

**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)
United Food and Commercial Workers Active Ballot Club

Full Name (Last, First, Middle Initial) A. PETER KING FOR CONGRESS COMMIT			Date of Disbursement 03 / 20 / 2001	
Mailing Address 1523 CAROLINE STREET NW City: WASHINGTON State: DC Zip Code: 20009			Amount of Each Disbursement this Period 1500.00	
Purpose of Disbursement CONTRIBUTION N(02) - C.D. # 03			Category/ Type	
Candidate Name				
Office Sought: House Senate President	Disbursement For: <input checked="" type="checkbox"/> Primary General Other (specify) ▼		Transaction ID: SB23.8598	
State: District:				

Full Name (Last, First, Middle Initial) B. PETER KING FOR CONGRESS COMMIT			Date of Disbursement 03 / 20 / 2001	
Mailing Address 1523 CAROLINE STREET NW City: WASHINGTON State: DC Zip Code: 20009			Amount of Each Disbursement this Period 1500.00	
Purpose of Disbursement CONTRIBUTION N(02) - C.D. # 03			Category/ Type	
Candidate Name				
Office Sought: House Senate President	Disbursement For: <input checked="" type="checkbox"/> Primary General Other (specify) ▼		Transaction ID: SB23.8600	
State: District:				

Full Name (Last, First, Middle Initial) C. SCOTT CONKLIN FOR U.S. CONGRES			Date of Disbursement 03 / 30 / 2001	
Mailing Address 2D1 NORTH FRONT STREET City: PHILLIPSBURG State: PA Zip Code: 16866			Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement CONTRIBUTION U.S. HOUSE - PA			Category/ Type	
Candidate Name				
Office Sought: House Senate President	Disbursement For: <input checked="" type="checkbox"/> Primary General Other (specify) ▼		Transaction ID: SB23.6816	
State: District:				

SUBTOTAL of Receipts This Page (optional) ▶	3500.00
TOTAL This Period (last page this line number only) ▶	