

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 11 / 08 / 2016 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 10 / 01 / 2016 through 10 / 19 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Zogby, James, , Dr.,

Type or Print Name of Treasurer _____

Signature of Treasurer Zogby, James, , Dr., [Electronically Filed] Date 10 / 25 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

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="2016"/>		2757.24
(b) Cash on Hand at Beginning of Reporting Period.....	9196.69	
(c) Total Receipts (from Line 19)	4295.00	12960.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	13491.69	15717.24
7. Total Disbursements (from Line 31).....	1391.27	3616.82
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	12100.42	12100.42
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)	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

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).....	2950.00	8700.00
(ii) Unitemized	1345.00	4260.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	4295.00	12960.00
(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)	4295.00	12960.00
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)).....▶	4295.00	12960.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	4295.00	12960.00

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	695.63	808.43
(ii) Non-Federal Share.....	695.64	808.39
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1391.27	1616.82
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	2000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	1391.27	3616.82
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	695.63	2808.43

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)	4295.00	12960.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4295.00	12960.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	695.63	808.43
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	695.63	808.43

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 14
<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. Abinader, Jean, , Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5603 Chesterbrook Rad

City Bethesda	State MD	Zip Code 20816
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MAMS	Occupation (for Individual) Association Executive
---	--

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
10		18		2016

Transaction ID : SA11AI.4743

Amount of Each Receipt this Period
500.00

Memo Item Contribution

B. Abu-Ghazaleh, Samir, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8901 Hidden Valley Rd

City Sioux Falls	State SD	Zip Code 57110
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

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
10		18		2016

Transaction ID : SA11AI.4734

Amount of Each Receipt this Period
500.00

Memo Item Contribution

C. Al-Khalesi, Yasin, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8308 Blackburn Ave

City Los Angeles	State CA	Zip Code 90048-4218
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Arabico, Inc.	Occupation (for Individual) President
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2016

Transaction ID : SA11AI.4736

Amount of Each Receipt this Period
200.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....▶	1200.00
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: (check only one)	PAGE 7 OF 14
<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. Gabriel, Edward, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) The Gabriel Company Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 18 / 2016
Transaction ID : SA11AI.4748
 Amount of Each Receipt this Period 500.00
 Memo Item Contribution

B. Mudarri, Corinne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 Upland Rd
 City Cambridge State MA Zip Code 02140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 18 / 2016
Transaction ID : SA11AI.4754
 Amount of Each Receipt this Period 250.00
 Memo Item Contribution

C. Nimr, Amer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1061 Cedar Rd
 City Southport State CT Zip Code 06890
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Seabridge Capital Occupation (for Individual) Partner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 18 / 2016
Transaction ID : SA11AI.4735
 Amount of Each Receipt this Period 1000.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	2950.00

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 checked="" type="checkbox"/> N <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
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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 checked="" 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
10.00	0.00	10.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
MM / DD / YYYY 03 / 31 / 2014	MM / DD / YYYY 4/30	0.00 % (apr)	<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: []

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 14
	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 Washington	State DC	Zip Code 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 Washington	State DC	Zip Code 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 Last, First, , ,			Nature of Debt (Purpose): Fraudulent Transactions
Mailing Address 56 Testville Dr.			
City Testville	State MS	Zip Code 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 14
	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 Last, First, , ,			Nature of Debt (Purpose): Fraudulent Transaction
Mailing Address 56 Testville Dr.			
City Testville	State MS	Zip Code 39401	

Outstanding Balance Beginning This Period <input type="text" value="5.00"/>	Transaction ID : SD10.4460	
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="5.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Last, First, , ,			Nature of Debt (Purpose): Fraudulent Transaction
Mailing Address 56 Testville Dr.			
City Testville	State MS	Zip Code 39401	

Outstanding Balance Beginning This Period <input type="text" value="5.00"/>	Transaction ID : SD10.4461	
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="5.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Last, First, , ,			Nature of Debt (Purpose): Fraudulent Transaction
Mailing Address 56 Testville Dr.			
City Testville	State MS	Zip Code 39401	

Outstanding Balance Beginning This Period <input type="text" value="10.00"/>	Transaction ID : SD10.4462	
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"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="20.00"/>
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 12 OF 14
	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 Last, First, , ,			Nature of Debt (Purpose): Fraudulent Transaction
Mailing Address 56 Testville Dr.			
City Testville	State MS	Zip Code 39401	

Outstanding Balance Beginning This Period <input type="text" value="1.00"/>	Transaction ID : SD10.4463	
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="1.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Last, First, , ,			Nature of Debt (Purpose): Suspected Fraudulent Charges - Waiting for Merchant to take back funds
Mailing Address 56 Testville Dr.			
City Testville	State MS	Zip Code 39401	

Outstanding Balance Beginning This Period <input type="text" value="52.00"/>	Transaction ID : SD10.4479	
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="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 <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="53.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="5972.77"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="1010.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="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 : H1.4757

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

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

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.4718
At Your Service, Inc., , ,
Mailing Address 11890-I Old Baltimore Pike
City Beltsville State MD Zip Code 20705
Purpose of Disbursement: Postage for Election Mailer
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
FEDERAL SHARE 695.63 NONFEDERAL SHARE 695.64 TOTAL AMOUNT 1391.27

B. Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
Purpose of Disbursement:
Activity or Event Identifier:
Allocated Activity or Event:
FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

C. Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
Purpose of Disbursement:
Activity or Event Identifier:
Allocated Activity or Event:
FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SUBTOTAL of Allocated Federal and NonFederal Activity This Page
FEDERAL SHARE 695.63 NONFEDERAL SHARE 695.64 TOTAL AMOUNT 1391.27

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))
FEDERAL SHARE 695.63 NONFEDERAL SHARE 695.64 TOTAL AMOUNT 1391.27