

<b>SCHEDULE B</b>		<b>ITEMIZED DISBURSEMENTS</b>		<b>30 / 33</b>
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER 23
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<b>NAME OF COMMITTEE (In Full)</b> <b>National Committee to Preserve Social Security &amp; Medicare PAC</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> FRIENDS OF RONNIE SHOWS  RT 2; BOX 228A-1  BASSFIELD MS 39421	<b>Purpose of Disbursement</b> Voided Check (House - MS - 4) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : 2000	<b>Date (month, day, year)</b> 09/29/2000	<b>Amount of Each Disbursement This Period</b> -1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> MATHESON FOR CONGRESS  677 SOUTH 200 WEST  SALT LAKE CITY UT 84101	<b>Purpose of Disbursement</b> Voided Check (House - UT - 2) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : 2000	<b>Date (month, day, year)</b> 09/29/2000	<b>Amount of Each Disbursement This Period</b> -1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> REGINA MONTOYA COGGINS FOR CONGRESS  6333 E MOCKINGBIRD; #147 BOX 945 DALLAS TX 75214	<b>Purpose of Disbursement</b> Voided Check (House - TX - ) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : 2000	<b>Date (month, day, year)</b> 09/29/2000	<b>Amount of Each Disbursement This Period</b> -500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> TOM ALLEN FOR CONGRESS COMMITTEE  c/o Lori LaFave 6282 Occoquan Forest Dr. Manassas VA 20112	<b>Purpose of Disbursement</b> Voided Check (House - ME - 1) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : 2000	<b>Date (month, day, year)</b> 09/29/2000	<b>Amount of Each Disbursement This Period</b> -500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> DOYLE FOR CONGRESS  P O BOX 17426  PITTSBURGH PA 15235	<b>Purpose of Disbursement</b> Voided Check (House - PA - 16) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : 2000	<b>Date (month, day, year)</b> 09/30/2000	<b>Amount of Each Disbursement This Period</b> -500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> ANDREWS FOR CONGRESS COMMITTEE  1105 CREEK ROAD  BELLMAWR NJ 08031	<b>Purpose of Disbursement</b> Voided Check (House - NJ - 1) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : 2000	<b>Date (month, day, year)</b> 09/30/2000	<b>Amount of Each Disbursement This Period</b> -500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> ANNA ESHOO FOR CONGRESS  c/o Pfeifer Associates 530 Howard St. #250 San Francisco CA 94105	<b>Purpose of Disbursement</b> Voided Check (House - CA - 14) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : 2000	<b>Date (month, day, year)</b> 09/30/2000	<b>Amount of Each Disbursement This Period</b> -500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> HOBSON FOR CONGRESS COMMITTEE  333 NORTH LIMESTONE STREET  SPRINGFIELD OH 45503	<b>Purpose of Disbursement</b> Voided Check (House - OH - 7) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : 2000	<b>Date (month, day, year)</b> 09/30/2000	<b>Amount of Each Disbursement This Period</b> -500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> ADAM SMITH FOR CONGRESS COMMITTEE  PO BOX 25345  FEDERAL WAY WA 98032	<b>Purpose of Disbursement</b> Voided Check (House - WA - 5) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : 2000	<b>Date (month, day, year)</b> 09/30/2000	<b>Amount of Each Disbursement This Period</b> -1000.00	
<b>SUBTOTALS</b> of Disbursements This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				