SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 21

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NAME OF COMMITTEE (In Full)
Friends of John Conyers

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Lois Capps 1724 Santa Barbara Street Santa Barbara, CA 93101-	CA-22 Special Election Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	01/09/98	$500.00
Friends of Lois Capps 1724 Santa Barbara Street Santa Barbara, CA 93101-	CA-22 Special Election Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/06/98	$1000.00
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	/ /	
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	/ /	
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	/ /	
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	/ /	
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	/ /	

SUBTOTAL of Disbursements This Page (optional)	$1500.00
TOTAL This Period (last page this line number only)	$1500.00