

**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)				PAGE 55 / 62			
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b		

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NAME OF COMMITTEE (In Full)
EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

Full Name (Last, First, Middle Initial) A. BOB BEAUPREZ FOR CONGRESS COMMITTEE		Transaction ID: EXP:B:107270 Date of Disbursement 04 / 04 / 2003	
Mailing Address P.O. BOX 501			
City WHEATRIDGE	State CO	Zip Code 80034	Amount of Each Disbursement this Period 500.00
Purpose of Disbursement		Category/ Type	
Candidate Name BOB BEAUPREZ			
Office Sought: <input checked="" type="checkbox"/> House Senate President State: CO District: D7	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. COMMITTEE TO ELECT GARY ACKERMAN		Transaction ID: EXP:B:114024 Date of Disbursement 04 / 14 / 2003	
Mailing Address P.O. BOX 15616, SOUTHEAST STATION			
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement		Category/ Type	
Candidate Name GARY ACKERMAN			
Office Sought: <input checked="" type="checkbox"/> House Senate President State: NY District: 5	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. CUBIN FOR CONGRESS		Transaction ID: EXP:B:114012 Date of Disbursement 04 / 14 / 2003	
Mailing Address P.O. BOX 4657			
City CASPER	State WY	Zip Code 82604	Amount of Each Disbursement this Period 500.00
Purpose of Disbursement		Category/ Type	
Candidate Name BARBARA CUBIN			
Office Sought: <input checked="" type="checkbox"/> House Senate President State: WY District: 01	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)	2000.00
TOTAL This Period (last page this line number only)	