

**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)  
Coble for Congress

Full Name (Last, First, Middle Initial)  
A. Jim Gerlach for Congress

Mailing Address 704 Haywood Dr.

City Exton State PA Zip Code 19341-

Purpose of Disbursement  
CAMPAIGN CONTRIBUTION

Candidate Name  
JIM GERLACH

Office Sought:  House  
Senate  
President  
State: PA District D6

Disbursement For: 2004  
Primary  General   
Other (specify) ▼

Category/  
Type

Transaction ID: 1006200453E2125  
Date of Disbursement

10 / 01 / 2004

Amount of Each Disbursement this Period

1000.00

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

Full Name (Last, First, Middle Initial)  
B. Louie Gohmert for Congress

Mailing Address PO Box 8060

City Tyler State TX Zip Code 75711-

Purpose of Disbursement  
CAMPAIGN CONTRIBUTION

Candidate Name  
LOUISB.MR.JR. GOHMERT

Office Sought:  House  
Senate  
President  
State: TX District D1

Disbursement For: 2004  
Primary  General   
Other (specify) ▼

Category/  
Type

Transaction ID: 41012.E2150  
Date of Disbursement

10 / 01 / 2004

Amount of Each Disbursement this Period

1000.00

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

Full Name (Last, First, Middle Initial)  
C. Sam Graves for Congress

Mailing Address 105 East Mill Suite D

City Liberty State MO Zip Code 64068-

Purpose of Disbursement  
CAMPAIGN CONTRIBUTION

Candidate Name  
SAMUEL(SAM) GRAVES

Office Sought:  House  
Senate  
President  
State: MO District D6

Disbursement For: 2004  
Primary  General   
Other (specify) ▼

Category/  
Type

Transaction ID: 1006200453E2122  
Date of Disbursement

10 / 01 / 2004

Amount of Each Disbursement this Period

1000.00

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) ▶