

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 23

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**NAME OF COMMITTEE (In Full)**

Tele-Communications, Inc. PAC

A. 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
Emil Jones for Congress Box 642417 Chicago, IL 60664-2417		11/28/95	(1,000.00) (check lost)
B. Full Name, Mailing Address and ZIP Code Citizens for Rush PO Box 2884 Washington, DC- 20013		3/6/96	(500.00) (check lost)
C. Full Name, Mailing Address and ZIP Code Cox Congressional Committee PO Box 8088C Newport Beach, CA 92658		4/23/96	(1,000.00) (check lost)
D. Full Name, Mailing Address and ZIP Code Citizens for Hastert 27 North River Street Batavia, IL 60510		11/12/96	(500.00) (check lost)
E. Full Name, Mailing Address and ZIP Code Friends for Slade Gorton 14200 First Ave S #E217 Burien, WA 98168		6/11/97	(250.00) (check lost)
F. Full Name, Mailing Address and ZIP Code Abraham Senate 2000 1959 Groton Way East Lansing, MI 48823		12/7/98	1,000.00
G. Full Name, Mailing Address and ZIP Code			
H. Full Name, Mailing Address and ZIP Code			
I. Full Name, Mailing Address and ZIP Code			

**SUBTOTAL** of Disbursements This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

-2,250.00