SCHEDULE B ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER 23

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

SOUTHERN COMPANY EMPLOYEES PAC

A. Full Name, Mailing Address and ZIP Code CUBIN FOR CONGRESS, INC. ATTN: RICHARD BRATTON SR., TRS. P.O. BOX 4657 CASPER, WY 82604	Purpose of Disbursement BARBARA CUBIN U S HOUSE WY-AL Disbursement for: 00 Primary General Other:	Date (month, day, year) 06/23/00	Amount of Each Disbursement this Period 1,500.00
B. Full Name, Mailing Address and ZIP Code CUBIN FOR CONGRESS, INC. ATTN: RICHARD BRATTON SR., TRS. P.O. BOX 4657 CASPER, WY 82604	Purpose of Disbursement BARBARA CUBIN U S HOUSE WY-AL Disbursement for: 00 Primary General Other:	Date (month, day, year) 06/27/00	Amount of Each Disbursement this Period 500.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other:	Date (month, day, year)	Amount of Each Disbursement this Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other:	Date (month, day, year)	Amount of Each Disbursement this Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other:	Date (month, day, year)	Amount of Each Disbursement this Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other:	Date (month, day, year)	Amount of Each Disbursement this Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other:	Date (month, day, year)	Amount of Each Disbursement this Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other:	Date (month, day, year)	Amount of Each Disbursement this Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other:	Date (month, day, year)	Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)	2,000.00
TOTAL This Period (last page this line number only)	38,000.00

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