

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
The Goldman Sachs Group Inc PAC

Full Name (Last, First, Middle Initial) A. Committee to Re-Elect Vito Fossella		Transaction ID: 26799 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 3	
Mailing Address P.O. Box 131403		Amount of Each Disbursement this Period 4000.00	
City Staten Island State NY Zip Code 10313	Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 13 Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Category/Type			
Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Committee to Re-Elect Vito Fossella		Transaction ID: 26800 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 3	
Mailing Address P.O. Box 131403		Amount of Each Disbursement this Period 1000.00	
City Staten Island State NY Zip Code 10313	Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 13 Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Category/Type			
Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. AMERIPAC		Transaction ID: 26803 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 3	
Mailing Address 499 South Capitol Street, SW #108		Amount of Each Disbursement this Period 5000.00	
City Washington State DC Zip Code 20003	Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Category/Type			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Disbursements This Page (optional) ▶	10000.00
TOTAL This Period (last page this line number only) ▶