CHEDULE B

# ITEMIZED DISBURSEMENTS

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

PAGE OF

FOR LINE NUMBER

formation copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial ses, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Federal Managers Association Political Action Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|---|---|
| JIM HANSEN COMMITTEE (UT-1)<br>P.O. BOX 654<br>FARMINGTON, UT 84025 | U.S. HOUSE<br>Disbursement for: ☐ Primary ☐ General ☐ Other (specify) | 06/16/00 | $375.00 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| MIKE THOMPSON FOR CONGRESS<br>P.O. BOX 1998 (CA-1)<br>ST. HELENA, CA 94574 | U.S. HOUSE<br>Disbursement for: ☐ Primary ☐ General ☐ Other (specify) | 06/16/00 | $100.00 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| JENNIFER CARROLL FOR CONGRESS<br>P.O. BOX 30322 (FOR FL-3)<br>JACKSONVILLE, FL 32230 | U.S. HOUSE<br>Disbursement for: ☐ Primary ☐ General ☐ Other (specify) | 06/26/00 | $1,000.00 |
| D. Full Name, Mailing Address and ZIP Code (FOR FL-4) | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| ANDREW CRENSHAW FOR CONGRESS<br>1 INDEPENDENT DR., STE. 100-184<br>JACKSONVILLE, FL 32202 | U.S. HOUSE<br>Disbursement for: ☐ Primary ☐ General ☐ Other (specify) | 06/26/00 | $1,000.00 |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: ☐ Primary ☐ General ☐ Other (specify) | | |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ Other (specify) | | |

UBTOTAL of Disbursements This Page (optional) ..... $2,475.00

OTAL This Period (last page this line number only) ..... $2,475.00