

SCHEDULE B

ITEMIZED DISBURSEMENTS

Contributions To Federal Candidates + Other Committees

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NAME OF COMMITTEE (In Full) **Italian American Democratic Leadership Council** ID NUMBER **000299396**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of George Miller 2000. Lee St #500 Alexandria, VA 22314	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/10/00	500 ⁻
DNC Federal Account 430 S. Capitol St WDC 20003	5/24 event tickets Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/18/00	500 ⁻
DCCC 430 S. Capitol St. WDC, 20003	6/5 event Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/18/00	1000 ⁻
DSCC 430 S. Capitol St. WDC 20003	5/16 event / membership Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/18/00	2500 ⁻
Florio for Senate 2014 Rte 22 East Scotch Plains, NJ 07076	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/18/00	1000 ⁻
Friends of Rosa Delaura 49 Huntington St. New Haven, CT 06511	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/25/00	1000 ⁻
Doyle for Congress 227 Mass Ave NE #101 WDC, 20002	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/4/00	500 ⁻
Pelosi for Congress 1 Bush St. 11th Floor San Francisco, CA 94104	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/28/00	1000 ⁻
L 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)	
TOTAL This Period (last page this line number only)	8000 ⁻