

**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)

<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)
SIMPSON FOR CONGRESS

A. JOHN T. DOOLITTLE FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 2150 River Plaza Dr. #150

City Sacramento State CA Zip Code 95833-

Purpose of Disbursement
HOUSE CANDIDATE (CA 04)

Candidate Name
JOHN T DOOLITTLE

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: CA District: 04

Transaction ID: 61205.E3752

Date of Disbursement

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

Amount of Each Disbursement this Period

2000.00

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

B. DONNA JONES

Full Name (Last, First, Middle Initial)

Mailing Address 912 W. Jefferson

City Boise State ID Zip Code 83702-

Purpose of Disbursement
STATE CONTROLLER CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 61205.E3755

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	1	/	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

C. RICHARD POMBO FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1070

City Tracy State CA Zip Code 95378-

Purpose of Disbursement
HOUSE CANDIDATE (CA 11)

Candidate Name
RICHARD POMBO

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: CA District: 11

Transaction ID: 61205.E3759

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	8	/	2	0	0	6

Amount of Each Disbursement this Period

2000.00

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

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)