

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)

The WSM List

A. Full Name, Mailing Address and ZIP Code SUE KELLY FOR HOUSE 187 Jay Street P. O. Box 599 Katonah, NY 10536	Purpose of Disbursement Unsolicited Direct Contribution: See Below Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	Date (month, day, year) 03/23/00	Amount of Each Disbursement This Period 25.00 (Memo Entry)
B. Full Name, Mailing Address and ZIP Code Above contribution earmarked by Mary Virginia Welles and transmitted by contributor's original check.	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
C. Full Name, Mailing Address and ZIP Code SUE KELLY FOR HOUSE 187 Jay Street P. O. Box 599 Katonah, NY 10536	Purpose of Disbursement Unsolicited Direct Contribution: See Below Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	Date (month, day, year) 03/28/00	Amount of Each Disbursement This Period 250.00 (Memo Entry)
D. Full Name, Mailing Address and ZIP Code Above contribution earmarked by Rosemarie Suntrack and transmitted by contributor's original check.	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
E. Full Name, Mailing Address and ZIP Code SUE KELLY FOR HOUSE 187 Jay Street P. O. Box 599 Katonah, NY 10536	Purpose of Disbursement Unsolicited Direct Contribution: See Below Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	Date (month, day, year) 03/28/00	Amount of Each Disbursement This Period 100.00 (Memo Entry)
F. Full Name, Mailing Address and ZIP Code Above contribution earmarked by Anna S. Jeffrey and transmitted by contributor's original check.	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
G. Full Name, Mailing Address and ZIP Code SUE KELLY FOR HOUSE 187 Jay Street P. O. Box 599 Katonah, NY 10536	Purpose of Disbursement Unsolicited Direct Contribution: See Below Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	Date (month, day, year) 03/30/00	Amount of Each Disbursement This Period 250.00 (Memo Entry)
H. Full Name, Mailing Address and ZIP Code Above contribution earmarked by Almeda C. Riley and transmitted by contributor's original check.	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 SUE KELLY FOR HOUSE 187 Jay Street P. O. Box 599 Katonah, NY 10536	Purpose of Disbursement Unsolicited Direct Contribution: See Below Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	Date (month, day, year) 03/30/00	Amount of Each Disbursement This Period 100.00 (Memo Entry)

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)