

**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)

PAGE 27 / 56

<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)  
American Federation of Teachers, AFL-CIO Committee on Political Education

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF FARR**

Mailing Address 555 CAPITOL MALL SUITE 1425

City SACRAMENTO State CA Zip Code 95814

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought:  House  
Senate  
President  
State: CA District: 17

Disbursement For: 2004  
Primary  General  
Other (specify) ▼

Category/  
Type

Transaction ID: SB23.7643

Date of Disbursement

02 / 27 / 2004

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF FRANK BARBARO**

Mailing Address 1806 WEST 10TH STREET

City BROOKLYN State NY Zip Code 11223

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought:  House  
Senate  
President  
State: NY District: 13

Disbursement For: 2004  
 Primary General  
Other (specify) ▼

Category/  
Type

Transaction ID: SB23.7645

Date of Disbursement

03 / 24 / 2004

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF JIM CLYBURN**

Mailing Address PO Box 12587

City Columbia State SC Zip Code 29211

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought:  House  
Senate  
President  
State: SC District: 06

Disbursement For: 2004  
 Primary General  
Other (specify) ▼

Category/  
Type

Transaction ID: SB23.7646

Date of Disbursement

03 / 24 / 2004

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) ▶

**7000.00**

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