SCHEDULE B — ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

SOUTHERN COMPANY EMPLOYEES PAC

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
A. CITIZENS FOR GILLMOR P.O. BOX 910 PORT CLINTON, OH 43452	PAUL GILLMOR U S HOUSE OH006 Disbursement for: Primary [X] General	08/02/00	1,000.00
B.			
C.			
D.			
E.			
F.			
G.			
H.			
I.			
SUBTOTAL of Disbursements This Page (optional)			1,000.00

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