

**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)**

NATIONAL COURT REPORTERS 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
Goodlatte fo Congress c/o Hinaman & Co. 500 N. Washington St. #103 Alexandria, VA 22314	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/01/98	\$ 500.00
B. Full Name, Mailing Address and ZIP Code Steve Rothman For Congress 38 Ivy Street, SE Washington, DC 20003	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/15/98	500.00
C. Full Name, Mailing Address and ZIP Code Senate Victory Fund (for Thad Cochran) 507 Capitol Court, NE #100 Washington, DC 20002	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/12/98	1,000.00
D. Full Name, Mailing Address and ZIP Code Bob Barr for Congress 1212 North Vernon Street Arlington, VA 22201	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/12/98	500.00
E. Full Name, Mailing Address and ZIP Code The Senaenbrenner Committee P.O. Box 375 Brookfield, WI 53008-0575	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/23/98	500.00
F. Full Name, Mailing Address and ZIP Code Gallegly for Congress 4451 Brookfield Corp Drive, #200 Chantilly, VA 20151	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/23/98	500.00
G. Full Name, Mailing Address and ZIP Code Chabot for Congress 3333 Glenmore Avenue Cincinnati, OH 45211	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/23/98	500.00
H. 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
I. 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

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

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

\$ 4,000.00