

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)

Metropolitan Life Insurance Company (MetLife) Employees' Political Participation Fund A

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of each Disbursement This Period
Matsui for Congress 555 Capitol Mall Suite 1425 Sacramento, CA 95814	Bob Matsui-D-CA5 U.S. Representative Disbursement For <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/25/99	\$ 1,100.00
B. Full Name, Mailing Address and ZIP Code Ben Cardin for Congress Committee 38 Ivy Street, SE Washington, DC 20003	Ben Cardin-D-MD3 U.S. Representative Disbursement For <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/25/99	\$ 4,000.00
C. Full Name, Mailing Address and ZIP Code Friends of Carolyn McCarthy 38 Ivy Street, SE Washington, DC 20003	Carolyn McCarthy-D-NY4 U.S. Representative Disbursement For <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/25/99	\$ 500.00
D. Full Name, Mailing Address and ZIP Code Sensenbrenner Committee P.O. Box 575 Brookfield, WI 53008	James Sensenbrenner-R-WI9 U.S. Representative Disbursement For <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/25/99	\$ 500.00
E. Full Name, Mailing Address and ZIP Code Friends of Sherwood Boehlert 1212 North Vernon Street Arlington, VA 22201	Sherwood Boehlert-R-NY23 U.S. Representative Disbursement For <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/25/99	\$ 1,000.00
F. Full Name, Mailing Address and ZIP Code Citizens for Tom Petri P.O. Box 270 Fond du Lac, WI 54931	Tom Petri-R-WI6 U.S. Representative Disbursement For <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/25/99	\$ 500.00
G. Full Name, Mailing Address and ZIP Code Ellen Truscher for Congress 503 Capitol Court, NE Suite 100 Washington, DC 20002	Ellen Truscher-D-CA10 U.S. Representative Disbursement For <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/25/99	\$ 500.00
H. Full Name, Mailing Address and ZIP Code Friends of Patrick Kennedy 430 South Capitol Street Washington, DC 20003	Patrick Kennedy-D-RI1 U.S. Representative Disbursement For <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/25/99	\$ 125.00
I. Full Name, Mailing Address and ZIP Code LIPAC C/o Texas Association of Life and Health Insurers 720 Brazos Street, #202 Austin, TX 78701	Purpose of Disbursement Disbursement For <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/25/99	\$ 1,500.00
SUBTOTAL of Disbursements This Page (optional)			\$ 9,625.00
TOTAL This Period (last page this line number only)			