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)
Koch Industries, Inc Political Action Committee (KOCHPAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
Largent for Congress 2424 E. 21st Street Suite 100B Tulsa, OK 74114	Steve Largent, U.S. HOUSE 1st OK Disbursement for: [ ] Primary [X] General [ ] Other (specify) 2000	08/18/00	4,000.00
B. Full Name, Mailing Address and ZIP Code Tiahrt for Congress 2250 North Rock Road #118A Wichita, KS 67226	Purpose of Disbursement Todd Tiahrt, U.S. HOUSE 4th KS Disbursement for: [ ] Primary [X] General [ ] Other (specify) 2000	08/23/00	4,000.00
C. Full Name, Mailing Address and ZIP Code Moran for Congress PO Box 1151 Hays, KS 67601	Purpose of Disbursement Jerry Moran, U.S. HOUSE 1st KS Disbursement for: [ ] Primary [X] General [ ] Other (specify) 2000	08/28/00	1,000.00
D. Full Name, Mailing Address and ZIP Code Lucas for Congress Committee P.O. Box 26825 Oklahoma City, OK 73126	Purpose of Disbursement Frank Lucas, U.S. HOUSE 6th OK Disbursement for: [ ] Primary [X] General [ ] Other (specify) 2000	08/31/00	1,500.00
E. Full Name, Mailing Address and ZIP Code Brian Baird for Congress P.O. Box 5016 Vancouver, WA 98668	Purpose of Disbursement Brian Baird, U.S. HOUSE 3rd WA Disbursement for: [X] Primary [ ] General [ ] Other (specify) 2000	08/31/00	1,000.00
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)	11,500.00
TOTAL This Period (last page this line number only)	11,500.00

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