SCHEDULE B ITEMIZED DISBURSEMENTS

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

For Line Number (2)

Other Disbursements

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NAME OF COMMITTEE (In Full)
Pelosi for Congress

Full Name, Mailing Address & Zip Code	Purpose of Disbursement	Date(month day, year)	Amount of Each Disb. this period
Labor/Neighbor COPE Dinner P.O. Box 410667 San Francisco, CA 94141	Donation Disb for: | | Primary |X| General | | Other (specify)	09/22/00	125.00
Full Name, Mailing Address & Zip Code	Purpose of Disbursement	Date(month day, year)	Amount of Each Disb. this period
Langevin for Congress P.O. Box 55 Providence, RI 02901	Federal contribution (RI/02) Disb for: |X| Primary | | General | | Other (specify)	09/18/00	1000.00
Full Name, Mailing Address & Zip Code	Purpose of Disbursement	Date(month day, year)	Amount of Each Disb. this period
Langevin for Congress P.O. Box 55 Providence, RI 02901	Federal contribution (RI/02) Disb for: | | Primary |X| General | | Other (specify)	09/18/00	1000.00
Full Name, Mailing Address & Zip Code	Purpose of Disbursement	Date(month day, year)	Amount of Each Disb. this period
Larkin Street Youth Center 1044 Larkin Street San Francisco, CA 94109	Donation Disb for: | | Primary |X| General | | Other (specify)	09/05/00	250.00
Full Name, Mailing Address & Zip Code	Purpose of Disbursement	Date(month day, year)	Amount of Each Disb. this period
Lawyer's Committee for Civil Rights 301 Mission St., Ste. 400 San Francisco, CA 94105	Donation Disb for: | | Primary |X| General | | Other (specify)	07/28/00	200.00
Full Name, Mailing Address & Zip Code	Purpose of Disbursement	Date(month day, year)	Amount of Each Disb. this period
Marshall for Congress P.O. Box 126 Macon, GA 31202	Federal contribution (GA/08) Disb for: | | Primary |X| General | | Other (specify)	08/07/00	1000.00
Full Name, Mailing Address & Zip Code	Purpose of Disbursement	Date(month day, year)	Amount of Each Disb. this period
McCollum for Congress 2464 Burke Avenue, E. North St. Paul, MN 55109	Federal contribution (MN/04) Disb for: |X| Primary | | General | | Other (specify)	09/05/00	1000.00
Full Name, Mailing Address & Zip Code	Purpose of Disbursement	Date(month day, year)	Amount of Each Disb. this period
McCollum for Congress 2464 Burke Avenue, E. North St. Paul, MN 55109	Federal contribution (MN/04) Disb for: | | Primary |X| General | | Other (specify)	09/05/00	1000.00

SUBTOTAL of Disbursements This Page (optional)----------> 5575.00

TOTAL This Period(last page this line number only)----> 54420.00