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)

PACIFIC LIFE INSURANCE COMPANY PAC

A. Full name, Mailing Address and ZIP code JERRY LEWIS FOR CONGRESS COMMITTEE 4451 BROOKFIELD CORPORATE DR. CHANTILLY, VA 20151	Purpose of Disbursement JERRY LEWIS MEMBER OF CONGRESS; STATE: CA; DIST. 40 Disbursement for: [ ] Primary [x] General [ ] Other (specify)	Date (month, day, year) 05/05/2000	Amount of Each Disbursement This Period $1,000.00
B. Full name, Mailing Address and ZIP code ELLEN TAUSCHER FOR CONGRESS 501 CAPITOL COURT, N.E., SUITE 10 WASHINGTON, DC 20002	Purpose of Disbursement ELLEN TAUSCHER MEMBER OF CONGRESS; STATE: CA; DIST. 10 Disbursement for: [ ] Primary [x] General [ ] Other (specify)	Date (month, day, year) 05/23/2000	Amount of Each Disbursement This Period $1,000.00
C. Full name, Mailing Address and ZIP code FRIENDS OF LOIS CAPPS 38 IVY ST., SE WASHINGTON, DC 20003	Purpose of Disbursement LOIS CAPPS MEMBER OF CONGRESS; STATE: CA; DIST. 22 Disbursement for: [ ] Primary [x] General [ ] Other (specify)	Date (month, day, year) 05/23/2000	Amount of Each Disbursement This Period $1,000.00
D. Full name, Mailing Address and ZIP code RE-ELECT BRIAN BILBRAY FOR CONGRESS 1535 DR. MAR HEIGHTS ROAD, STE. 36 SAN DIEGO, CA 92130	Purpose of Disbursement BRIAN BILBRAY MEMBER OF CONGRESS; STATE: CA; DIST. 48 Disbursement for: [ ] Primary [x] General [ ] Other (specify)	Date (month, day, year) 05/23/2000	Amount of Each Disbursement This Period $1,000.00
E. Full name, Mailing Address and ZIP code THE COMMITTEE TO RE-ELECT MARGE ROUKEMA P.O. BOX 625 RIDGEWOOD, NJ 07451	Purpose of Disbursement MARGE ROUKEMA MEMBER OF CONGRESS; STATE: NJ; DIST. 5 Disbursement for: [ ] Primary [x] General [ ] Other (specify)	Date (month, day, year) 05/23/2000	Amount of Each Disbursement This Period $500.00
F. Full name, Mailing Address and ZIP code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full name, Mailing Address and ZIP code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full name, Mailing Address and ZIP code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full name, Mailing Address and ZIP code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	$500.00
TOTAL This Period (last page this line number only)	$500.00