

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Other Disbursements

Use separate schedule(s)  
for each category of the  
Detailed Summary Page  
(01/01/98 - 03/31/98)

PAGE	OF
1	1
FOR LINE NUMBER	
21	

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NAME OF COMMITTEE (In Full)

SIKIRMAN FOR CONGRESS C00308742

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Location: House of Reps., CA Lois Capps Congress	Date (month, day, year)	Amount of Each Disbursement this Period
Lois Capps For Congress P.O. Box 23940 Santa Barbara, CA 93121	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02/24/98	1,500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Contribution Ralph White 44th Congressional	Date (month, day, year)	Amount of Each Disbursement this Period
Ralph White For Congress 44950 Las Palmas Avenue, Suite A Palm Desert, CA 92260	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/30/98	500.00
C. 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):		
D. 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):		
E. 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):		
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)

1,500.00

TOTAL This Period (last page this line number only)

1,500.00