

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)
FRELINGHUYSEN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Roulstone For Congress-H-WA-02		Transaction ID: 51207.E4681 Date of Disbursement 11 / 07 / 2005
Mailing Address P.O. Box 45		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Snohomish State WA Zip Code 98291-	<input type="checkbox"/> Category/Type	
Purpose of Disbursement CONTRIBUTION Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Comm to Elect Thunell Grillone and Giord		Transaction ID: 51207.E4668 Date of Disbursement 11 / 01 / 2005
Mailing Address C/O Mr. Hector Grillone 25 Crimson Lane		Amount of Each Disbursement this Period 350.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Mine Hill State NJ Zip Code 07803-2444	<input type="checkbox"/> Category/Type	
Purpose of Disbursement CONTRIBUTION Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Crater & Harris for Committee		Transaction ID: 51018.E4620 Date of Disbursement 10 / 03 / 2005
Mailing Address C/O Hon. Patti Page 17 John Street		Amount of Each Disbursement this Period 300.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Chatham State NJ Zip Code 07928-2208	<input type="checkbox"/> Category/Type	
Purpose of Disbursement CONTRIBUTION Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	1650.00
TOTAL This Period (last page this line number only) ▶	_____