SCHEDULE B — ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

AIRTOUCH COMM POLITICAL ACTION CMTE(FED)

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement this Period
A. FRIENDS OF LOIS CAPPS 38 IVY STREET SE WASHINGTON, DC 20003	LOIS CAPPS U S CONGRESS CA 22 Disbursement for: 00 Primary ___ General ___ Other:	09/23/99	500.00
B. JAMES ROGAN FOR CONGRESS COMMITTEE P.O. BOX 2776 ALEXANDRIA, VA 22202	JAMES ROGAN U S CONGRESS CA 27 Disbursement for: 00 Primary ___ General ___ Other:	09/23/99	500.00
C.	Purpose of Disbursement Disbursement for: ___ Primary ___ General ___ Other:	Date (month, day, year)	Amount of Each Disbursement this Period
D.	Purpose of Disbursement Disbursement for: ___ Primary ___ General ___ Other:	Date (month, day, year)	Amount of Each Disbursement this Period
E.	Purpose of Disbursement Disbursement for: ___ Primary ___ General ___ Other:	Date (month, day, year)	Amount of Each Disbursement this Period
F.	Purpose of Disbursement Disbursement for: ___ Primary ___ General ___ Other:	Date (month, day, year)	Amount of Each Disbursement this Period
G.	Purpose of Disbursement Disbursement for: ___ Primary ___ General ___ Other:	Date (month, day, year)	Amount of Each Disbursement this Period
H.	Purpose of Disbursement Disbursement for: ___ Primary ___ General ___ Other:	Date (month, day, year)	Amount of Each Disbursement this Period
I.	Purpose of Disbursement Disbursement for: ___ Primary ___ General ___ Other:	Date (month, day, year)	Amount of Each Disbursement this Period
SUBTOTAL of Disbursements This Page (optional)			1,000.00

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