

# 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)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on M M M / D D D / 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 in the State of

5. Covering Period M M M / D D D / Y Y Y Y Y Y 10 01 2015 through M M M / D D D / Y Y Y Y Y Y 12 31 2015

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 03 01 2016

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

**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="1332.29"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="6045.00"/>	<input type="text" value="11495.00"/>
(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="7377.29"/>	<input type="text" value="12469.19"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="4620.05"/>	<input type="text" value="9711.95"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="2757.24"/>	<input type="text" value="2757.24"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> 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).....	4500.00	9750.00
(ii) Unitemized .....	1545.00	1745.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	6045.00	11495.00
(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) .....	6045.00	11495.00
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))..... ▶	6045.00	11495.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	6045.00	11495.00

**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 .....	60.03	606.05
(ii) Non-Federal Share.....	60.02	605.90
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	120.05	1211.95
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4500.00	8500.00
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)) ..	4620.05	9711.95
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4560.03	9106.05

**DETAILED SUMMARY PAGE**  
of Disbursements

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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) .....	6045.00	11495.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	6045.00	11495.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	60.03	606.05
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	60.03	606.05

**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 16
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<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. Samir Abu-Ghazaleh**  
Full Name (Last, First, Middle Initial)

Mailing Address 8901 Hidden Valley Rd

City State Zip Code  
Sioux Falls SD 57110

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

Name of Employer Occupation  
Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
12 / 23 / 2015  
Transaction ID : SA11AI.4601

Amount of Each Receipt this Period  
500.00

Memo Item Contribution

**B. Sam Assi**  
Full Name (Last, First, Middle Initial)

Mailing Address 9435 Lorton Market St, #211

City State Zip Code  
Lorton VA 22079

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

Name of Employer Occupation  
Department of Defense Engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
12 / 23 / 2015  
Transaction ID : SA11AI.4590

Amount of Each Receipt this Period  
500.00

Memo Item Contribution

**C. Kathleen El Maaroufi**  
Full Name (Last, First, Middle Initial)

Mailing Address 5600 Wisconsin Ave  
Apt 18A

City State Zip Code  
Chevy Chase MD 20815

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

Name of Employer Occupation  
Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
12 / 23 / 2015  
Transaction ID : SA11AI.4615

Amount of Each Receipt this Period  
500.00

Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 7 OF 16  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial)  
**A. Edward Gabriel**

Mailing Address 4801 Foxhall Crescent, NW

City Washington State DC Zip Code 20007

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

Name of Employer The Gabriel Company Occupation President

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 25 / 2015  
**Transaction ID : SA11AI.4552**

Amount of Each Receipt this Period  
1000.00

Memo Item  
Contribution

Full Name (Last, First, Middle Initial)  
**B. Amer Nimr**

Mailing Address 1061 Cedar Rd

City Southport State CT Zip Code 06890

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

Name of Employer Seabridge Capital Occupation Partner

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 23 / 2015  
**Transaction ID : SA11AI.4580**

Amount of Each Receipt this Period  
500.00

Memo Item  
Contribution

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

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 ▼  
2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 12 / 2015  
**Transaction ID : SA11AI.4547**

Amount of Each Receipt this Period  
1000.00

Memo Item  
Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2500.00

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

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

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

FOR LINE NUMBER: PAGE 8 OF 16  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial)  
**A. Oscar Seikaly**

Mailing Address 4401 Island Rd

City Miami State FL Zip Code 33137

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

Name of Employer US Provident Occupation Insurance Broker

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 23 / 2015

Transaction ID : SA11AI.4584

Amount of Each Receipt this Period  
500.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)  
**B.**

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

Full Name (Last, First, Middle Initial)  
**C.**

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	4500.00



**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

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

Full Name (Last, First, Middle Initial)

**A. DR. MATT HEINZ FOR ARIZONA**

Mailing Address P.O. BOX 57698

City TUCSON State AZ Zip Code 85732

Purpose of Disbursement  
Contribution

011

Candidate Name

**DR. MATT HEINZ FOR ARIZONA**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: AZ District: 02

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 23 / 2015

Transaction ID : **SB23.4567**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. O'MALLEY FOR PRESIDENT**

Mailing Address 1501 ST PAUL STREET SUITE 114

City BALTIMORE State MD Zip Code 21202

Purpose of Disbursement  
Contribution

011

Candidate Name

**O'MALLEY FOR PRESIDENT**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 25 / 2015

Transaction ID : **SB23.4549**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. O'MALLEY FOR PRESIDENT**

Mailing Address 1501 ST PAUL STREET SUITE 114

City BALTIMORE State MD Zip Code 21202

Purpose of Disbursement  
Contribution

011

Candidate Name

**MARTIN JOSEPH O'MALLEY**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 23 / 2015

Transaction ID : **SB23.4571**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

4500.00

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

4500.00

SCHEDULE C (FEC Form 3X)

LOANS

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

<b>LOAN SOURCE</b> 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 1000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 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: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....▶	[ ] 1000.00
<b>TOTALS</b> 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**

<b>LOAN SOURCE</b> 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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....▶	10.00
<b>TOTALS</b> 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 12 OF 16
	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 <b>Arab American Institute</b>	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"/>	<b>Transaction ID : SD10.4136</b>	
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 <b>Arab American Institute</b>	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"/>	<b>Transaction ID : SD10.4421</b>	
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 <b>First Last</b>	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"/>	<b>Transaction ID : SD10.4459</b>	
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) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="5899.77"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> 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 13 OF 16
	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 <b>First Last</b>	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 <b>First Last</b>	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 <b>First Last</b>	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) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	20.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> 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 14 OF 16
	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 <b>First Last</b>	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 <b>First Last</b>	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) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	53.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	5972.77
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	1010.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	6982.77

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 : H4.4545**  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

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: 1117.05

Date: 10 / 12 / 2015

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.57		12.58		25.15

**B. Full Name (Last, First, Middle Initial) Transaction ID : H4.4546**  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

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: 1132.05

Date: 10 / 31 / 2015

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.50		7.50		15.00

**C. Full Name (Last, First, Middle Initial) Transaction ID : H4.4548**  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

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: 1157.00

Date: 11 / 13 / 2015

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
32.55		32.55		65.10

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**

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

**A. Full Name (Last, First, Middle Initial) Transaction ID : H4.4553**  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**

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: 1172.00

Date: 11 / 30 / 2015

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.50		7.50		15.00

**B. Full Name (Last, First, Middle Initial) Transaction ID : H4.4554**  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

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: 1196.95

Date: 12 / 14 / 2015

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.48		12.47		24.95

**C. Full Name (Last, First, Middle Initial) Transaction ID : H4.4621**  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

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: 1211.95

Date: 12 / 31 / 2015

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
27.48		27.47		54.95

**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
60.03	60.02	120.05