

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)
NCR Corporation Citizenship Fund

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
The Tom Sawyer Committee P.O. Box 75214 Washington, DC 20013-5214	Tom Sawyer, U.S. HOUSE 14th OH Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	03/05/98	500.00
Mark Green for Congress P.O. Box 12571 Green Bay, WI 54307	Green, U.S. HOUSE 11th WI Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	03/15/98	1,000.00
98 Leadership PAC (Oxley) 515 King St, Suite 420 Alexandria, VA 22314	leadership pac Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	03/15/98	1,000.00
FRIENDS OF BOEHLERT COMMITTEE 20 STONE BRIDGE NEW HARTFORD, NY 13413	Sherwood Boehlert, U.S. HOUSE 23rd NY Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	03/17/98	500.00
CITIZENS FOR TONY HALL 3275 SOUTHDAL DRIVE KETERING, OH 45409	Tony P. Hall, U.S. HOUSE 3rd OH Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	03/23/98	500.00
CHRIS COX CONGRESSIONAL COMMITTEE 17 GUNNISON IRVINE, CA 92612	Christopher Cox, U.S. HOUSE 47th CA Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	03/24/98	500.00
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period
H. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period
I. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period

SUB TOTAL of Disbursements this page (Optional) > 4,000.00

TOTAL this Period (Last page this line number only) > 4,000.00