

**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)  
Jim Ryun for Congress

**A.** Friends of Nick Reid

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 446

City Superior State WI Zip Code 54880-

Purpose of Disbursement  
CONTRIBUTION FOR GENERAL 06

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: 60707.E4156  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	5		2	0	0	6

Amount of Each Disbursement this Period

1000.00
---------

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

**B.** Friends of Nick Reid

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 446

City Superior State WI Zip Code 54880-

Purpose of Disbursement  
CONTRIBUTION TO PRIMARY 06

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: 60707.E4155  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	5		2	0	0	6

Amount of Each Disbursement this Period

1000.00
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Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

2000.00
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**TOTAL** This Period (last page this line number only) ..... ►

2000.00
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