

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

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FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

Holnam Inc. PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Larry Craig for U.S. Senate P.O. Box 2754 Boise, ID 83702	contribution ID-senate Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/20	\$1,000
B. Full Name, Mailing Address and ZIP Code Stupak for Congress P.O. Box 143 Menominee, MI 49858	contribution MI-01 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/25	\$500
C. Full Name, Mailing Address and ZIP Code Friends of Ray LaHood 3311 N. Sterling Avenue Suite 10 Peoria, IL 61604-1837	contribution IL-18 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/25	\$500
D. Full Name, Mailing Address and ZIP Code Lincoln Chafee for U.S. Senate 1800 Post Road Warwick, RI 02886	contribution RI-senate Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/1	\$500
E. Full Name, Mailing Address and ZIP Code Friends of Jim Oberstar Box 2684 Washington, DC 20013	contribution MN-8 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/29	\$500
F. Full Name, Mailing Address and ZIP Code Lazio 2000 1212 New York Avenue, NW Suite 350 Washington, DC 20005	contribution NY-senate Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/29	\$2,500
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

\$5,500

TOTAL This Period (last page this line number only)