

**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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
SRA INTERNATIONAL INC FUND FOR BETTER IT IN GOVERNMENT

Full Name (Last, First, Middle Initial)
A. CONGRESSMAN BILL YOUNG CAMPAIGN COMMIT

Mailing Address P. O. Box 47025

City St. Petersburg State FL Zip Code 33743

Purpose of Disbursement Contribution

Candidate Name CONGRESSMAN BILL YOUNG CAMPAIGN COMMIT

Office Sought: House Senate President

Disbursement For: 2004
 Primary General Other (specify) ▼

State: FL District: 10

Transaction ID: SB23.4297
Date of Disbursement
09 / 29 / 2004

Amount of Each Disbursement this Period
1500.00

011
Category/
Type

Full Name (Last, First, Middle Initial)
B. FRIENDS OF RAY LAHOOD

Mailing Address 4238 N Knoxville Ave
4238 N Knoxville Ave

City Peoria State IL Zip Code 61614

Purpose of Disbursement Contribution

Candidate Name FRIENDS OF RAY LAHOOD

Office Sought: House Senate President

Disbursement For: 2004
 Primary General Other (specify) ▼

State: IL District: 18

Transaction ID: SB23.4298
Date of Disbursement
09 / 07 / 2004

Amount of Each Disbursement this Period
2000.00

011
Category/
Type

Full Name (Last, First, Middle Initial)
C. JO ANN DAVIS FOR CONGRESS

Mailing Address POST OFFICE BOX 1B34

City YORKTOWN State VA Zip Code 23092

Purpose of Disbursement Contribution

Candidate Name JO ANN DAVIS FOR CONGRESS

Office Sought: House Senate President

Disbursement For: 2004
 Primary General Other (specify) ▼

State: VA District: 01

Transaction ID: SB23.4285
Date of Disbursement
09 / 22 / 2004

Amount of Each Disbursement this Period
1000.00

011
Category/
Type

SUBTOTAL of Disbursements This Page (optional) ▶ **4500.00**

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