

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

American Sleep Disorders Association Political Action Committee - (ASDA PAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Contribution to Rep. Gutknecht (R-1-MN) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
Gutknecht for Congress PO Box 6428 Rochester, MN 55903	Contribution to Candidate Tracy Beckman (D-1-MN) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-15-98	\$250.-
Friends of Tracy Beckman for Congress 146 West Bridge St. Owatonna, MN 55002	Contribution to Rep. Bilbray (R-49-CA) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-15-98	\$250.-
Bilbray for Congress attn: Karen Bilbray 970 Seacoast Drive, #7 Imperial Beach, CA 91932-2401	Contribution to Rep. Talent (R-2-MO) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-15-98	\$250.-
Talent for Congress 1031 Executive Plaza, Suite 100 St. Louis, MO 63141	Contribution to Rep. McDermott (D-7-WA) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-15-98	\$250.-
Friends for Jim McDermott PO Box 21786 Seattle, WA 98111-3786	Purpose of Disbursement 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 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 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 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)

\$1250.-

TOTAL This Period (last page this line number only)

\$3500.-