

**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)

PAGE 142 / 144

<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)  
Steve Israel For Congress Committee

Full Name (Last, First, Middle Initial) <b>A. New York State Democratic Committee</b>		<b>Transaction ID:</b> D9149 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 5 / 2 0 0 6
Mailing Address 60 Madison Avenue Suite 1201		Amount of Each Disbursement this Period 4640.00
City New York State NY Zip Code 10010	Purpose of Disbursement Campaign Expense Candidate Name Category/Type 011	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input 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. Nick Lampson for Congress</b>		<b>Transaction ID:</b> D9150 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address PO Box 58606		Amount of Each Disbursement this Period 1000.00
City Houston State TX Zip Code 77258	Purpose of Disbursement Contributions Candidate Name Nick Lampson Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 22	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. PATRICK MURPHY FOR CONGRESS</b>		<b>Transaction ID:</b> D9155 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 6 / 2 0 0 6
Mailing Address PO BOX 868		Amount of Each Disbursement this Period 1000.00
City LEVITTOWN State PA Zip Code 19058	Purpose of Disbursement Contributions Candidate Name Patrick Murphy Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input 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) ..... ▶	6640.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....