
 Michaud for Congress

Full Name (Last, First, Middle Initial)

A. Holiday Inn Regency

Mailing Address Eden Street

City Bar Harbor State ME Zip Code 04609

Purpose of Disbursement
 Lodging

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

002
 Category/
 Type

Transaction ID: D1394

Date of Disbursement

08 / 21 / 2003

Amount of Each Disbursement this Period

416.23

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

Full Name (Last, First, Middle Initial)

B. Internal Revenue Service

Mailing Address 310 Lowell St

City Andover State MA Zip Code 05501

Purpose of Disbursement
 Federal Withholding Tax

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

Category/
 Type

Transaction ID: D1435

Date of Disbursement

08 / 02 / 2003

Amount of Each Disbursement this Period

237.33

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

Full Name (Last, First, Middle Initial)

C. Maine Democratic Party

Mailing Address 12 Spruce Street

City Augusta State ME Zip Code 04330

Purpose of Disbursement
 Contribution

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

Category/
 Type

Transaction ID: D1382

Date of Disbursement

08 / 03 / 2003

Amount of Each Disbursement this Period

1000.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

1653.56

TOTAL This Period (last page this line number only) ▶