SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 21

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NAME OF COMMITTEE (in Full)
Carrie Meek for Congress

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Kendrick Meek Campaign P.O. Box 694334 Miami, FL 33269	Contribution Nonfederal Disbursement for: [X] Primary [ ] General [ ] Other (specify)	9/16/97	$ 500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Raul Martinez Campaign fund 470 W. 49 Street Hialeah, FL 33012	Contribution Nonfederal Disbursement for: [X] Primary [ ] General [ ] Other (specify)	9/29/97	$ 100.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Donna Green Campaign 1102 Estate Richmond St. Croix, VI 00820	Contribution Delegate U.S. Virgin Islands Disbursement for: [X] Primary [ ] General [ ] Other (specify)	10/28/97	$ 200.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Lois Capps 25 W. Anapamu Santa Barbara, CA 93101	Contribution-Federal CA-22 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	12/29/97	$ 250.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		

SUBTOTAL of Disbursements This Page (optional) ..... $ 1,050.00

TOTAL This Period (last page this line number only) ..... $ 1,050.00

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