

# 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)  
National Funeral Directors Association of the United States Inc

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF JOHN TANNER</b>		<b>Transaction ID: SB23.4316</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 5	
Mailing Address Post Office Box 1994 Post Office Box 1994		Amount of Each Disbursement this Period 1000.00	
City Union City State Zip Code TN 38281	Purpose of Disbursement Category/Type		
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:			

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		<b>Transaction ID: SB23.4318</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 5	
Mailing Address 607 14TH STREET NW SUITE 800		Amount of Each Disbursement this Period 2000.00	
City WASHINGTON State Zip Code DC 20005	Purpose of Disbursement Category/Type		
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:			

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF SENATOR ROCKEFELLER</b>		<b>Transaction ID: SB23.4320</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5	
Mailing Address PO BOX 1909		Amount of Each Disbursement this Period 1000.00	
City CHARLESTON State Zip Code WV 25327	Purpose of Disbursement Category/Type		
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....