

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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 checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Cowan For US Senate

Full Name (Last, First, Middle Initial)

A. Christina Lee Brown

Mailing Address 8501 Longview Lane

City	State	Zip Code
Louisville	KY	40222

Purpose of Disbursement
Refund

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Transaction ID: D183

Date of Disbursement

MM	DD	YY
01	28	2004

Amount of Each Disbursement this Period

720.00

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

Full Name (Last, First, Middle Initial)

B. O. Grant Bruton

Mailing Address 25th Floor
Brown & Williamson Tower

City	State	Zip Code
Louisville	KY	40202

Purpose of Disbursement
Refund

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Transaction ID: D186

Date of Disbursement

MM	DD	YY
01	28	2004

Amount of Each Disbursement this Period

380.00

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

Full Name (Last, First, Middle Initial)

C. Julia B. Bryant

Mailing Address 3803 Basswood Lane

City	State	Zip Code
Louisville	KY	40207

Purpose of Disbursement
Refund

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Transaction ID: D189

Date of Disbursement

MM	DD	YY
01	28	2004

Amount of Each Disbursement this Period

270.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

1350.00

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