

**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)

<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"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Sun Healthcare Group, Inc. Political Action Committee d/b/a Sun HealthCare P.A.C.

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF MAX BAUCUS</b>		<b>Transaction ID: SB23.4975</b>	
Mailing Address PO BOX 586		Date of Disbursement 07 / 07 / 2006	
City HELENA	State MT	Zip Code 59624	Amount of Each Disbursement this Period 5000.00
Purpose of Disbursement Contribution		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT	District: 00		

Full Name (Last, First, Middle Initial) <b>B. MCCREY FOR CONGRESS COMMITTEE</b>		<b>Transaction ID: SB23.4976</b>	
Mailing Address Post Office Box 52956 333 Texas Street Suite 1900		Date of Disbursement 07 / 07 / 2006	
City Shreveport	State LA	Zip Code 71135	Amount of Each Disbursement this Period 5000.00
Purpose of Disbursement Contribution		Category/ Type	
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: LA	District: 04		

Full Name (Last, First, Middle Initial) <b>C. TEXAS FREEDOM FUND</b>		<b>Transaction ID: SB23.4982</b>	
Mailing Address 104 East Hume Avenue		Date of Disbursement 07 / 24 / 2006	
City Alexandria	State VA	Zip Code 22301	Amount of Each Disbursement this Period 2500.00
Purpose of Disbursement Contribution		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>12500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>25000.00</b>