

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)
Drive - Democrat, Republican, Independent Voter Education

A.

Full Name (Last, First, Middle Initial)
New Jersey First

Mailing Address Riverfront Plaza Station, P.O. Box

City Newark State NJ Zip Code 07102

Purpose of Disbursement

CONTRIBUTION

Candidate Name
New Jersey First

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 16631147
Date of Disbursement

09 / 19 / 2008

Amount of Each Disbursement this Period

2500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
Friends Of Glenn Nye

Mailing Address P.O. Box 68444

City Virginia Beach State VA Zip Code 23471

Purpose of Disbursement
GENERAL 2008

Candidate Name
Mr. Glenn Nye

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: VA District: 02

Transaction ID: 16631148
Date of Disbursement

09 / 19 / 2008

Amount of Each Disbursement this Period

5000.00

GENERAL 2008

C.

Full Name (Last, First, Middle Initial)
Progressive Voters Of America

Mailing Address P.O. Box 852

City Burlington State VT Zip Code 05402

Purpose of Disbursement
CONTRIBUTION

Candidate Name
Progressive Voters Of America

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 16679446
Date of Disbursement

09 / 19 / 2008

Amount of Each Disbursement this Period

2500.00

CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional) ▶

10000.00

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