

**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 checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Kennedy for Senate 2006

**A.** Full Name (Last, First, Middle Initial)  
Jay Sackman

Mailing Address 30 Northwest Dr.

City Northport State NY Zip Code 11768

Purpose of Disbursement Refund of Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2006  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D11360  
Date of Disbursement 11 / 29 / 2004

Amount of Each Disbursement this Period 1000.00

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

010  
Category/Type

**B.** Full Name (Last, First, Middle Initial)  
J Stanley Yako

Mailing Address 347 Loudon Rd.

City Albany State NY Zip Code 12211

Purpose of Disbursement Refund of Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2006  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D11359  
Date of Disbursement 11 / 08 / 2004

Amount of Each Disbursement this Period 4000.00

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

010  
Category/Type

SUBTOTAL of Disbursements This Page (optional) .....	5000.00
TOTAL This Period (last page this line number only) .....	9250.00