SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	3 / 3 FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)
SUN-MAID GROWERS OF CALIFORNIA PAC

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
CITIZENS FOR COCHRAN P O BOX 7183 TUPELO MS 38801	9-8-00 check voided from 9-00 report on 11-3-00. Disbursement for: [ ] Primary [X] General [ ] Other (specify) :	Voided 11/03/00	-1000.00
FEINSTEIN 2000 909 MONTGOMERY STREET SUITE 400 SAN FRANCISCO CA 94133	9-8-00 check voided from 9-00 report on 11-3-00. Disbursement for: [ ] Primary [X] General [ ] Other (specify) :	Voided 11/03/00	-1000.00

SUBTOTALS of Disbursements This Page (Optional)	
TOTALS This Period (last page this line number only)	-2000.00