SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 21

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NAME OF COMMITTEE (In Full)
Friends of George Brown

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Lois Capps 1724 Santa Barbara Street Santa Barbara, CA 93101-	CA22 1998 Special Disbursement for: [X] Primary [ ] General [ ] Other (specify)	11/25/97	$1000.00
Sanchez Recount Fund 38 Ivy Street, SE Washington, DC 20003-	Recount Disbursement for: [X] Primary [ ] General [ ] Other (specify)	07/01/97	$500.00
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	/ /	
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	/ /	
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	/ /	
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	/ /	
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	/ /	

SUBTOTAL of Disbursements This Page (optional)	$1500.00
TOTAL This Period (last page this line number only)	$1500.00