

**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)

NEW YORK STATE NARAL INC WOMEN'S HEALTH POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. FRIENDS OF HILLARY

Mailing Address 1717 K STREET NW SUITE 309A

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement Contribution

Candidate Name FRIENDS OF HILLARY

Category/Type

Office Sought: House Senate President

Disbursement For: 2006 Primary General Other (specify) ▼

State: NY District: 00

Transaction ID: SB23.4100

Date of Disbursement

MM / DD / YYYY
02 / 24 / 2006

Amount of Each Disbursement this Period

1900.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF HILLARY

Mailing Address 1717 K STREET NW SUITE 309A

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement Contribution

Candidate Name FRIENDS OF HILLARY

Category/Type

Office Sought: House Senate President

Disbursement For: 2006 Primary General Other (specify) ▼

State: NY District: 00

Transaction ID: SB23.4102

Date of Disbursement

MM / DD / YYYY
02 / 24 / 2006

Amount of Each Disbursement this Period

100.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

2000.00