

**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)  
Mike Ross for Congress Committee

Full Name (Last, First, Middle Initial)  
A. GALLAGHER FOR CONGRESS

Mailing Address 6100 ELTON AVENUE SUITE 1000

City LAS VEGAS State NV Zip Code 89107

Purpose of Disbursement  
Contribution

Candidate Name  
Tom Gallagher

Office Sought:  House  
Senate  
President  
State: NV District: D3

Disbursement For: 2004  
Primary  General  
Other (specify) ▼

Category/  
Type

Transaction ID: D3526  
Date of Disbursement

09 / 30 / 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. JIM SULLIVAN FOR CONGRESS

Mailing Address PO Box 784

City Norwich State CT Zip Code 06360

Purpose of Disbursement  
Contribution

Candidate Name  
James Sullivan

Office Sought:  House  
Senate  
President  
State: CT District: D2

Disbursement For: 2004  
Primary  General  
Other (specify) ▼

Category/  
Type

Transaction ID: D3533  
Date of Disbursement

09 / 08 / 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. JOHN SALAZAR FOR CONGRESS

Mailing Address P.O. Box 534

City Pueblo State CO Zip Code 81002

Purpose of Disbursement  
Contribution

Candidate Name  
John Salazar

Office Sought:  House  
Senate  
President  
State: CO District: D3

Disbursement For: 2004  
 Primary General  
Other (specify) ▼

Category/  
Type

Transaction ID: D3431  
Date of Disbursement

07 / 21 / 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) ▶