

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)			
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
John Evans for Senate Committee -

A.

Full Name (Last, First, Middle Initial) *D N C*

Date of Disbursement: *09 / 30 / 2004*

Mailing Address: *430 S. Capitol St SE - PO Box 96585*

City: *Washington DC* State: *DC* Zip Code: *20077-7242*

Purpose of Disbursement: *Political Contribution*

Candidate Name: *John Kerry*

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: _____ District: _____

Amount of Each Disbursement this Period: *1,000.00*

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

B.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: _____ District: _____

Amount of Each Disbursement this Period

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

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: _____ District: _____

Amount of Each Disbursement this Period

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

SUBTOTAL of Disbursements This Page (optional) *1,000.00*

TOTAL This Period (last page this line number only) *1,250.00*