

**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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" 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)
Ares Management LLC Political Action Committee

A. Full Name (Last, First, Middle Initial) Tom Turpin <hr/> Mailing Address 3453 Caribeth Dr. <hr/> City Encino State CA Zip Code 91436 <hr/> Purpose of Disbursement PAC Refund of Contributions Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1277750633293 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 1 0
	Amount of Each Disbursement this Period 5526.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Laura W. Van Roijen <hr/> Mailing Address PO Box 50 <hr/> City Casanova State VA Zip Code 20139 <hr/> Purpose of Disbursement PAC Refund of Contributions Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1277753760246 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 1 0
	Amount of Each Disbursement this Period 6140.00
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) William Lanham Walton <hr/> Mailing Address 84 Kalorama Circle, NW <hr/> City Washington State DC Zip Code 20008-1616 <hr/> Purpose of Disbursement PAC Refund of Contributions Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1277753896793 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 1 0
	Amount of Each Disbursement this Period 10427.28
	Category/ Type 010
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

22093.28

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