

# 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)

<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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Forest Landowners Association, Inc., Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Chip Pickering for Congress</b>		<b>Transaction ID:</b> SB23.5742 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6
Mailing Address PO Box 4297		Amount of Each Disbursement this Period 1000.00
City Brandon	State MS	
Zip Code 39047		
Purpose of Disbursement		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MS District:		

Full Name (Last, First, Middle Initial) <b>B. Congressman Bennie G. Thompson</b>		<b>Transaction ID:</b> SB23.5740 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6
Mailing Address PO Box 100		Amount of Each Disbursement this Period 1000.00
City Bolton	State MS	
Zip Code 39041		
Purpose of Disbursement		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MS District:		

Full Name (Last, First, Middle Initial) <b>C. Congressman Bobby Jindal</b>		<b>Transaction ID:</b> SB23.5721 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 2 / 2 0 0 6
Mailing Address 3525 North Casueway Blvd		Amount of Each Disbursement this Period 300.00
City Suite 1020	State LA	
Zip Code 70002		
Purpose of Disbursement		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: LA District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	