

**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)

PAGE 32 / 32

<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)
Baxter Healthcare Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends of Clay Shaw

Mailing Address 4451 Brookfield Corporate Dr

City Chantilly State VA Zip Code 20151-1893

Purpose of Disbursement

Candidate Name
CLAY SHAW

Category/
Type

Office Sought: House
Senate
President
State: FL District: 22

Disbursement For: 2006
 Primary General
Other (specify) ▼

Transaction ID: 50419.E841

Date of Disbursement

03 / 15 / 2005

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

1000.00

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

13000.00