

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)
 Menendez for Congress

Full Name (Last, First, Middle Initial)
 A. Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol Street, S.E.

City Washington State DC Zip Code 20003

Purpose of Disbursement
 Unlimited Transfer - Nat'l Party Cmte.

Candidate Name

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

State: District

Category/
 Type

Transaction ID: D7616
 Date of Disbursement

10 / 07 / 2004

Amount of Each Disbursement this Period

100000.00

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

SUBTOTAL of Disbursements This Page (optional) ▶ 100000.00

TOTAL This Period (last page this line number only) ▶ 100000.00