

**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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17 18 19a 19b
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NAME OF COMMITTEE (In Full)

Friends of Senator Nickles

Full Name (Last, First, Middle Initial)

A. Georgians for Tsakson

Mailing Address: Wood Lake Forrest Drive, #108

City: Atlanta State: GA Zip Code: 30328

Purpose of Disbursement

Contribution

Candidate Name: Don Nickles

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: District:

OLI

Category/Type

Date of Disbursement

04/04/2004

Amount of Each Disbursement this Period

1000.00

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

B. David Vitter for U.S. Senate

Mailing Address: P.O. Box 8175

City: Metairie State: LA Zip Code: 70011

Purpose of Disbursement

Contribution

Candidate Name: Don Nickles

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: District:

OLI

Category/Type

Date of Disbursement

06/06/2004

Amount of Each Disbursement this Period

1000.00

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

C. Nethercutt for Senate 2004

Mailing Address: 530 - 112th Ave. NE, Suite 101

City: Bellevue State: WA Zip Code: 98004

Purpose of Disbursement

Contribution

Candidate Name: Don Nickles

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: District:

OLI

Category/Type

Date of Disbursement

12/12/2004

Amount of Each Disbursement this Period

1000.00

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

SUBTOTAL of Disbursements This Page (optional) _____

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

3000.00