

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)

Cooperative of American Physicians-Federal Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Congressman Elton Gallegly Congressional Club P.O. Box 3789 Simi Valley, CA 93093	Elton Gallegly CA-21 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 98	04-07-98	100.00
Bill Thomas Campaign Committee P.O. Box 395 Washington, DC 20026	Bill Thomas CA-21 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 98	04-22-98	1,000.00
Wally Berger For Congress Committee P.O. Box 40175 Washington, DC 20016	Wally Berger CA-2 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 98	04-22-98	500.00
Snowe For Senate P.O. Box 441 Portland, ME 04112	Olympia Snowe Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	04-30-98	1,000.00
Bill Thomas Campaign Committee P.O. Box 395 Washington, DC 20026	Bill Thomas CA-21 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 98	04-30-98	(500.00) ¹
Friends of Sherwood Boehlert 1212 Vernon Street Arlington, VA 22201	Sherwood Boehlert NY-23 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 98	04-30-98	(250.00) ²
1. Contribution originally issued 10-2-97; never cashed; voided	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
2. Contribution originally issued 10-23-97; never cashed; voided	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

1,850.00