

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c
<input type="checkbox"/> 29				

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NAME OF COMMITTEE (In Full)  
WOMEN'S ALLIANCE FOR ISRAEL

Full Name (Last, First, Middle Initial) <b>A. A WAYNE ALLARD</b>		Date of Disbursement 10 / 04 / 2001	
Mailing Address PO BOX 32 City: LOVELAND State: CO Zip Code: 80538		Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement CHECK#1714 CONTRIBUTION		Category/ Type	
Candidate Name			
Office Sought: House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President <input type="checkbox"/>	Disbursement For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: CO District: 00	Transaction ID: SB23.1934		

Full Name (Last, First, Middle Initial) <b>B. MARY BONO</b>		Date of Disbursement 08 / 22 / 2001	
Mailing Address PO BOX 3370 City: PALM SPRINGS State: CA Zip Code: 92263		Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement CHECK#1706 CONTRIBUTION		Category/ Type	
Candidate Name			
Office Sought: House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: CA District: 45	Transaction ID: SB23.1917		

Full Name (Last, First, Middle Initial) <b>C. EFFECTIVE GOVERNMENT COMMITTEE</b>		Date of Disbursement 10 / 14 / 2001	
Mailing Address 607 14TH STREET NW SUITE 800 City: WASHINGTON State: DC Zip Code: 20005		Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement CHECK#1715 CONTRIBUTION		Category/ Type	
Candidate Name			
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:	Transaction ID: SB23.1942		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>5500.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	