

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)
Committee to Re-Elect Ron Paul

A.	Full Name (Last, First, Middle Initial) Ron Paul	Transaction ID: 0620942 Date of Disbursement 03 / 03 / 2008
	Mailing Address 2422 Bluewater Hwy	Amount of Each Disbursement this Period 500.00
	City Surfside State TX Zip Code 77541	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Reimbursement Expenses Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type
		ITEMIZATION BELOW

B.	Full Name (Last, First, Middle Initial) S.I.D.S.	Transaction ID: 0620942-001 Date of Disbursement 03 / 03 / 2008
	Mailing Address 100 Medical Dr	Amount of Each Disbursement this Period 500.00
	City Lake Jackson State TX Zip Code 77566	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Event Table Reservation Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		003 Category/Type
		[MEMO ITEM] MEMO

C.	Full Name (Last, First, Middle Initial) Valori Pyeatt	Transaction ID: 0620912 Date of Disbursement 03 / 10 / 2008
	Mailing Address 504 Brazoria Rd	Amount of Each Disbursement this Period 950.00
	City Lake Jackson State TX Zip Code 77566	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Reimbursement Expenses Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type
		ITEMIZATION BELOW

SUBTOTAL of Disbursements This Page (optional)	▶	1450.00
TOTAL This Period (last page this line number only)	▶	