

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	
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NAME OF COMMITTEE (In Full)
 Metropolitan Life Insurance Company (MetLife) Employees' Political Participation Fund A

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of each Disbursement This Period
Fossella for Congress 1501 Lee Highway, Suite 201 Arlington, VA 22209	Vito Fossella-R-NY-13 U.S. Representative	6/24/99	\$1,000.00
	Disbursement For <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Reynolds for Congress P.O. Box 479 Victor, NY 14564	Tom Reynolds-R-NY-27 U.S. Representative	6/24/99	\$1,000.00
	Disbursement For <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Friends of John Boehner 7908 Cincinnati-Dayton Road West Chester, OH 45069	John Boehner-R-OH-8 U.S. Representative	6/24/99	\$1,000.00
	Disbursement For <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Friends of Don Sherwood 81 Warren Street Tunkhannock, PA 18657	Don Sherwood-R-PA-10 U.S. Representative	6/24/99	\$500.00
	Disbursement For <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Republican Senate Council c/o Lisa Reynolds 425 2 nd Street, NE Washington, DC 20002		6/24/99	\$5,000.00
	Disbursement For <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Lazio 2000 3 East Main Street Bay Shore, NY 11708	Rick Lazio-R-NY-2 U.S. Representative	6/28/99	\$2,000.00
	Disbursement For <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
G.			\$
	Disbursement For <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
H.			\$
	Disbursement For <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
I.			\$
	Disbursement For <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)	\$10,500.00
TOTAL This Period (last page this line number only)	\$54,820.00