

**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)

PAGE 79 / 81

<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)  
 Sweeney for Congress

Full Name (Last, First, Middle Initial)  
**A. Friends of George Cannon**

Mailing Address 196 Beekman St

City Saratoga Springs State NY Zip Code 12866-

Purpose of Disbursement  
 Political Contribution

Candidate Name

Office Sought: House Senate President  
 State: District

Disbursement For: 2004  
 Primary General  
 Other (specify) ▼

011  
 Category/  
 Type

Transaction ID: D105200427E25B1  
 Date of Disbursement  
 11 / 03 / 2003

Amount of Each Disbursement this Period  
 1000.00

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

Full Name (Last, First, Middle Initial)  
**B. Friends of George Cannon**

Mailing Address 196 Beekman St

City Saratoga Springs State NY Zip Code 12866-

Purpose of Disbursement  
 Political Contribution

Candidate Name

Office Sought: House Senate President  
 State: District

Disbursement For: 2004  
 Primary General  
 Other (specify) ▼

011  
 Category/  
 Type

Transaction ID: D105200426E25B0  
 Date of Disbursement  
 10 / 28 / 2003

Amount of Each Disbursement this Period  
 500.00

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

Full Name (Last, First, Middle Initial)  
**C. KY-08 General Election Committee**

Mailing Address PO Box 1721

City Washington State DC Zip Code 20013-

Purpose of Disbursement  
 Political Contribution

Candidate Name

Office Sought: House Senate President  
 State: District

Disbursement For: 2004  
 Primary General  
 Other (specify) ▼

011  
 Category/  
 Type

Transaction ID: D105200427E2570  
 Date of Disbursement  
 10 / 29 / 2003

Amount of Each Disbursement this Period  
 1000.00

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

**SUBTOTAL** of Disbursements This Page (optional) ▶ **2500.00**

**TOTAL** This Period (last page this line number only) ▶ **2500.00**