

**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 Congressman Tim Holden

Full Name (Last, First, Middle Initial) <b>A. Friends Of John Barrow</b>		<b>Transaction ID: D7099</b> Date of Disbursement 10 / 27 / 2006
Mailing Address P.O. Box 8166		Amount of Each Disbursement this Period 1000.00
City Savannah State GA Zip Code 31412	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) <b>B. Steve Lukach For Clerk Of</b>		<b>Transaction ID: D7085</b> Date of Disbursement 10 / 25 / 2006
Mailing Address 335 Lake Drive		Amount of Each Disbursement this Period 2300.00
City Nesquehoning State PA Zip Code 18240	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) <b>C. PA House Democratic Campaign Comm</b>		<b>Transaction ID: D7104</b> Date of Disbursement 10 / 27 / 2006
Mailing Address P.O. Box 555		Amount of Each Disbursement this Period -5000.00
City Harrisburg State PA Zip Code 18108	Purpose of Disbursement Void Check #6677 Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	-1700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....