

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)

CIVIC INVOLVEMENT PROGRAM/GENERAL MOTORS CORP.

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
CALIFORNIA STATE REPUBLICAN PARTY FEDERAL ACCOUNT 11180 SANTA MONICA BLVD. # 420 LOS ANGELES, CA 90025	NATIONAL POLITICAL PARTY CA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other:	08/22/00	2,500.00
B. Full Name, Mailing Address and ZIP Code GARY MILLER FOR CONGRESS COMMITTEE 721 SOUTH BREA CANYON ROAD SUITE 7 DIAMOND BAR, CA 91789	GARY MILLER U S HOUSE CA041 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other:	08/24/00	500.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other:	Date (month, day, year)	Amount of Each Disbursement this Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other:	Date (month, day, year)	Amount of Each Disbursement this Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other:	Date (month, day, year)	Amount of Each Disbursement this Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other:	Date (month, day, year)	Amount of Each Disbursement this Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other:	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 Other:	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 Other:	Date (month, day, year)	Amount of Each Disbursement this Period

SUBTOTAL of disbursements This Page (optional) 3,000.00