

**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  |                             |  |                              |                              |

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)  
TREA Senior Citizens League, Inc. Political Action Committee (TSCL-PAC)

|   |                                |  |
|---|--------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Friends of Ronnie Shows</b>                              |                                | Date of Disbursement<br>06 / 28 / 2001             |
| Mailing Address<br>227 Massachusetts Avenue, N.W. Suite 101<br>City: Washington State: DC Zip Code: 20002 |                                | Amount of Each Disbursement this Period<br>1000.00 |
| Purpose of Disbursement<br>Contribution   | Candidate Name<br>Ronnie Shows | Category/<br>Type                                  |
| Office Sought: <input checked="" type="checkbox"/> House<br>Senate<br>President                           |                                |  |
| Disbursement For:<br><input checked="" type="checkbox"/> Primary General<br>Other (specify) ▼             | Transaction ID: SB23.4136      |  |
| State: MD District: 4   |                                |  |

|   |                                  |  |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Hall for Congress</b>                        |                                  | Date of Disbursement<br>06 / 07 / 2001             |
| Mailing Address<br>104 North San Jacinto<br>City: Rockwall State: TX Zip Code: 75087          |                                  | Amount of Each Disbursement this Period<br>1000.00 |
| Purpose of Disbursement<br>Contribution   | Candidate Name<br>Robert M. Hall | Category/<br>Type                                  |
| Office Sought: <input checked="" type="checkbox"/> House<br>Senate<br>President               |                                  |  |
| Disbursement For:<br><input checked="" type="checkbox"/> Primary General<br>Other (specify) ▼ | Transaction ID: SB23.4120        |  |
| State: TX District: 4   |                                  |  |

|   |                               |   |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Jim Ryun for Congress</b>                    |                               | Date of Disbursement<br>06 / 22 / 2001            |
| Mailing Address<br>605 Upland Place<br>City: Alexandria State: VA Zip Code: 22301             |                               | Amount of Each Disbursement this Period<br>500.00 |
| Purpose of Disbursement<br>Contribution   | Candidate Name<br>Jim R. Ryun | Category/<br>Type                                 |
| Office Sought: <input checked="" type="checkbox"/> House<br>Senate<br>President               |                               |   |
| Disbursement For:<br><input checked="" type="checkbox"/> Primary General<br>Other (specify) ▼ | Transaction ID: SB23.4116     |   |
| State: KS District: 2   |                               |   |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <b>2500.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |                |