

**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)

PAGE 125 / 127

<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)
Price for Congress Committee

A. Full Name (Last, First, Middle Initial)
Barbieri for Congress

Mailing Address 201-370 W North River Drive

City Spokane State WA Zip Code 99201

Purpose of Disbursement
2004 WA-H-05-Primary

Candidate Name
Don Barbieri

Office Sought: House Senate President
State: WA District: D5

Disbursement For: 2004
 Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: D10758
Date of Disbursement
03 / 23 / 2004

Amount of Each Disbursement this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Herseth for Congress

Mailing Address PO Box 884

City Brookings State SD Zip Code 57006

Purpose of Disbursement
2004 SD-H-Primary

Candidate Name
Stephanie Herseth

Office Sought: House Senate President
State: SD District:

Disbursement For: 2004
 Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: D10742
Date of Disbursement
02 / 27 / 2004

Amount of Each Disbursement this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Lampson for Congress

Mailing Address PO Box 21578

City Beaumont State TX Zip Code 77720

Purpose of Disbursement
2004 TX-H-09-Primary

Candidate Name
Nick Lampson

Office Sought: House Senate President
State: TX District: 09

Disbursement For: 2004
 Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: D10722
Date of Disbursement
02 / 09 / 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) ▶ **3000.00**

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