

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

ARAB AMERICAN LEADERSHIP COUNCIL PAC

Report Covering the Period: From: / / To: / /

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|--------------------------------------|--------------------------------------|
| 6. (a) Cash on Hand January 1, <input type="text" value="2015"/> | <input type="text" value="974.19"/> | <input type="text" value="974.19"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="-252.81"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="5200.00"/> | <input type="text" value="5450.00"/> |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | <input type="text" value="4947.19"/> | <input type="text" value="6424.19"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="3614.90"/> | <input type="text" value="5091.90"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="1332.29"/> | <input type="text" value="1332.29"/> |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="6982.77"/> | |

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)

Write or Type Committee Name

ARAB AMERICAN LEADERSHIP COUNCIL PAC

Report Covering the Period: From: / / To: / /

| 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)..... | 5000.00 | 5250.00 |
| (ii) Unitemized | 200.00 | 200.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶ | 5200.00 | 5450.00 |
| (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) | 5200.00 | 5450.00 |
| 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 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))..... ▶ | 5200.00 | 5450.00 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶ | 5200.00 | 5450.00 |

DETAILED SUMMARY PAGE
of Disbursements

| 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 | 57.46 | 546.02 |
| (ii) Non-Federal Share..... | 57.44 | 545.88 |
| (b) Other Federal Operating Expenditures | 0.00 | 0.00 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 114.90 | 1091.90 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 3500.00 | 4000.00 |
| 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)) .. | 3614.90 | 5091.90 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 3557.46 | 4546.02 |

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) | 5200.00 | 5450.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 5200.00 | 5450.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 57.46 | 546.02 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 57.46 | 546.02 |

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

| | | | |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 6 OF 15 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
ARAB AMERICAN LEADERSHIP COUNCIL PAC

A. Mr. Jean Abinader
Full Name (Last, First, Middle Initial)

Mailing Address 5603 Chesterbrook Rad

City Bethesda State MD Zip Code 20816

FEC ID number of contributing federal political committee. **C**

Name of Employer MAMS Occupation Association Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 16 / 2015
Transaction ID : SA11AI.4536

Amount of Each Receipt this Period 1000.00

Memo Item Contribution

B. George Salem
Full Name (Last, First, Middle Initial)

Mailing Address 500 8th St. NW Wute 210

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C**

Name of Employer Law Offices of George Salem Occupation Lawyer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 21 / 2015
Transaction ID : SA11AI.4523

Amount of Each Receipt this Period 1000.00

Memo Item Contribution

C. James Zogby
Full Name (Last, First, Middle Initial)

Mailing Address 6319 Western Ave., NW

City Washington State DC Zip Code 20015

FEC ID number of contributing federal political committee. **C**

Name of Employer Arab American Institute Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 07 / 23 / 2015
Transaction ID : SA11AI.4524

Amount of Each Receipt this Period 3000.00

Memo Item Contribution

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 5000.00 |
| TOTAL This Period (last page this line number only).....▶ | 5000.00 |

**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)

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
ARAB AMERICAN LEADERSHIP COUNCIL PAC

Full Name (Last, First, Middle Initial)

A. Ellison for Congress

Mailing Address PO BOX 6072

City MINNEAPOLIS State MN Zip Code 55406

Purpose of Disbursement
Contribution

011

Candidate Name

ELLISON FOR CONGRESS

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 16 / 2015

Transaction ID : **SB23.4530**

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. DARIN MCKAY LAHOOD

Mailing Address 11607 N GLENSHIRE DR

City DUNLAP State IL Zip Code 61525

Purpose of Disbursement
Contribution

011

Candidate Name

DARIN MCKAY LAHOOD

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼
Special-General

State: IL District: 18

Date of Disbursement

MM / DD / YYYY
08 / 24 / 2015

Transaction ID : **SB23.4527**

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Memo Item

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

3500.00

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

3500.00

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **ARAB AMERICAN LEADERSHIP COUNCIL PAC** Transaction ID : **SC/10.4333**

| | | |
|---|------------------------------------|---|
| LOAN SOURCE Full Name (Last, First, Middle Initial) Arab American Institute | <input type="checkbox"/> Memo Item | Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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 |
| 1000.00 | 0.00 | 1000.00 |

TERMS

Date Incurred: MM / DD / YYYY (05 / 31 / 2013) Date Due: MM / DD / YYYY (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

NAME OF COMMITTEE (In Full) **ARAB AMERICAN LEADERSHIP COUNCIL PAC** Transaction ID : **SC/10.4422**

| | | |
|---|------------------------------------|---|
| LOAN SOURCE Full Name (Last, First, Middle Initial) Arab American Institute | <input type="checkbox"/> Memo Item | Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Mailing Address 1600 K St, NW Suite 601 | | |
| City Washington State DC ZIP Code 20006 | | |

| | | |
|----------------------------------|------------------------------------|--|
| Original Amount of Loan 10.00 | Cumulative Payment To Date 0.00 | Balance Outstanding at Close of This Period 10.00 |
|----------------------------------|------------------------------------|--|

TERMS

Date Incurred: MM / DD / YYYY (03 / 31 / 2014) Date Due: MM / DD / YYYY (4/30) 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)..... ▶ | 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 10 OF 15 |
| | FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 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 601 | |
| City State Zip Code Washington DC 20006 | |

| | | |
|---|--|---|
| Outstanding Balance Beginning This Period <input type="text" value="5869.77"/> | Transaction ID : SD10.4136 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="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 601 | |
| City State Zip Code Washington DC 20006 | |

| | | |
|---|--|---|
| Outstanding Balance Beginning This Period <input type="text" value="10.00"/> | Transaction ID : SD10.4421 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="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 <input type="text" value="20.00"/> | Transaction ID : SD10.4459 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="20.00"/> |

| | |
|--|--------------------------------------|
| 1) SUBTOTALS This Period This Page (optional)..... ▶ | <input type="text" value="5899.77"/> |
| 2) TOTALS This Period (last page this line number only)..... ▶ | <input type="text"/> |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶ | <input type="text"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶ | <input type="text"/> |

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

| | |
|---|---|
| (Use separate schedule(s) for each numbered line) | PAGE 11 OF 15 |
| | FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 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 5.00 | Transaction ID : SD10.4460 | |
| Amount Incurred This Period 0.00 | 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 5.00 | Transaction ID : SD10.4461 | |
| Amount Incurred This Period 0.00 | 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 10.00 | Transaction ID : SD10.4462 | |
| Amount Incurred This Period 0.00 | 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 12 OF 15 |
| | FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 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 1.00 | Transaction ID : SD10.4463 | |
| Amount Incurred This Period 0.00 | 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 First Last | Nature of Debt (Purpose): Suspected Fraudulent Charges - Waiting for Merchant to take back funds |
| Mailing Address 56 Testville Dr. | |
| City State Zip Code Testville MS 39401 | |

| | | |
|--|-----------------------------|--|
| Outstanding Balance Beginning This Period 52.00 | Transaction ID : SD10.4479 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 52.00 |

| | |
|--|---------------------------|
| 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)..... ▶ | 53.00 |
| 2) TOTALS This Period (last page this line number only)..... ▶ | 5972.77 |
| 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) ▶ | 6982.77 |

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 : H1.4541

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

NAME OF COMMITTEE (In Full)
ARAB AMERICAN LEADERSHIP COUNCIL PAC

Form A: Bank of America, Transaction ID: H4.4522. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Returned Item fee), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (07/07/2015), and Amounts (FEDERAL SHARE: 17.50, NONFEDERAL SHARE: 17.50, TOTAL AMOUNT: 35.00).

Form B: Bank of America, Transaction ID: H4.4525. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Monthly Service Fee), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (07/31/2015), and Amounts (FEDERAL SHARE: 7.50, NONFEDERAL SHARE: 7.50, TOTAL AMOUNT: 15.00).

Form C: iTransact, Transaction ID: H4.4526. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Monthly Processing Fee), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (08/10/2015), and Amounts (FEDERAL SHARE: 12.48, NONFEDERAL SHARE: 12.47, TOTAL AMOUNT: 24.95).

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE (37.48) + NONFEDERAL SHARE (37.47) = TOTAL AMOUNT (74.95)

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

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
ARAB AMERICAN LEADERSHIP COUNCIL PAC

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.4529 Memo Item

iTransact

Mailing Address PO Box 999
314 South 200 West

City Farmington State UT Zip Code 84025

Purpose of Disbursement: Monthly Processing Fee

Activity or Event Identifier: **Administrative**

Category/Type: 001

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 1076.90

Date: 09 / 10 / 2015

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 12.48 | | 12.47 | | 24.95 |

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.4539 Memo Item

Bank of America

Mailing Address 888 17th St. NW

City Washington State DC Zip Code 20006

Purpose of Disbursement: Monthly Service Fee

Activity or Event Identifier: Administrative

Category/Type: 001

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 1091.90

Date: 09 / 30 / 2015

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 7.50 | | 7.50 | | 15.00 |

C. Full Name (Last, First, Middle Initial) Memo Item

Mailing Address

City State Zip Code

Purpose of Disbursement:

Activity or Event Identifier:

Category/Type:

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date:

Date:

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| | | | | |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 19.98 | | 19.97 | | 39.95 |

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 |
| 57.46 | | 57.44 | | 114.90 |