

**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 checked="" 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 type="checkbox"/>	21

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

Full Name (Last, First, Middle Initial) A. Oxley For Congress		Transaction ID: 60406.C36654IK Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2006	
Mailing Address PO Box 2004		Amount of Each Disbursement this Period 981.10	
City Findlay State OH Zip Code 45839-	Purpose of Disbursement FOOD AND BEVERAGE	Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	IN KIND: FOOD AND BEVERAGE		

Full Name (Last, First, Middle Initial) B. Paul Pimentel		Transaction ID: 60411.E6106 Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2006	
Mailing Address 125 Gilman Street		Amount of Each Disbursement this Period 418.83	
City Bridgeport State CT Zip Code 06605-	Purpose of Disbursement PAYROLL	Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	PAYROLL		

SUBTOTAL of Disbursements This Page (optional) ►

1399.93

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

155437.11