

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER
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Contributions to Federal Candidates

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NAME OF COMMITTEE (in Full)

Effective Government Committee CD0190876

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Contribution (House-PA-15)	Date (month, day, year)	Amount of Each Disbursement This Period
Committee to Elect Ed O'Brien P.O. Box 447 Bethlehem, PA 18018-	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/31/2000	\$2,500.00
B. Full Name, Mailing Address and ZIP Code Goodnight for Congress P.O. Box 1184 Kokomo, IN 46903-	Purpose of Disbursement Contribution (House-IN-5) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/31/2000	\$2,500.00
C. Full Name, Mailing Address and ZIP Code Elaine Bloom for Congress 5255 Collins Avenue Miami, FL 33140-	Purpose of Disbursement Contribution (House-FL-22) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/29/2000	\$3,000.00
D. Full Name, Mailing Address and ZIP Code Stupak for Congress P.O. Box 143 Menominee, MI 49858-	Purpose of Disbursement Contribution (House-MI-1) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/02/2000	\$5,000.00
E. 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
F. 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
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)	\$13,000.00
TOTAL This Period (last page this line number only)	\$13,000.00