

# 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)

<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)  
Rangel for Congress

A.

Full Name (Last, First, Middle Initial)  
RUBEN HINOJOSA FOR CONGRESS

Mailing Address 502 North 11th Street

City State Zip Code  
McAllen TX 78501

Purpose of Disbursement  
Contribution

Candidate Name  
Ruben Hinojosa

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: TX District: 15

Transaction ID: D14333  
Date of Disbursement

03 / 25 / 2008

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)  
SANFORD D. BISHOP JR. FOR CONGRESS

Mailing Address P. O. Box 909

City State Zip Code  
Columbus GA 31902

Purpose of Disbursement  
Contribution

Candidate Name  
Sanford Bishop

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: GA District: 02

Transaction ID: D14334  
Date of Disbursement

03 / 28 / 2008

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)  
SCHAUER FOR CONGRESS

Mailing Address PO BOX 100

City State Zip Code  
BATTLE CREEK MI 49016

Purpose of Disbursement  
Contribution

Candidate Name  
Mark Schauer

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: MI District: 07

Transaction ID: D14536  
Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

2000.00

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

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

4000.00

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