SCHEDULE B ITEMIZED DISBURSEMENTS

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

For Line Number 21

Other Disbursements

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 for such committee.

NAME OF COMMITTEE (In Full)
NITA LOWEY FOR CONGRESS

Full Name, Mailing Address & Zip Code	Purpose of Disbursement	Date(month day, year)	Amount of Each Disb. this period
Friends of Gary Stracuzzi 269 Madison AVenue Rye Brook, NY 10573	Contribution Disb for: | X| Primary | | General | | Other (specify)	10/17/97	250.00
Full Name, Mailing Address & Zip Code	Purpose of Disbursement	Date(month day, year)	Amount of Each Disb. this period
Friends of George Latimer PO BOX 277 Mamaroneck, NY 10543	Contribution Disb for: | X| Primary | | General | | Other (specify)	10/17/97	250.00
Full Name, Mailing Address & Zip Code	Purpose of Disbursement	Date(month day, year)	Amount of Each Disb. this period
	Disb for: | | Primary | | General | | Other (specify)		
Full Name, Mailing Address & Zip Code	Purpose of Disbursement	Date(month day, year)	Amount of Each Disb. this period
Friends of Lois Capps 25 West Aanapamu Santa Barbara, CA 93101	Disb for: | X| Primary | | General | | Other (specify)	11/25/97	1000.00
Full Name, Mailing Address & Zip Code	Purpose of Disbursement	Date(month day, year)	Amount of Each Disb. this period
Friends of Michael Keplowitz PO BOX 1342 Yorktown Heights, NY 10598	Contribution Disb for: | X| Primary | | General | | Other (specify)	10/17/97	250.00
Full Name, Mailing Address & Zip Code	Purpose of Disbursement	Date(month day, year)	Amount of Each Disb. this period
Friends of Michele Bermel 39 Garden Ridge Chappaqua, NY 10514	Contribution Disb for: | X| Primary | | General | | Other (specify)	10/17/97	250.00
Full Name, Mailing Address & Zip Code	Purpose of Disbursement	Date(month day, year)	Amount of Each Disb. this period
Friends of Nilda Morales Horowitz 10 Fiske Place #429 Mount Vernon, NY 10550	Contribution Disb for: | X| Primary | | General | | Other (specify)	10/17/97	250.00
Full Name, Mailing Address & Zip Code	Purpose of Disbursement	Date(month day, year)	Amount of Each Disb. this period
Friends of Otis, Downing, Hackett & Stampleman PO BOX 534 Rye, NY 10580	Contribution Disb for: | X| Primary | | General | | Other (specify)	10/17/97	250.00

SUBTOTAL of Disbursements This Page (optional)——————> 2500.00

TOTAL This Period(last page this line number only)——>