

**SCHEDULE B (FEC Form 3X)
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"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Sun Healthcare Group, Inc. Political Action Committee d/b/a Sun HealthCare P.A.C.

Full Name (Last, First, Middle Initial) A. RYAN FOR CONGRESS		Transaction ID: SB23.6286 Date of Disbursement
Mailing Address P. O. Box 1919		<input type="text" value="06"/> / <input type="text" value="15"/> / <input type="text" value="2007"/>
City Janesville	State WI	Zip Code 53547
Purpose of Disbursement CONTRIBUTION	<input type="text" value="1500.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WI District: 01		

Full Name (Last, First, Middle Initial) B. SALAZAR FOR SENATE		Transaction ID: SB23.6273 Date of Disbursement
Mailing Address PO BOX 600		<input type="text" value="06"/> / <input type="text" value="01"/> / <input type="text" value="2007"/>
City DENVER	State CO	Zip Code 80201
Purpose of Disbursement CONTRIBUTION	<input type="text" value="3500.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CO District: 00		

Full Name (Last, First, Middle Initial) C. TEAM SUNUNU		Transaction ID: SB23.6279 Date of Disbursement
Mailing Address PO BOX 500		<input type="text" value="06"/> / <input type="text" value="11"/> / <input type="text" value="2007"/>
City RYE	State NH	Zip Code 03870
Purpose of Disbursement CONTRIBUTION	<input type="text" value="1000.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NH District: 00		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="6000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>