SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)
Hotel Employees Restaurant Employees Int'l. Union TIP - To Insure Progress

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
A. Friends of Chris Dodd 203 C Street, NE Washington, D.C. 20002	Contribution to Chris Dodd Sen-CT (2,500) Disbursement for: [X] Primary [ ] General [ ] Other (specify)	5/14/97	2,500
B. Mike Thompson for Congress 1700 L Street Sacramento, CA 95814	Contribution to Mike Thompson CA-1 (1,000) Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	5/15/97	1,000
C. Friends of Jane Harman 236 Massachusetts Ave. NE Washington, D.C. 20002	Contribution to Jane Harman 36-CA 500 Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	5/15/97	500
D. Citizens for Joe Kennedy 233 Needham St. Boston, MA	Contribution to Joe Kennedy 8-MA 5,000 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	5/19/97	5,000
E. Citizens for Ron Klink PO Box 75214 Washington, D.C. 20013-5214	Contribution to Ron Klink 4-PA (1,000) Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	5/19/97	1,000
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	10,000
TOTAL This Period (last page this line number only)	25,000