

**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)
Nancy Pelosi for Congress

A.	Full Name (Last, First, Middle Initial) Paul J. Carmouche	Transaction ID: D143251 Date of Disbursement 11 / 12 / 2008
	Mailing Address 912 Kings Highway	Amount of Each Disbursement this Period 2000.00
	City Shreveport State LA Zip Code 71104	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Debt retirement Candidate Name Paul J. Carmouche Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 04 Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

B.	Full Name (Last, First, Middle Initial) Planning for Elders	Transaction ID: D142415 Date of Disbursement 10 / 22 / 2008
	Mailing Address 4200 Park B lvd. #128	Amount of Each Disbursement this Period 125.00
	City Oakland State CA Zip Code 94602	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Donation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) S.F. Democratic Party	Transaction ID: D141932 Date of Disbursement 10 / 22 / 2008
	Mailing Address 1390 Market St Ste 818	Amount of Each Disbursement this Period 2500.00
	City San Francisco State CA Zip Code 94102-5303	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Donation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	4625.00
TOTAL This Period (last page this line number only)	