

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules 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)
National Federation of Business and Professional Women's Clubs, Inc., PAC

FEC ID No. C00119545

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Carnahan for Senate P.O. Box 4706 St. Louis, MO 63000	Cand Contr - MO-D-8 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/22/00	2,500.00
B. Full Name, Mailing Address and ZIP Code Friends of Lois Cappe P.O. Box 23940 Santa Barbara, CA 93121	Cand Contr - CA-D-22 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/22/00	1,000.00
C. Full Name, Mailing Address and ZIP Code Friends of Carolyn McCarthy P.O. Box 190 Mineola, NY 11501	Cand Contr - NY-D-4 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/22/00	500.00
D. Full Name, Mailing Address and ZIP Code Patsy Mink Camp. Cmte. 14300 Danhill Rd. Brandywine, MD 20612	Cand Contr - HI-D-2 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/22/00	500.00
E. Full Name, Mailing Address and ZIP Code Friends of Connie Morella 7101 Wisconsin Ave. #102 Bethesda, MD 20814	Cand Contr - MD-R-8 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/22/00	500.00
F. Full Name, Mailing Address and ZIP Code Cmte To Re-elect L. Sanchez 604 S. Harbor Blvd. Santa Ana, CA 92704	Cand Contr - CA-D-46 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/22/00	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 Disbursement 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 Disbursement 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 Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	5,500.00
TOTAL This Period (last page this line number only)	5,500.00