

**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

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NAME OF COMMITTEE (In Full)  
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Pallone for Congress</b>		<b>Transaction ID: 25523236</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 7
Mailing Address PO Box 3176		Amount of Each Disbursement this Period 1000.00
City Long Branch	State NJ	
Zip Code 77401		
Purpose of Disbursement		
Candidate Name Mr. Frank Pallone		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input 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: NJ District: 6		

Full Name (Last, First, Middle Initial) <b>B. Hobson for Congress</b>		<b>Transaction ID: 25522846</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 7
Mailing Address 82 W. Columbia St. 1507 Longworth House Ofc Bldg		Amount of Each Disbursement this Period 1000.00
City Springfield	State OH	
Zip Code 45502		
Purpose of Disbursement		
Candidate Name Mr. Dave Hobson		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input 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: OH District: 7		

Full Name (Last, First, Middle Initial) <b>C. Committee for a Democratic Majority</b>		<b>Transaction ID: 25524150</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 7
Mailing Address 301 Fourth St. NE Ste. 202		Amount of Each Disbursement this Period 1000.00
City Washington	State DC	
Zip Code 20002		
Purpose of Disbursement		
Candidate Name		011 Category/ Type
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	