

**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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial)  
**A. BRIAN HIGGINS FOR CONGRESS**

Mailing Address PO BOX 28

City BUFFALO State NY Zip Code 14220

Purpose of Disbursement  
Contributions

Candidate Name

Office Sought:  House  
Senate  
President

State: NY District: 27

Disbursement For: 2006  
 Primary General  
Other (specify) ▼

Category/  
Type

Transaction ID: SB23.33357

Date of Disbursement

05 / 20 / 2005

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. CHAFEE FOR SENATE**

Mailing Address PO BOX 7320

City WARWICK State RI Zip Code 02887

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought: House  
 Senate  
President

State: RI District: 00

Disbursement For: 2006  
 Primary General  
Other (specify) ▼

Category/  
Type

Transaction ID: SB23.32957

Date of Disbursement

05 / 09 / 2005

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. COBURN FOR SENATE COMMITTEE**

Mailing Address 3300 N OKMULGEE ST  
PO BOX 977

City MUSKOGEE State OK Zip Code 74402

Purpose of Disbursement  
Contribution-Debt Retirement

Candidate Name

Office Sought: House  
 Senate  
President

State: OK District: 00

Disbursement For: 2004  
Primary  General  
Other (specify) ▼

Category/  
Type

Transaction ID: SB23.32954

Date of Disbursement

05 / 09 / 2005

Amount of Each Disbursement this Period

1000.00

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

**4500.00**

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