

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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 checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

A Lot of People Supporting Tom Daschle Inc

A. Full Name (Last, First, Middle Initial) Ms. Marjorie Braude		Transaction ID: D25988 Date of Disbursement 10 M / 12 D / Y Y Y Y 2004	
Mailing Address 801 Hanley Ave		Amount of Each Disbursement this Period 500.00	
City Los Angeles	State CA	Zip Code 90049-1913	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Refund		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼		
State: District:			
B. Full Name (Last, First, Middle Initial) Rebecca Eidson		Transaction ID: D25990 Date of Disbursement 10 M / 12 D / Y Y Y Y 2004	
Mailing Address 3987 El Prado Blvd		Amount of Each Disbursement this Period 1000.00	
City Coconut Grove	State FL	Zip Code 33133-6404	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Refund		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼		
State: District:			
C. Full Name (Last, First, Middle Initial) Gerald T. Harrington		Transaction ID: D26344 Date of Disbursement 10 M / 01 D / Y Y Y Y 2004	
Mailing Address 209 Blackberry Hill Dr		Amount of Each Disbursement this Period 500.00	
City South Kingstown	State RI	Zip Code 02879-6565	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Refund		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼		
State: District:			
SUBTOTAL of Disbursements This Page (optional)			2000.00
TOTAL This Period (last page this line number only)			