

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

CSR America Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
John Boehner House OH 8th	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-15-00	500.00
B. Full Name, Mailing Address and ZIP Code Van Hilleary House TX 4th	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-15-00	500.00
C. Full Name, Mailing Address and ZIP Code Earnest Lee Fletcher House KY 6th	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-15-00	500.00
D. Full Name, Mailing Address and ZIP Code Jim Hansen House UT 1st	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-15-00	1,000.00
E. Full Name, Mailing Address and ZIP Code Jim Saxton House NJ 3rd	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-15-00	1,000.00
F. Full Name, Mailing Address and ZIP Code Mac Collins House GA 3rd	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-15-00	500.00
G. Full Name, Mailing Address and ZIP Code Ralph Hall House TX 4th	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-15-00	500.00
H. Full Name, Mailing Address and ZIP Code Jennifer Carroll House FL 3rd	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-15-00	500.00
I. Full Name, Mailing Address and ZIP Code Conrad Burns Senate MI	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-15-00	1,000.00

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)