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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)
INDEPENDENT INSURANCE AGENTS OF AMERICA POLITICAL ACTION COMMITTEE (INSURPAC)

A.
Full Name (Last, First, Middle Initial): MIKE CRAPO FOR US SENATE
Mailing Address: PO BOX 1948
City: BOISE State: ID Zip Code: 83701
Purpose of Disbursement: Contribution/2004 Pr
Candidate Name: Crapo For US Senate
Category/Type: 007
Office Sought: House / X Senate / President
State: ID District: 00
Disbursement For: 2004 X Primary General Other (specify)
Transaction ID: SB23.8974
Date of Disbursement: 06 / 23 / 2003
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial): MIKE ROSS FOR CONGRESS COMMITTEE
Mailing Address: PO BOX 360
City: PRESCOTT State: AR Zip Code: 71857
Purpose of Disbursement: Contribution/2004 Pr
Candidate Name: Mike Ross for Congress
Category/Type: 007
Office Sought: X House / Senate / President
State: AR District: 4
Disbursement For: 2004 X Primary General Other (specify)
Transaction ID: SB23.9022
Date of Disbursement: 06 / 23 / 2003
Amount of Each Disbursement this Period: 2000.00

C.
Full Name (Last, First, Middle Initial): MIKE THOMPSON FOR CONGRESS
Mailing Address: 5435 MADISON AVENUE
City: SACRAMENTO State: CA Zip Code: 95841
Purpose of Disbursement: Contribution/2004 Pr
Candidate Name: Thompson for Congress
Category/Type: 007
Office Sought: X House / Senate / President
State: CA District: 01
Disbursement For: 2004 X Primary General Other (specify)
Transaction ID: SB23.9049
Date of Disbursement: 06 / 23 / 2003
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **4000.00**

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