SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 21

Other Disbursements

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NAME OF COMMITTEE (In Full) (01/01/98 - 03/31/98)

Friends of Farr C00290429

A. Full Name, Mailing Address and ZIP Code Friends of Lois Capps 1724 Santa Barbara Street Santa Barbara, CA 93101	Purpose of Disbursement Contribution to Lois Capps CD-22, California Disbursement for: [ ] Primary [ ] General [X] Other (specify) Run-off	Date (month, day, year) 01/30/98	Amount of Each Disbursement This Period 1,000.00
B. Full Name, Mailing Address and ZIP Code Friends of Lane Evans P.O. Box 5263 Rock Island, IL 61204	Purpose of Disbursement Contribution to Lane Evans CD-17, Illinois Disbursement for: [X] Primary [ ] General [ ] Other (specify)	Date (month, day, year) 03/30/98	Amount of Each Disbursement This Period 500.00
C. Full Name, Mailing Address and ZIP Code Ralph Waite for Congress 44-850 Las Palmas Avenue, Suite A Palm Desert, CA 92260	Purpose of Disbursement Contribution to Ralph Waite CD-44, California Disbursement for: [ ] Primary [ ] General [X] Other (specify) Special	Date (month, day, year) 03/10/98	Amount of Each Disbursement This Period 500.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	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 (specify)	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 (specify)	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 (specify)	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 (specify)	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 (specify)	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)	2,000.00