

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

ARAB AMERICAN LEADERSHIP COUNCIL PAC

ADDRESS (number and street)

1600 K STREET NW SUITE 601

☐ Check if different than previously reported. (ACC)

WASHINGTON

DC

20006

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00194225

3. IS THIS
REPORT☐NEW
(N)

OR

☒AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☒ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Dr. James Zogby

Signature of Treasurer

Dr. James Zogby

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

ARAB AMERICAN LEADERSHIP COUNCIL PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y 07 / 01 / 2014 To: M M / D D / Y Y Y Y Y 09 / 30 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2014		2656.29
(b) Cash on Hand at Beginning of Reporting Period.....	1406.03	
(c) Total Receipts (from Line 19)	41.00	251.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1447.03	2907.29
7. Total Disbursements (from Line 31)	225.71	1685.97
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1221.32	1221.32
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	6930.77	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

ARAB AMERICAN LEADERSHIP COUNCIL PAC

Report Covering the Period:

From:

M M / D D / Y Y Y Y
07 01 2014

To:

M M / D D / Y Y Y Y
09 30 2014
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

0.00

0.00

(ii) Unitemized

0.00

200.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

0.00

200.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ▶

0.00

200.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

10.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

41.00

41.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)) ▶

41.00

251.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

41.00

251.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	112.89	468.08
(ii) Non-Federal Share.....	112.82	467.89
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	225.71	935.97
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	750.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	225.71	1685.97
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	112.89	1218.08

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	200.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	200.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	112.89	468.08
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	112.89	468.08

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 6 OF 15

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4333

ARAB AMERICAN LEADERSHIP COUNCIL PAC**LOAN SOURCE** Full Name (Last, First, Middle Initial)

Arab American Institute

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 1600 K St, NW
Suite 601

City Washington

State DC

ZIP Code 20006

Original Amount of Loan

1000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1000.00

TERMS

Date Incurred

M M M / D D D / Y Y Y Y Y Y
05 31 2013

Date Due

M M M / D D D / Y Y Y Y Y Y
12/31/2013

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

1000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 7 OF 15

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4422

ARAB AMERICAN LEADERSHIP COUNCIL PAC**LOAN SOURCE** Full Name (Last, First, Middle Initial)

Arab American Institute

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 1600 K St, NW
Suite 601

City Washington State DC ZIP Code 20006

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

10.00

0.00

10.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
03 / 31 / 2014M M / D D / Y Y Y Y
/ / 4/30

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

10.00

TOTALS This Period (last page in this line only)..... ►

1010.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 8 OF 15

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

ARAB AMERICAN LEADERSHIP COUNCIL PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Arab American Institute

Nature of Debt (Purpose):

Use Of Equipment and Supplies

Mailing Address 1600 K St, NW
Suite 601City State Zip Code
Washington DC 20006

Outstanding Balance Beginning This Period

5869.77

Transaction ID : SD10.4136

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5869.77

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Arab American Institute

Nature of Debt (Purpose):

Testing Merchant Terminal

Mailing Address 1600 K St, NW
Suite 601City State Zip Code
Washington DC 20006

Outstanding Balance Beginning This Period

10.00

Transaction ID : SD10.4421

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

First Last

Nature of Debt (Purpose):

Fraudulent Transactions

Mailing Address 56 Testville Dr.

City State Zip Code
Testville MS 39401

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4459

Amount Incurred This Period

20.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

20.00

1) SUBTOTALS This Period This Page (optional)..... ►

5899.77

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 9 OF 15

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

ARAB AMERICAN LEADERSHIP COUNCIL PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

First Last

Nature of Debt (Purpose):
Fraudulent Transaction

Mailing Address 56 Testville Dr.

City State

Zip Code

Testville

MS

39401

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4460

Amount Incurred This Period

5.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

First Last

Nature of Debt (Purpose):
Fraudulent Transaction

Mailing Address 56 Testville Dr.

City State

Zip Code

Testville

MS

39401

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4461

Amount Incurred This Period

5.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

First Last

Nature of Debt (Purpose):
Fraudulent Transaction

Mailing Address 56 Testville Dr.

City

State

Zip Code

Testville

MS

39401

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4462

Amount Incurred This Period

10.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10.00

1) SUBTOTALS This Period This Page (optional)..... ►

20.00

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 10 OF 15

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

ARAB AMERICAN LEADERSHIP COUNCIL PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

First Last

Nature of Debt (Purpose):
Fraudulent Transaction

Mailing Address 56 Testville Dr.

City State

Zip Code

Testville

MS

39401

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4463

Amount Incurred This Period

1.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ►

1.00

2) TOTALS This Period (last page this line number only)..... ►

5920.77

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

1010.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

6930.77

SCHEDULE H1 (FEC Form 3X)**METHOD OF ALLOCATION FOR:**

- **ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)** (Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)

ARAB AMERICAN LEADERSHIP COUNCIL PAC

Transaction ID : H1.4465

USE ONLY ONE SECTION, A or B**A. State and Local Party Committees****Fixed Percentage (select one)**

_____ Presidential-Only Election Year (28% Federal)

_____ Presidential and Senate Election Year (36% Federal)

_____ Senate-Only Election Year (21% Federal)

_____ Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees**Flat Minimum Federal Percentage**

If the committee will allocate using the flat minimum percentage of 50% federal funds, check ☒

or

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... %Nonfederal %

This ratio applies to (check all that apply):

Administrative ☒ Generic Voter Drive ☐ Public Communications Referencing Party Only ☐

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 12 OF 15

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

ARAB AMERICAN LEADERSHIP COUNCIL PAC

A. Full Name (Last, First, Middle Initial) American Express		Transaction ID : H4.4441		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 53852					
City Pheonix	State AZ	Zip Code 85072			
Purpose of Disbursement: Merchant Fees		001 Category/ Type		Allocated Activity or Event Year-To-Date 718.21	
Activity or Event Identifier: Administrative				Date 07 / 02 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
3.98			3.97		7.95

B. Full Name (Last, First, Middle Initial) NPC		Transaction ID : H4.4442		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 5100 Interchange Way					
City Louisville	State KY	Zip Code 40229			
Purpose of Disbursement: Merchant Fees		001 Category/ Type		Allocated Activity or Event Year-To-Date 743.16	
Activity or Event Identifier: Administrative				Date 07 / 08 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
12.48			12.47		24.95

C. Full Name (Last, First, Middle Initial) iTransact		Transaction ID : H4.4443		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 999 314 South 200 West					
City Farmington	State UT	Zip Code 84025			
Purpose of Disbursement: Processing Charges		001 Category/ Type		Allocated Activity or Event Year-To-Date 768.11	
Activity or Event Identifier: Administrative				Date 07 / 10 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
12.48			12.47		24.95

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
28.94		28.91		57.85

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 13 OF 15

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

ARAB AMERICAN LEADERSHIP COUNCIL PAC

A. Full Name (Last, First, Middle Initial) Bank of America		Transaction ID : H4.4444		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 888 17th St. NW					
City Washington	State DC	Zip Code 20006			
Purpose of Disbursement: Monthly Service Fee		001		Allocated Activity or Event Year-To-Date 783.11	
Activity or Event Identifier: Administrative		Category/ Type		Date 07 / 31 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
7.50			7.50		15.00

B. Full Name (Last, First, Middle Initial) American Express		Transaction ID : H4.4445		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 53852					
City Pheonix	State AZ	Zip Code 85072			
Purpose of Disbursement: Merchant Fee		001		Allocated Activity or Event Year-To-Date 791.06	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 05 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
3.98			3.97		7.95

C. Full Name (Last, First, Middle Initial) NPC		Transaction ID : H4.4446		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 5100 Interchange Way					
City Louisville	State KY	Zip Code 40229			
Purpose of Disbursement: Merchant Fees		001		Allocated Activity or Event Year-To-Date 816.13	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 05 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
12.54			12.53		25.07

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.02		24.00		48.02

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 14 OF 15

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

ARAB AMERICAN LEADERSHIP COUNCIL PAC

A. Full Name (Last, First, Middle Initial) iTransact		Transaction ID : H4.4447		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 999 314 South 200 West				Allocated Activity or Event Year-To-Date 841.28	
City Farmington	State UT	Zip Code 84025		Date MM / DD / YYYY 08 / 11 / 2014	
Purpose of Disbursement: Processing Charges		001			
Activity or Event Identifier: Administrative		Category/ Type			
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.57			12.58		25.15

B. Full Name (Last, First, Middle Initial) Bank of America		Transaction ID : H4.4448		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 888 17th St. NW				Allocated Activity or Event Year-To-Date 856.28	
City Washington	State DC	Zip Code 20006		Date MM / DD / YYYY 08 / 31 / 2014	
Purpose of Disbursement: Monthly Service Charge		001			
Activity or Event Identifier: Administrative		Category/ Type			
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.50			7.50		15.00

C. Full Name (Last, First, Middle Initial) American Express		Transaction ID : H4.4449		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 53852				Allocated Activity or Event Year-To-Date 864.23	
City Pheonix	State AZ	Zip Code 85072		Date MM / DD / YYYY 09 / 02 / 2014	
Purpose of Disbursement: Merchant Fee		001			
Activity or Event Identifier: Administrative		Category/ Type			
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.98			3.97		7.95

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.05		24.05		48.10

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 15 OF 15

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

ARAB AMERICAN LEADERSHIP COUNCIL PAC

A. Full Name (Last, First, Middle Initial) NPC		Transaction ID : H4.4450		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 5100 Interchange Way					
City Louisville	State KY	Zip Code 40229			
Purpose of Disbursement: Merchant Fees		001 Category/ Type		Allocated Activity or Event Year-To-Date 894.62	
Activity or Event Identifier: Administrative				Date 09 / 08 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
15.20			15.19		30.39

B. Full Name (Last, First, Middle Initial) iTransact		Transaction ID : H4.4451		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 999 314 South 200 West					
City Farmington	State UT	Zip Code 84025			
Purpose of Disbursement: Processing Charges		001 Category/ Type		Allocated Activity or Event Year-To-Date 920.97	
Activity or Event Identifier: Administrative				Date 09 / 10 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
13.18			13.17		26.35

C. Full Name (Last, First, Middle Initial) Bank of America		Transaction ID : H4.4452		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 888 17th St. NW					
City Washington	State DC	Zip Code 20006			
Purpose of Disbursement: Monthly Service Charge		001 Category/ Type		Allocated Activity or Event Year-To-Date 935.97	
Activity or Event Identifier: Administrative				Date 09 / 30 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
7.50			7.50		15.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
35.88		35.86		71.74

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
112.89	112.82	225.71