

**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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<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)  
Cantor For Congress

Full Name (Last, First, Middle Initial)  
A. Pearce For Congress

Mailing Address P. O. Box 2896

City Hobbs State NM Zip Code 88241-

Purpose of Disbursement  
Contribution

Candidate Name  
STEVE PEARCE

Office Sought:  House  
Senate  
President

State: NM District: D2

Disbursement For: 2004  
Primary  General   
Other (specify) ▼

011  
Category/  
Type

Transaction ID: D401200432E1976  
Date of Disbursement

03 / 19 / 2004

Amount of Each Disbursement this Period

1000.00

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

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

Mailing Address 5851 W. Charleston Blvd.

City Las Vegas State NV Zip Code 89146-

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:  House  
Senate  
President

State: District

Disbursement For: 2004  
Primary  General   
Other (specify) ▼

011  
Category/  
Type

Transaction ID: D401200432E2012  
Date of Disbursement

03 / 31 / 2004

Amount of Each Disbursement this Period

1000.00

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

Full Name (Last, First, Middle Initial)  
C. Renzi For Congress

Mailing Address P. O. Box 219

City Flagstaff State AZ Zip Code 86002-

Purpose of Disbursement  
Contribution

Candidate Name  
RICHARDGEORGE RENZI

Office Sought:  House  
Senate  
President

State: AZ District: D1

Disbursement For: 2004  
Primary  General   
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 0318200445E1912  
Date of Disbursement

02 / 10 / 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) ▶