

**SCHEDULE B (FEC Form 9X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER (check only one)						PAGE	OF
<input type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25
<input type="checkbox"/>	29	<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	29

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NAME OF COMMITTEE (In Full)
Council of New Jersey Chiropractors

A.

Full Name (Last, First, Middle Initial)
Cardinale for Congress

Mailing Address
350 Madison Ave

City
Cresskill State
NJ Zip Code
07626

Purpose of Disbursement
Q11 Category Type

Candidate Name
Senator Cardinale

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
03 30 2003

Amount of Each Disbursement this Period
5000.00

B.

Full Name (Last, First, Middle Initial)
Valley National Bank

Mailing Address
328 Palisade Ave

City
Bohota State
NJ Zip Code
07603

Purpose of Disbursement
Q20 Category Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
03 20 2003

Amount of Each Disbursement this Period
443.12

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) **9431.12**

TOTAL This Period (last page this line number only) **9974.24**