

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 21

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NAME OF COMMITTEE (in full)

COMMITTEE FOR SAM GIBBONS

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
FRIENDS OF CLAY SHAW PO Box 2188 FT LAUDERDALE, FL 33321	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/22/00	500.00
B. Full Name, Mailing Address and ZIP Code DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE 430 S. CAPITOL ST. RND FL WASH D.C. 20003	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/29/00	1000.00
C. Full Name, Mailing Address and ZIP Code NELSON FOR SENATE 110-B EAST BROAD ST. FALLS CHURCH, VA. 22046	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/6/00	1000.00
D. Full Name, Mailing Address and ZIP Code HOYER FOR CONGRESS 1905 MALCOLM ROAD, STE 102 CLINTON, MD 20735	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/13/00	1000.00
E. Full Name, Mailing Address and ZIP Code FRIENDS OF CORRINE BROWN 420 NEW JERSEY AVE. S.E. WASH D.C. 20003	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/13/00	1000.00
F. Full Name, Mailing Address and ZIP Code BEN CARDIN FOR CONGRESS 38 144 ST S.E. WASH D.C. 20003	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/19/00	500.00
G. Full Name, Mailing Address and ZIP Code LEVIN FOR CONGRESS 436 NEW JERSEY AVE S.E. WASH D.C. 20003	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/13/00	500.00
H. Full Name, Mailing Address and ZIP Code GOLD LEAF STUDIOS REAR 1523 22ND ST. NW WASH D.C. 20037	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6/26/00	Amount of Each Disbursement This Period 2,346.47
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

Forms of past and present titles, submitted to the U.S. Government. Name will belong to the University of South Florida Library, Special Collections, should it become surplus to the needs of the U.S. Government.

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

7846.47