

**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)

PAGE 19 / 37

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Institute of Certified Public Accountants Political Action Committee

A.	Full Name (Last, First, Middle Initial) Synergy PAC <hr/> Mailing Address 6849 Ood Dominion Dr., Suite 222 <hr/> City McLean State VA Zip Code 22101 <hr/> Purpose of Disbursement 011 Candidate Name Synergy PAC Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 27982692 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 8	Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">5000.00</div>
B.	Full Name (Last, First, Middle Initial) Buck Mckeon For Congress <hr/> Mailing Address 23942 Lyons Ave #105 <hr/> City Santa Clarita State CA Zip Code 91321 <hr/> Purpose of Disbursement 011 Candidate Name Rep. Howard P. McKeon Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 25	Transaction ID: 27982844 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 8	Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">1000.00</div>
C.	Full Name (Last, First, Middle Initial) Alexander For Senate Inc <hr/> Mailing Address PO Box 121919 <hr/> City Nashville State TN Zip Code 37212 <hr/> Purpose of Disbursement 011 Candidate Name Mr. Lamar Alexander Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TN District:	Transaction ID: 27986110 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 3 / 2 0 0 8	Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">2000.00</div>

SUBTOTAL of Disbursements This Page (optional)	<div style="border: 1px solid black; padding: 5px;">8000.00</div>
TOTAL This Period (last page this line number only)	<div style="border: 1px solid black; padding: 5px; height: 20px;"></div>