

**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. BOUSTANY, CHARLES DR. JR.**

Mailing Address PO Box 80125

City State Zip Code  
Lafayette LA 70598

Purpose of Disbursement  
Contribution

011

Candidate Name

**BOUSTANY, CHARLES DR. JR.**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: LA District: 07

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 31 / 2012

**Transaction ID : SB23.5432**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF LOIS CAPPs**

Mailing Address PO Box 23940

City State Zip Code  
Santa Barbara CA 93121

Purpose of Disbursement  
Contribution

Category/  
Type

Candidate Name

**FRIENDS OF LOIS CAPPs**

Office Sought:  House  
 Senate  
 President  
State: CA District: 23

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 31 / 2012

**Transaction ID : SB23.5416**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF PATRICK MURPHY**

Mailing Address 4521 PGA BLVD. #412

City State Zip Code  
PALM BEACH GARDENS FL 33418

Purpose of Disbursement  
Contribution

011

Candidate Name

**FRIENDS OF PATRICK MURPHY**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: FL District: 18

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 31 / 2012

**Transaction ID : SB23.5417**

Amount of Each Disbursement this Period

1000.00

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

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

3000.00