

**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

A.	Full Name (Last, First, Middle Initial) <b>FRIENDS OF ROSA DELAURO</b>	<b>Transaction ID: D54696</b>
	Mailing Address <b>49 HUNTINGTON STREET</b>	Date of Disbursement MM / DD / YYYY <b>11 / 12 / 2007</b>
	City <b>NEW HAVEN</b> State <b>CT</b> Zip Code <b>06511</b>	Amount of Each Disbursement this Period <b>1000.00</b>
	Purpose of Disbursement Contributions to Federal Candidates	Category/ Type
	Candidate Name <b>Rep. Rosa Delauro</b>	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <b>CT</b> District: <b>03</b>	Disbursement For: <b>2008</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) <b>SHELLEY MOORE CAPITO FOR CONGRESS</b>	<b>Transaction ID: D54695</b>
	Mailing Address <b>P.O. Box 11519</b>	Date of Disbursement MM / DD / YYYY <b>11 / 12 / 2007</b>
	City <b>Charleston</b> State <b>WV</b> Zip Code <b>25339</b>	Amount of Each Disbursement this Period <b>1000.00</b>
	Purpose of Disbursement Contributions to Federal Committees	Category/ Type
	Candidate Name <b>Rep. Shelley Moore Capito</b>	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <b>WV</b> District: <b>02</b>	Disbursement For: <b>2008</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) <b>KAGEN 4 CONGRESS</b>	<b>Transaction ID: D54659</b>
	Mailing Address <b>100 W. College Ave.</b>	Date of Disbursement MM / DD / YYYY <b>11 / 07 / 2007</b>
	City <b>Appleton</b> State <b>WI</b> Zip Code <b>54911</b>	Amount of Each Disbursement this Period <b>4500.00</b>
	Purpose of Disbursement Contributions to Federal Candidates	Category/ Type
	Candidate Name <b>Rep. Steve Kagen</b>	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <b>WI</b> District: <b>08</b>	Disbursement For: <b>2008</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>6500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	