

**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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17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
Jack Ryan for U.S. Senate

A. Claire Mazer

Full Name (Last, First, Middle Initial)

Mailing Address 800 N. Michigan Avenue
Apt. 5601

City Chicago State IL Zip Code 60611-

Purpose of Disbursement Refund of Contribution
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2004
 Primary General
 Other (specify) ▼

Transaction ID: 1015200442E2912
Date of Disbursement 08 / 23 / 2004

Amount of Each Disbursement this Period 2000.00

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

010
Category/
Type

B. Robert Mazer

Full Name (Last, First, Middle Initial)

Mailing Address 800 N. Michigan Avenue
Apt. 5601

City Chicago State IL Zip Code 60611-

Purpose of Disbursement Refund of Contribution
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2004
 Primary General
 Other (specify) ▼

Transaction ID: 1015200442E2911
Date of Disbursement 08 / 23 / 2004

Amount of Each Disbursement this Period 2000.00

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

010
Category/
Type

C. John McAuliffe

Full Name (Last, First, Middle Initial)

Mailing Address 820 Heather Lane

City Winnetka State IL Zip Code 60093-

Purpose of Disbursement Refund of Contribution
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2004
 Primary General
 Other (specify) ▼

Transaction ID: 1015200442E2970
Date of Disbursement 08 / 23 / 2004

Amount of Each Disbursement this Period 500.00

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

010
Category/
Type

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

4500.00

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