

**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"/> 29a	<input type="checkbox"/> 29b	<input type="checkbox"/> 30a

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NAME OF COMMITTEE (if Full)
CONSERVATIVE NATIONAL COMMITTEE

A. **ASHBURN FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial)

Mailing Address: **P.O. Box 11444**

City: **BAKERSFIELD** State: **CA** Zip Code: **93389**

Purpose of Disbursement: **POLITICAL CONTRIBUTION** Category: **011**

Candidate Name: **ROY ASHBURN**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: **CA** District: **20**

Date of Disbursement: **10 25 2004**

Amount of Each Disbursement this Period: **100.00**

B. **WALCHER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address: **PO BOX 4800**

City: **GRAND JUNCTION** State: **CO** Zip Code: **80033**

Purpose of Disbursement: **POLITICAL CONTRIBUTION** Category: **011**

Candidate Name: **G-REG WALCHER**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: **CO** District: **3**

Date of Disbursement: **10 25 2004**

Amount of Each Disbursement this Period: **100.00**

C. **BEAUPREX FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address: **3994 YOUNGFIELD STREET**

City: **WHEAT RIDGE** State: **CO** Zip Code: **80033**

Purpose of Disbursement: **POLITICAL CONTRIBUTION** Category: **011**

Candidate Name: **BOB BEAUPREX**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: **CO** District: **7**

Date of Disbursement: **10 23 2004**

Amount of Each Disbursement this Period: **100.00**

SUBTOTAL of Disbursements This Page (optional) **300.00**

TOTAL This Period (last page this line number only)