

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)

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

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NAME OF COMMITTEE (In Full)
 Friends of Lois Capps

Full Name (Last, First, Middle Initial)
 A. THOMAS FOR CONGRESS

Transaction ID: SB21.24539
 Date of Disbursement

Mailing Address PO Box 16544

09 / 21 / 2004

City Golden State CO Zip Code 80402

Amount of Each Disbursement this Period

Purpose of Disbursement
 Contribution

1000.00

Candidate Name

Category/
 Type

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

Office Sought: House
 Senate
 President

Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: CO District: D7

SUBTOTAL of Disbursements This Page (optional) ▶

1000.00

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

38000.00