

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)
 FRIENDS OF LANE EVANS COMMITTEE

Full Name (Last, First, Middle Initial)
A. Rory Combs

Mailing Address

City State Zip Code

Purpose of Disbursement
 GOTV PHONES

Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: 2004
 Primary X General
 Other (specify) ▼

Category/
 Type

Transaction ID: D04xUD1
 Date of Disbursement
 11 / 02 / 2004

Amount of Each Disbursement this Period
 30.00

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

Full Name (Last, First, Middle Initial)
B. Christine Criddle

Mailing Address 2519 S 1/2 Ave.

City State Zip Code
 Rock Island IL 61201

Purpose of Disbursement
 GOTV PHONES

Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: 2004
 Primary X General
 Other (specify) ▼

Category/
 Type

Transaction ID: D04wC01
 Date of Disbursement
 11 / 02 / 2004

Amount of Each Disbursement this Period
 40.00

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

Full Name (Last, First, Middle Initial)
C. Patricia Cury

Mailing Address

City State Zip Code

Purpose of Disbursement
 GOTV DOOR TO DOOR

Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: 2004
 Primary X General
 Other (specify) ▼

Category/
 Type

Transaction ID: D04xP01
 Date of Disbursement
 11 / 02 / 2004

Amount of Each Disbursement this Period
 40.00

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

SUBTOTAL of Disbursements This Page (optional) ▶ **110.00**

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