

# 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)

|                              |                              |                              |  |
|------------------------------|------------------------------|------------------------------|--|
| <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 |

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Christopher Shays for Congress Committee

A.

Full Name (Last, First, Middle Initial)  
Ogonowski for Congress

Transaction ID: 71011.E7249  
Date of Disbursement

Mailing Address Post Office Box 505

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 1 |   | 2 | 0 | 0 | 7 |

City State Zip Code  
Dracut MA 01826-

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Purpose of Disbursement  
CANDIDATE CONTRIBUTION

|  |
|--|
|  |
|--|

Candidate Name  
JAMES OGONOWSKI

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: MA District: 05

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)  
Paychex

Transaction ID: 90116.E8762  
Date of Disbursement

Mailing Address 55 Capital Blvd., Suite 302

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 5 |   | 2 | 0 | 0 | 7 |

City State Zip Code  
Rocky Hill CT 06067-

Amount of Each Disbursement this Period

|         |
|---------|
| 2476.71 |
|---------|

Purpose of Disbursement  
UNAUTHORIZED

|  |
|--|
|  |
|--|

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)  
Michael Sohn

Transaction ID: 90116.E8810  
Date of Disbursement

Mailing Address 2635 Post Road

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 1 | 2 |   | 2 | 0 | 0 | 7 |

City State Zip Code  
Southport CT 06890-

Amount of Each Disbursement this Period

|         |
|---------|
| 2998.55 |
|---------|

Purpose of Disbursement  
UNAUTHORIZED

|  |
|--|
|  |
|--|

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

|         |
|---------|
| 6475.26 |
|---------|

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

|  |
|--|
|  |
|--|