

SCHEDULE B

ITEMIZED DISBURSEMENTS

Other Disbursements

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM
Date: 11/12/99
Time: 3:53

PAGE 1 OF 1
FOR LINE NUMBER 21

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NAME OF COMMITTEE (in Full)			
Committee to Reelect Congressman Chris Smith C09096412			
A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Brick Team Republican P.O. Box 902 Brick, NJ 08723	Nonfederal Contribution Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/09/1999	5,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Liceppi, Plannery Scaglione 104 Warren Avenue Bridgewater, NJ 08907	Nonfederal Contribution Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09/08/1999	1,000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends to Reelect Slattery & Richabaugh P.O. Box 1043 Jackson, NJ 08527	Nonfederal Contribution Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09/10/1999	500.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mike Pappas For Congress 3582 Route 22 West Scarsville, NJ 08876	Federal Campaign Contribution Mike Pappas U.S. Congress Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12/23/1999	1,000.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Susan Smith-Jackson Cancer Fund 43 High Pond Lane Bedminster, NJ 07921	Contribution Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/25/1999	500.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
SUBTOTAL of Disbursements This Page (optional)			8,000.00
TOTAL This Period (last page this line number only)			8,000.00

11/12/99 3:53 PM