

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 3 OF 3
FOR LINE NUMBER 21

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NAME OF COMMITTEE (In Full)
The Billy Tauzin Committee

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Shelly Moore Capito P.O. Box 11519 Charleston, WV 25339-	Donation Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/02/1999	2,000.00
Tom Trancredi for P.O. Box 3756 Littleton, CO 80161-	Donation Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/02/1999	2,000.00
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SUBTOTAL of Disbursements This Page (optional)	4,000.00
TOTAL This Period (last page this line number only)	26,000.00