

# 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)

|                              |                              |                              |  |
|------------------------------|------------------------------|------------------------------|--|
| <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)  
Scott for Congress

|    |   |   |
|----|---|---|
| A. | Full Name (Last, First, Middle Initial)<br>Clinton Bryant<br><br>Mailing Address 330 Catalpa Ave<br><br>City Hampton State VA Zip Code 23661-2618<br><br>Purpose of Disbursement Food for Birthday party<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>State: District:  | Transaction ID: D374711<br>Date of Disbursement<br>04 / 30 / 2009<br><br>Amount of Each Disbursement this Period<br>350.00<br><br>Category/Type<br>003  |
| B. | Full Name (Last, First, Middle Initial)<br>Continental of Newport News<br><br>Mailing Address 2905 Chestnut Ave<br>c/o Annie Daniels<br><br>City Newport News State VA Zip Code 23607-4223<br><br>Purpose of Disbursement Tickets<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>State: District:                                     | Transaction ID: D374893<br>Date of Disbursement<br>05 / 26 / 2009<br><br>Amount of Each Disbursement this Period<br>100.00<br><br>Category/Type<br>012  |
| C. | Full Name (Last, First, Middle Initial)<br>Democratic Congressional Campaign Committee<br><br>Mailing Address 430 S Capitol St SE<br><br>City Washington State DC Zip Code 20003-4024<br><br>Purpose of Disbursement Dues<br>Candidate Name Democratic Congressional Campaign Committee<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>State: District: | Transaction ID: D376517<br>Date of Disbursement<br>06 / 29 / 2009<br><br>Amount of Each Disbursement this Period<br>2000.00<br><br>Category/Type<br>011 |

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

2450.00

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