# SCHEDULE B (FEC Form 3X)
## ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b



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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

**A.**
Full Name (Last, First, Middle Initial): Keep Our Majority PAC
Mailing Address: PO Box 422
City: Yorkville State: IL Zip Code: 60650
Purpose of Disbursement:
Candidate Name:
Category/Type: 011
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 22491904
Date of Disbursement: 07 / 22 / 2005
Amount of Each Disbursement this Period: 3000.00

**B.**
Full Name (Last, First, Middle Initial): Friends of Lois Capps
Mailing Address: 38 Ivy Street SE
City: Washington State: DC Zip Code: 20003
Purpose of Disbursement:
Candidate Name: Ms. Lois Capps
Category/Type: 011
Office Sought: X House / Senate / President
State: CA District: 22
Disbursement For: 2006 X Primary / General / Other (specify)
Transaction ID: 22491903
Date of Disbursement: 07 / 22 / 2005
Amount of Each Disbursement this Period: 1000.00

**C.**
Full Name (Last, First, Middle Initial): Friends of Craig Thomas
Mailing Address: P.O. 7Box s1580 302 Hart SOB
City: Casper State: WY Zip Code: 82602
Purpose of Disbursement:
Candidate Name: Mr. Craig Thomas
Category/Type: 011
Office Sought: House / X Senate / President
State: WY District: 2
Disbursement For: 2006 X Primary / General / Other (specify)
Transaction ID: 22491905
Date of Disbursement: 07 / 22 / 2005
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **5000.00**

TOTAL This Period (last page this line number only) ..... ▶