

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

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

American Dream PAC

ADDRESS (number and street)

P. O. Box 171022

☐Check if different
than previously
reported. (ACC)

San Antonio

TX

78217

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00331744

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
Quarterly 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)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

07

01

2003

through

12

31

2003

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

Cindy Barberio Payne

Signature of Treasurer

Electronically Filed by Cindy Barberio Payne

Date

06

30

2006

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. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
American Dream PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	3

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	3

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2003		14013.53
(b) Cash on Hand at Beginning of Reporting Period	9611.98	
(c) Total Receipts (from Line 19)	43100.00	48200.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	52711.98	62213.53
7. Total Disbursements (from Line 31)	22964.86	32466.41
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	29747.12	29747.12
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)	0.00	

☒ 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. 02/2003)

Page 3

Write or Type Committee Name
American Dream PAC

Report Covering the Period:

From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	3

To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	3

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	25100.00	25100.00
(i) Itemized (use Schedule A)	0.00	100.00
(ii) Unitemized	25100.00	25200.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	0.00	0.00
(b) Political Party Committees	18000.00	23000.00
(c) Other Political Committees (such as PACs)	43100.00	48200.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➡		
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
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.)	0.00	0.00
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 Transfer (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))	43100.00	48200.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	43100.00	48200.00

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) Shared Federal/Non-Federal Activity (from Schedule H4)		0.00	0.00
(i) Federal Share.....			
(ii) Non-Federal Share.....		0.00	0.00
(b) Other Federal Operating Expenditures.....		21964.86	31466.41
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....		21964.86	31466.41
22. Transfers to Affiliated/Other Party Committees.....		0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		1000.00	1000.00
24. Independent Expenditure (use Schedule E)		0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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) Shared 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))..		22964.86	32466.41
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....		22964.86	32466.41

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)	43100.00	48200.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	43100.00	48200.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	21964.86	31466.41
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	21964.86	31466.41

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Dream PAC

A. Full Name (Last, First, Middle Initial) Mrs. Alegre Falic		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 3 / 2 0 0 3	
Mailing Address 19495 Biscayne Boulevard Suite 300		Transaction ID: SA11A1.5431	
City Miami	State FL	Zip Code 33180	Amount of Each Receipt this Period 3350.00
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Homemaker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3350.00	
B. Full Name (Last, First, Middle Initial) Mrs. Debbie Falic		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 3 / 2 0 0 3	
Mailing Address 19495 Biscayne Boulevard Suite 300		Transaction ID: SA11A1.5427	
City Miami	State FL	Zip Code 33180	Amount of Each Receipt this Period 3350.00
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Homemaker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3350.00	
C. Full Name (Last, First, Middle Initial) Mrs. Jana Falic		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 3 / 2 0 0 3	
Mailing Address 19495 Biscayne Boulevard Suite 300		Transaction ID: SA11A1.5423	
City Miami	State FL	Zip Code 33180	Amount of Each Receipt this Period 3350.00
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Homemaker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3350.00	

SUBTOTAL of Receipts This Page (optional)

10050.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 7 / 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Dream PAC

A. Full Name (Last, First, Middle Initial) Mr. Jerome Falic		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 3 / 2 0 0 3	
Mailing Address 19495 Biscayne Boulevard Suite 300		Transaction ID: SA11A1.5425	
City State Zip Code Miami FL 33180	Amount of Each Receipt this Period 3350.00		
FEC ID number of contributing federal political committee. C			
Name of Employer DFA, Inc.	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3350.00		
B. Full Name (Last, First, Middle Initial) Mr. Leon Falic		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 3 / 2 0 0 3	
Mailing Address 19495 Biscayne Boulevard Suite 300		Transaction ID: SA11A1.5429	
City State Zip Code Miami FL 33180	Amount of Each Receipt this Period 3350.00		
FEC ID number of contributing federal political committee. C			
Name of Employer DFA, Inc.	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3350.00		
C. Full Name (Last, First, Middle Initial) Mr. Simon Falic		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 3 / 2 0 0 3	
Mailing Address 19495 Biscayne Boulevard Suite 300		Transaction ID: SA11A1.5421	
City State Zip Code Miami FL 33180	Amount of Each Receipt this Period 3350.00		
FEC ID number of contributing federal political committee. C			
Name of Employer DFA, Inc.	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3350.00		

SUBTOTAL of Receipts This Page (optional)

10050.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 8 / 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Dream PAC

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

Mrs. Doyleene Perry

Mailing Address 18630 Barbuda Lane

City State Zip Code
Houston TX 77058

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 4 / 2 0 0 3

Transaction ID: SA11A1.5395

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

25100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Dream PAC

Full Name (Last, First, Middle Initial)

A. American Meat Institute Political Action Committee

Mailing Address 1700 North Moore Street
Suite 1600

City State Zip Code
Arlington VA 22209

FEC ID number of contributing
federal political committee.

C C00024281

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 3

Transaction ID: SA11C.5435

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Deloitte & Touche Federal Political Action Committee

Mailing Address P. O. Box 365

City State Zip Code
Washington DC 20044

FEC ID number of contributing
federal political committee.

C C00211318

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 4 / 2 0 0 3

Transaction ID: SA11C.5437

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

C. SBC Communications, Inc. Employee Federal Political Action Committee (SBC EMPAC)

Mailing Address 175 E. Houston 7-A-50

City State Zip Code
San Antonio TX 78205

FEC ID number of contributing
federal political committee.

C C00109017

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 8 / 2 0 0 3

Transaction ID: SA11C.5404

Amount of Each Receipt this Period

3000.00

SUBTOTAL of Receipts This Page (optional)

13000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 10 / 17

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Dream PAC

Full Name (Last, First, Middle Initial)

A. Valero Energy Corporation Political Action Committee

Mailing Address P. O. Box 696000

City

San Antonio

State

TX

Zip Code

78269

FEC ID number of contributing
federal political committee.

C C00109546

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 5 / 2 0 0 3

Transaction ID: SA11C.5405

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

18000.00

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 11 / 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 Dream PAC

Full Name (Last, First, Middle Initial)

A. Dallas National Bank

Mailing Address P. O. Box 223809

City Dallas State TX Zip Code 75222-3809

Purpose of Disbursement

Bank Charge

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.5399

Date of Disbursement

07 / 11 / 2003

Amount of Each Disbursement this Period

23.11

Full Name (Last, First, Middle Initial)

B. Dallas National Bank

Mailing Address P. O. Box 223809

City Dallas State TX Zip Code 75222-3809

Purpose of Disbursement

Bank Charge

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.5407

Date of Disbursement

08 / 12 / 2003

Amount of Each Disbursement this Period

23.39

Full Name (Last, First, Middle Initial)

C. Dallas National Bank

Mailing Address P. O. Box 223809

City Dallas State TX Zip Code 75222-3809

Purpose of Disbursement

Bank Charge

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.5409

Date of Disbursement

09 / 24 / 2003

Amount of Each Disbursement this Period

22.87

SUBTOTAL of Disbursements This Page (optional)

69.37

TOTAL This Period (last page this line number only)

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 12 / 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 Dream PAC

Full Name (Last, First, Middle Initial)

A. Dallas National Bank

Mailing Address P. O. Box 223809

City Dallas State TX Zip Code 75222-3809

Purpose of Disbursement

Bank Charge

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.5414

Date of Disbursement

10 / 29 / 2003

Amount of Each Disbursement this Period

20.88

Full Name (Last, First, Middle Initial)

B. Dallas National Bank

Mailing Address P. O. Box 223809

City Dallas State TX Zip Code 75222-3809

Purpose of Disbursement

Bank Charge

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.5438

Date of Disbursement

11 / 25 / 2003

Amount of Each Disbursement this Period

16.21

Full Name (Last, First, Middle Initial)

C. Dallas National Bank

Mailing Address P. O. Box 223809

City Dallas State TX Zip Code 75222-3809

Purpose of Disbursement

Bank Charge

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.5440

Date of Disbursement

12 / 24 / 2003

Amount of Each Disbursement this Period

8.05

SUBTOTAL of Disbursements This Page (optional)

45.14

TOTAL This Period (last page this line number only)

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 13 / 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 Dream PAC

Full Name (Last, First, Middle Initial)

A. Dallas National Bank Card Services

Mailing Address P. O. Box 30131

City Tampa State FL Zip Code 33630-3131

Purpose of Disbursement
Office Supplies/Equipment

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.5402

Date of Disbursement

07 / 08 / 2003

Amount of Each Disbursement this Period

523.00

Full Name (Last, First, Middle Initial)

B. Dallas National Bank Card Services

Mailing Address P. O. Box 30131

City Tampa State FL Zip Code 33630-3131

Purpose of Disbursement
Office Supplies

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.5408

Date of Disbursement

08 / 12 / 2003

Amount of Each Disbursement this Period

239.00

Full Name (Last, First, Middle Initial)

C. Dallas National Bank Card Services

Mailing Address P. O. Box 30131

City Tampa State FL Zip Code 33630-3131

Purpose of Disbursement
Office Supplies/Equipment/Postage

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.5410

Date of Disbursement

09 / 07 / 2003

Amount of Each Disbursement this Period

479.00

SUBTOTAL of Disbursements This Page (optional)

1241.00

TOTAL This Period (last page this line number only)

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)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 Dream PAC

Full Name (Last, First, Middle Initial)

A. Dallas National Bank Card Services

Mailing Address P. O. Box 30131

City Tampa State FL Zip Code 33630-3131

Purpose of Disbursement
Office Supplies/Equipment/Travel

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.5413

Date of Disbursement

09 / 30 / 2003

Amount of Each Disbursement this Period

220.00

Full Name (Last, First, Middle Initial)

B. Dallas National Bank Card Services

Mailing Address P. O. Box 30131

City Tampa State FL Zip Code 33630-3131

Purpose of Disbursement
Office Supplies/Equipment/Postage

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.5441

Date of Disbursement

12 / 01 / 2003

Amount of Each Disbursement this Period

431.00

Full Name (Last, First, Middle Initial)

C. Pierre Hotel

Mailing Address 2 East 61st Street

City New York State NY Zip Code 10021

Purpose of Disbursement
Convention Expense Advance

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.5418

Date of Disbursement

10 / 29 / 2003

Amount of Each Disbursement this Period

7785.51

SUBTOTAL of Disbursements This Page (optional)

8436.51

TOTAL This Period (last page this line number only)

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)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 Dream PAC

Full Name (Last, First, Middle Initial)

A. Wiley, Rein & Fielding

Mailing Address 1776 K Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Consultant Expense/Legal

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.5401

Date of Disbursement

07 / 08 / 2003

Amount of Each Disbursement this Period

6500.00

Full Name (Last, First, Middle Initial)

B. Wiley, Rein & Fielding

Mailing Address 1776 K Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Consultant Expense/Legal

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.5412

Date of Disbursement

09 / 30 / 2003

Amount of Each Disbursement this Period

1104.26

Full Name (Last, First, Middle Initial)

C. Wiley, Rein & Fielding

Mailing Address 1776 K Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Consultant Expense/Legal

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.5439

Date of Disbursement

11 / 30 / 2003

Amount of Each Disbursement this Period

3024.10

SUBTOTAL of Disbursements This Page (optional)

10628.36

TOTAL This Period (last page this line number only)

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)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 Dream PAC

A. Full Name (Last, First, Middle Initial)
Wiley, Rein & Fielding

Mailing Address 1776 K Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Consultant Expense/Legal

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.5442

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2003

Amount of Each Disbursement this Period

1503.98

SUBTOTAL of Disbursements This Page (optional) ►

1503.98

TOTAL This Period (last page this line number only) ►

21924.36

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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 Dream PACA. Full Name (Last, First, Middle Initial)
Fortuno 2004, Inc.Mailing Address 130 Winston Churchill Avenue
PMB 364

City San Juan State PR Zip Code 00926

Purpose of Disbursement
ContributionCandidate Name
Hon. Luis FortunoOffice Sought: ☒ House
☐ Senate
☐ President

State: PR District: 00

Disbursement For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5415

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	0	3

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

1000.00