

**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 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21
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NAME OF COMMITTEE (in full)  
John Breaux Committee

**A. FRIENDS OF CHRIS DODD 2004**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 270701

City WEST HARTFORD State CT Zip Code 06127

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: CT District: 00

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB21.10623  
Date of Disbursement  
12 / 04 / 2006

Amount of Each Disbursement this Period  
1100.00

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

**B. Friends of New Orleans**

Full Name (Last, First, Middle Initial)  
Mailing Address 402 North Fourth Street

City Baton Rouge State LA Zip Code 70802

Purpose of Disbursement  
Charitable Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB21.10624  
Date of Disbursement  
12 / 12 / 2006

Amount of Each Disbursement this Period  
2000.00

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

**C. MENENDEZ FOR SENATE**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 848

City Union City State NJ Zip Code 07067

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: NJ District: 13

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB21.10813  
Date of Disbursement  
10 / 11 / 2008

Amount of Each Disbursement this Period  
3700.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

6800.00

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

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