

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	1	2
		FOR LINE NUMBER
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NAME OF COMMITTEE (in Full)  
**American Dietetic Association Political Action Committee**

<p>A. Full Name, Mailing Address and Zip Code  <b>SPRATT FOR CONGRESS COMMITTEE</b>   <b>PO Box 2884</b>  <b>Washington, DC 20013</b></p>	<p>Purpose of Disbursement  <b>John M. Spratt, U.S. HOUSE 5th SC</b>                   Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (Specify) <b>1998</b></p>	<p>Date (Month day, Year)  <b>08/05/98</b></p>	<p>Amount of Each Disb. this Period  <b>500.00</b></p>
<p>B. Full Name, Mailing Address and Zip Code  <b>VIC SNYDER FOR CONGRESS COMMITTEE</b>   <b>PO Box 250998</b>  <b>Little Rock, AR 72225-0998</b></p>	<p>Purpose of Disbursement  <b>Vic Snyder, U.S. HOUSE 2nd AR</b>                   Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (Specify) <b>1998</b></p>	<p>Date (Month day, Year)  <b>08/05/98</b></p>	<p>Amount of Each Disb. this Period  <b>500.00</b></p>
<p>C. Full Name, Mailing Address and Zip Code  <b>CRANE FOR CONGRESS COMMITTEE</b>   <b>4451 Brookfield Corporate Drive, Suite 0</b>  <b>Chantilly, VA 20151-1652</b></p>	<p>Purpose of Disbursement  <b>Philip M. Crane, U.S. HOUSE 8th IL</b>                   Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (Specify) <b>1998</b></p>	<p>Date (Month day, Year)  <b>08/05/98</b></p>	<p>Amount of Each Disb. this Period  <b>1,000.00</b></p>
<p>D. Full Name, Mailing Address and Zip Code  <b>BOB KERREY FOR US SENATE COMM.</b>   <b>3412 P ST., NW</b>  <b>WASHINGTON, DC 20007</b></p>	<p>Purpose of Disbursement  <b>Bob Kerrey, U.S. SENATE NE</b>                   Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (Specify) <b>2000</b></p>	<p>Date (Month day, Year)  <b>08/05/98</b></p>	<p>Amount of Each Disb. this Period  <b>1,000.00</b></p>
<p>E. Full Name, Mailing Address and Zip Code  <b>HALL FOR CONGRESS</b>  <b>PO Box 711</b>  <b>Rockwall, TX 75087-0711</b></p>	<p>Purpose of Disbursement  <b>Ralph M. Hall, U.S. HOUSE 4th TX</b>                   Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (Specify) <b>1998</b></p>	<p>Date (Month day, Year)  <b>08/05/98</b></p>	<p>Amount of Each Disb. this Period  <b>500.00</b></p>
<p>F. Full Name, Mailing Address and Zip Code  <b>MISSOURIANS FOR K.F. BOND</b>  <b>507 Capitol Court, NE</b>  <b>#100</b>  <b>Washington, DC 20002</b></p>	<p>Purpose of Disbursement  <b>Christopher S. Bond, U.S. SENATE MO</b>                   Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (Specify) <b>1998</b></p>	<p>Date (Month day, Year)  <b>08/05/98</b></p>	<p>Amount of Each Disb. this Period  <b>1,000.00</b></p>
<p>G. Full Name, Mailing Address and Zip Code  <b>CITIZENS COMMITTEE FOR ERNEST F. HOLLINGS</b>  <b>PO Box 65271</b>  <b>Washington, DC 20035</b></p>	<p>Purpose of Disbursement  <b>Ernest F. Hollings, U.S. SENATE SC</b>                   Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (Specify) <b>1998</b></p>	<p>Date (Month day, Year)  <b>08/05/98</b></p>	<p>Amount of Each Disb. this Period  <b>1,000.00</b></p>
<p>H. Full Name, Mailing Address and Zip Code  <b>JIM RAMSTAD VOLUNTEER COMMITTEE</b>   <b>8100 Penn Avenue South</b>  <b>#104</b>  <b>Bloomington, MN 55431-1325</b></p>	<p>Purpose of Disbursement  <b>Jim Ramstad, U.S. HOUSE 3rd MN</b>                   Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (Specify) <b>1998</b></p>	<p>Date (Month day, Year)  <b>08/05/98</b></p>	<p>Amount of Each Disb. this Period  <b>500.00</b></p>
<p>I. Full Name, Mailing Address and Zip Code  <b>FRIENDS OF MELINDA KATZ</b>  <b>96-21 69th Avenue</b>  <b>Forest Hills, NY 11375</b></p>	<p>Purpose of Disbursement  <b>Melinda Katz, U.S. HOUSE 9th NY</b>                   Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (Specify) <b>1998</b></p>	<p>Date (Month day, Year)  <b>08/05/98</b></p>	<p>Amount of Each Disb. this Period  <b>500.00</b></p>

SUB TOTAL of Disbursements this page (Optional).....> **6,500.00**

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