SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
Allied Grape Growers PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Radanovich for Congress Fresno, California	contribution Disbursement for: Primary General Other (specify)	4/3/98	$200
B. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Dooley for Congress Visalia, CA	contribution Disbursement for: Primary General Other (specify)	4/2/98	$500
C. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Mike Thompson for Congress P.O. Box 1998 St. Helena, CA 94574	contribution Disbursement for: Primary General Other (specify)	6/22/98	$500
D. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Condit for Congress 44 Canal Center Plaza #400 Alexandria, VA 22314	contribution Disbursement for: Primary General Other (specify)	6/22/98	$200
E. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Dooley for Congress Visalia, CA	in kind contribution Disbursement for: Primary General Other (specify)	5/8/98	$424.71
F. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Allied Grape Grower State PAC 3475 W. Shaw #103 Fresno, CA 93711	contribution Disbursement for: Primary General Other (specify)	4/3/98	$700.00
G. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: Primary General 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: Primary General 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: Primary General Other (specify)		

SUBTOTAL of Disbursements This Page (optional) 2,524.71

TOTAL This Period (last page this line number only) 2,524.71

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