

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Doing Our Nation's Service Political Action Committee

Full Name (Last, First, Middle Initial)
A. FRIENDS OF MELISSA BROWN

Mailing Address PO BOX 498

City FLOURTOWN State PA Zip Code 19031

Purpose of Disbursement
campaign contribution

Candidate Name
FRIENDS OF MELISSA BROWN

Office Sought: House
Senate
President

State: PA District: 13

Disbursement For: 2004
Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.4736
Date of Disbursement

06 / 22 / 2004

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)
B. GEOFF DAVIS FOR CONGRESS

Mailing Address 3161 Dixie Highway
Suite F

City Erlanger State KY Zip Code 41018

Purpose of Disbursement
campaign contribution

Candidate Name
GEOFF DAVIS FOR CONGRESS

Office Sought: House
Senate
President

State: KY District: 04

Disbursement For: 2004
Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.4741
Date of Disbursement

06 / 22 / 2004

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)
C. HAMEL FOR CONGRESS

Mailing Address PO BOX 270

City PRESQUE ISLE State ME Zip Code 04789

Purpose of Disbursement
campaign contribution

Candidate Name
HAMEL FOR CONGRESS

Office Sought: House
Senate
President

State: ME District: 02

Disbursement For: 2004
 Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.4726
Date of Disbursement

05 / 20 / 2004

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

7000.00

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