

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

BELL ATLANTIC CORPORATION PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
RE-ELECT BRIAN DILBRAY FOR CONGRESS 978 SEACREST DRIVE, #7 IMPERIAL BEACH, CA 91932	BRIAN DILBRAY U S CONGRESS CA0045 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	05/26/99	3,000.00
KUYKENDALE CONGRESSIONAL COMMITTEE 21311 HAWTHORNE BLVD. #107 TORRANCE, CA 90503	STEVE KUYKENDALE U S CONGRESS CA0356 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	06/10/99	500.00
MAISUE FOR CONGRESS COMMITTEE 729 15TH STREET, NW, 3RD FLOOR WASHINGTON, DC 20005	DOJ MATOSI U S CONGRESS CA0005 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	04/23/99	1,000.00
BUCK MCKEON FOR CONGRESS P.O. BOX 2091 SANTA CLARITA, CA 91386	BUCK MCKEON U S CONGRESS CA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	03/17/99	500.00
ROGAN FOR CONGRESS COMMITTEE P.O. BOX 36 MONTESSE, CA 91021	JAMES ROGAN U S CONGRESS CA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	05/11/99	5,000.00
BILL THOMAS CAMPAIGN COMMITTEE P.O. BOX 395 BARBERSFIELD, CA 93302	BILL THOMAS U S CONGRESS CA0021 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	04/20/99	1,000.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	Date (month, day, year)	Amount of Each Disbursement this Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	Date (month, day, year)	Amount of Each Disbursement this Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	Date (month, day, year)	Amount of Each Disbursement this Period
SUBTOTAL of Disbursements This Page (optional)			11,000.00