

**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)

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<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				

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NAME OF COMMITTEE (In Full)
CBC/PAC of Clark/Bardes Consulting

Full Name (Last, First, Middle Initial) A. JOHNSON FOR CONGRESS COMMITTEE		Date of Disbursement 10 / 11 / 2002
Mailing Address P.O. Box 1986 City New Britain State CT Zip Code 08050		Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement October 02 distribution		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4368
State: CT District: 05		

Full Name (Last, First, Middle Initial) B. LINDSEY GRAHAM FOR SENATE		Date of Disbursement 10 / 05 / 2002
Mailing Address PO BOX 1155 City SENECA State SC Zip Code 29679		Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement October 2002 distribution		Category/ Type
Candidate Name		
Office Sought: House <input checked="" type="checkbox"/> Senate President	Disbursement For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4190
State: SC District: 00		

Full Name (Last, First, Middle Initial) C. RELY ON YOUR BELIEFS FUND		Date of Disbursement 10 / 11 / 2002
Mailing Address 1736 East Sunshine Suite 913 City Springfield State MO Zip Code 65804		Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement October 02 distribution		Category/ Type
Candidate Name		
Office Sought: House Senate President	Disbursement For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4370
State: District:		

SUBTOTAL of Disbursements This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	