

**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)						PAGE 1 OF 1
	<input type="checkbox"/> 216 <input type="checkbox"/> 27	<input type="checkbox"/> 22 <input type="checkbox"/> 28a	<input checked="" type="checkbox"/> 23 <input type="checkbox"/> 28b	<input type="checkbox"/> 24 <input type="checkbox"/> 28c	<input type="checkbox"/> 25 <input type="checkbox"/> 29	<input type="checkbox"/> 26 <input type="checkbox"/> 30b	

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NAME OF COMMITTEE (In Full)
Smith & Nephew Inc PAC

A. Adva Med PAC

Full Name (Last, First, Middle Initial): **Adva Med PAC**

Date of Disbursement: **07 14 2004**

Mailing Address: **1200 G Street NW, Suite 400**

City: **Washington** State: **DC** Zip Code: **20005**

Purpose of Disbursement: **contribution**

Candidate Name: **_____**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **▼**

State: _____ District: _____

Amount of Each Disbursement this Period: **2,000.00**

Category/Type: **011**

B. Senator Evan Bayh

Full Name (Last, First, Middle Initial): **Senator Evan Bayh**

Date of Disbursement: **07 14 2004**

Mailing Address: **463 Russel Building, US Senate**

City: **Washington** State: **DC** Zip Code: **20570**

Purpose of Disbursement: **contribution**

Candidate Name: **Evan Bayh**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **▼**

State: **IN** District: _____

Amount of Each Disbursement this Period: **2,000.00**

Category/Type: **011**

C. Friends of Jack Kingston

Full Name (Last, First, Middle Initial): **Friends of Jack Kingston**

Date of Disbursement: **07 14 2004**

Mailing Address: **PO Box 2133**

City: **Savannah** State: **GA** Zip Code: **31402**

Purpose of Disbursement: **contribution**

Candidate Name: **Jack Kingston**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **▼**

State: **GA** District: **01**

Amount of Each Disbursement this Period: **2,000.00**

Category/Type: **011**

SUBTOTAL of Disbursements This Page (optional) **6,000.00**

TOTAL This Period (last page this line number only) **6,000.00**

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