

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 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)
 Nita Lowey for Congress

Full Name (Last, First, Middle Initial)
A. Martin Frost Campaign Committee

Mailing Address PO Box 4219

City Dallas State TX Zip Code 75208

Purpose of Disbursement
 Contribution

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

011
 Category/
 Type

Transaction ID: D86221
 Date of Disbursement

02 / 04 / 2004

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. Martin Frost Campaign Committee

Mailing Address PO Box 4219

City Dallas State TX Zip Code 75208

Purpose of Disbursement
 Contribution

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District

011
 Category/
 Type

Transaction ID: D86222
 Date of Disbursement

02 / 04 / 2004

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)
C. Pelham Town Democratic Committee

Mailing Address 140 Cliff Avenue

City Pelham State NY Zip Code 10803

Purpose of Disbursement
 Nonfederal Contribution

Candidate Name

Office Sought: House Senate President
 Disbursement For: General
 Primary General
 Other (specify) ▼

State: District

011
 Category/
 Type

Transaction ID: D86254
 Date of Disbursement

03 / 02 / 2004

Amount of Each Disbursement this Period

500.00

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) ▶