

# 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

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NAME OF COMMITTEE (In Full)  
Fluor Corporation Political Action Committee (Fluor PAC)

Full Name (Last, First, Middle Initial) <b>A. People For Enterprise Trade And Economic Growth</b>		<b>Transaction ID:</b> 20562172 Date of Disbursement
Mailing Address 7804 Evening Lane		<input type="text" value="06"/> / <input type="text" value="25"/> / <input type="text" value="2007"/>
City Alexandria	State VA	Zip Code 22306
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period <input type="text" value="5000.00"/>
Candidate Name		<input type="text" value="011"/> 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: District:	Contribution	

Full Name (Last, First, Middle Initial) <b>B. Rangel For Congress</b>		<b>Transaction ID:</b> 20562311 Date of Disbursement
Mailing Address 2030 ALLEN PLACE NW		<input type="text" value="06"/> / <input type="text" value="25"/> / <input type="text" value="2007"/>
City Washington	State DC	Zip Code 20009
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
Candidate Name Rep. Charles Rangel		<input type="text" value="011"/> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY District: 15	Contribution	

Full Name (Last, First, Middle Initial) <b>C. Schiff For Congress</b>		<b>Transaction ID:</b> 20562524 Date of Disbursement
Mailing Address 777 S. Figueroa St. Suite 4050		<input type="text" value="06"/> / <input type="text" value="25"/> / <input type="text" value="2007"/>
City Los Angeles	State CA	Zip Code 90017
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
Candidate Name Rep. Adam Schiff		<input type="text" value="011"/> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA District: 29	Contribution	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="7000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>