

SCHEDULE B

ITEMIZED DISBURSEMENTS

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (In full)			
UFCW ACTIVE BALLOT CLUB			
A. Full Name, Mailing Address and ZIP Code BERKLEY FOR CONGRESS 7432 SILVER PALM COURT LAS VEGAS NV 89117	Purpose of Disbursement CONTRIBUTION N(02) - C.O. # 01	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1998	12-02-97	1,000.00
B. Full Name, Mailing Address and ZIP Code BERKLEY FOR CONGRESS 7432 SILVER PALM COURT LAS VEGAS NV 89117	Purpose of Disbursement CONTRIBUTION N(02) - C.O. # 01	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1998	12-02-97	1,000.00
C. Full Name, Mailing Address and ZIP Code ELLEN TAUSCHER FOR CONGRESS POST OFFICE BOX 2889 DANVILLE CA 94526	Purpose of Disbursement CONTRIBUTION C(02) - C.O. # 10	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1998	12-02-97	2,500.00-
D. Full Name, Mailing Address and ZIP Code ELLEN TAUSCHER FOR CONGRESS POST OFFICE BOX 2889 DANVILLE CA 94526	Purpose of Disbursement CONTRIBUTION C(02) - C.O. # 10	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1998	12-02-97	2,500.00-
E. Full Name, Mailing Address and ZIP Code KILDEE FOR CONGRESS P.O. BOX 317 FLINT MI 48501	Purpose of Disbursement CONTRIBUTION N(02) - C.O. # 09	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1998	12-02-97	2,500.00
F. Full Name, Mailing Address and ZIP Code MASCARA FOR CONGRESS PO BOX 1109 WASHINGTON PA 15301	Purpose of Disbursement CONTRIBUTION P(02) - C.O. # 20	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1998	12-02-97	500.00
G. Full Name, Mailing Address and ZIP Code MASCARA FOR CONGRESS PO BOX 1109 WASHINGTON PA 15301	Purpose of Disbursement CONTRIBUTION P(02) - C.O. # 20	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1998	12-02-97	500.00
H. Full Name, Mailing Address and ZIP Code RALPH NEAS FOR CONGRESS POST OFFICE BOX 70744 CHEVY CHASE MD 20813	Purpose of Disbursement CONTRIBUTION N(02) - C.O. # 08	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1998	12-02-97	250.00
I. Full Name, Mailing Address and ZIP Code CAROL MOSELEY-BRAUN FOR SENATE 201 N. WELLS STREET CHICAGO IL 60606	Purpose of Disbursement CONTRIBUTION US SENATE - IL	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1998	12-03-97	2,000.00
SUBTOTAL of Disbursements This Page (optional)			2,750.00
TOTAL This Period (fill page this line number only)			