

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
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FOR LINE NUMBER		23

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NAME OF COMMITTEE (In Full)  
**American Health Care Association Political Action Committee**

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
<b>Hastert for Congress</b> P.O. Box 625 Batavia, IL 60510	<b>Dennis Hastert, U.S. HOUSE 14th IL</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 98	09/02/98	1,250.00
<b>Reynolds for Congress</b> PO Box 479 Victor, NY 14564	<b>Tom Reynolds, U.S. HOUSE NY</b> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 98	09/02/98	500.00
<b>Daye Camp for Congress</b> 135 Ashman Midland, MI 48640	<b>Dave Camp, U.S. HOUSE 4th MI</b> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 98	09/02/98	600.00
<b>People for English</b> P.O. Box 1940 Erie, PA 16512	<b>Voided Check</b> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	09/03/98	-500.00
<b>King for Congress, Inc.</b> P.O. Box 5619 1224 Longworth House Ofc Bldg Madison, WI 53705	<b>Voided Check</b> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	09/03/98	-500.00
<b>Tom DeLay for Congress</b> PO Box 101 407 Cannon House Ofc Bldg Sugar Land, TX 77487	<b>Voided Check</b> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	09/03/98	-1,000.00
<b>Manton for Congress</b> 46-12 Queens Blvd., #210A 203 Cannon House Ofc Bldg Sunnyside, NY 11104	<b>Voided Check</b> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	09/03/98	-500.00
<b>Comte. to Elect Ron Klink</b> 107 S. Second St. 1130 Longworth House Ofc Bldg Jeannette, PA 15644	<b>Voided Check</b> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	09/03/98	-500.00
<b>COMMITTEE TO REELECT ED TOWNS</b> 321 Stuyvesant Avenue Brooklyn, NY 11233	<b>Voided Check</b> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	09/03/98	-1,000.00

SUB TOTAL of Disbursements this page (Optional).....> **-1,650.00**

TOTAL this Period (Last page this line number only).....>