

**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)
BILLY TAUZIN CONGRESSIONAL COMMITTEE, THE

A. Full Name (Last, First, Middle Initial)
CHARLES BOUSTANY JR MD FOR CONGRESS, INC

Mailing Address PO Box 80126

City Lafayette State LA Zip Code 70598

Purpose of Disbursement
Donation

Candidate Name
CHARLES BOUSTANY JR MD FOR CONGRESS, INC

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: LA District: 07

Transaction ID: SB21.4384

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | / | 1 | 5 | / | 2 | 0 | 0 | 8 |

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
TEXANS FOR SENATOR JOHN CORNYN INC

Mailing Address 6850 AUSTIN CENTRE BLVD
SUITE 180

City AUSTIN State TX Zip Code 78731

Purpose of Disbursement
Donation

Candidate Name
TEXANS FOR SENATOR JOHN CORNYN INC

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: TX District: 00

Transaction ID: SB21.4388

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 | / | 2 | 6 | / | 2 | 0 | 0 | 8 |

Amount of Each Disbursement this Period

| |
|---------|
| 2000.00 |
|---------|

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

| |
|---------|
| 3000.00 |
|---------|

TOTAL This Period (last page this line number only)

| |
|---------|
| 3000.00 |
|---------|