

**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)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial)
A. Our Congress PAC

Mailing Address P.O. Box 344

City Prescott State AR Zip Code 71857-

Purpose of Disbursement
LEADERSHIP PAC CONTRIBUTION

Candidate Name

Office Sought: House Senate President
Disbursement For: 2006 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: 51220.E2080
Date of Disbursement

11 / 01 / 2005

Amount of Each Disbursement this Period

2500.00

LEADERSHIP PAC CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. Butterfield for Congress Committee

Mailing Address 301 4th Street, NE
Suite 202

City Washington State DC Zip Code 20002-

Purpose of Disbursement
CONTR. TO REP. BUTTERFIELD NC-1 (H)

Candidate Name

Office Sought: House Senate President
Disbursement For: 2006 X Primary General Other (specify) ▼

State: District

Category/
Type

Transaction ID: 51220.E2088
Date of Disbursement

11 / 21 / 2005

Amount of Each Disbursement this Period

1000.00

CONTR. TO REP. BUTTERFIELD NC-1 (H)

Full Name (Last, First, Middle Initial)
C. Committee to Re-elect Bobby Jindal

Mailing Address P.O. Box 8628

City Metairie State LA Zip Code 70005-

Purpose of Disbursement
CONTR. TO REP. JINDAL LA-1 (H)

Candidate Name

Office Sought: House Senate President
Disbursement For: 2006 X Primary General Other (specify) ▼

State: District

Category/
Type

Transaction ID: 51220.E2097
Date of Disbursement

11 / 21 / 2005

Amount of Each Disbursement this Period

1000.00

CONTR. TO REP. JINDAL LA-1 (H)

SUBTOTAL of Disbursements This Page (optional) ▶

4500.00

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