

**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 College of Physician Services Inc PAC; AKA ACP Services PAC

Full Name (Last, First, Middle Initial)

A. CONGRESSMAN WAXMAN CAMPAIGN COMMITTEE

Mailing Address 6380 Wilshire Blvd. #1612

City Los Angeles State CA Zip Code 90048

Purpose of Disbursement Contribution

Candidate Name HENRY A. WAXMAN

Category/Type

Office Sought: House Senate President

Disbursement For: 2006 Primary General Other (specify) ▼

State: CA District: 30

Transaction ID: SB23.6082

Date of Disbursement

09 / 30 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. ENSIGN FOR SENATE

Mailing Address PO BOX 26568

City LAS VEGAS State NV Zip Code 89126

Purpose of Disbursement Contribution

Candidate Name JOHN ERIC ENSIGN

Category/Type

Office Sought: House Senate President

Disbursement For: 2006 Primary General Other (specify) ▼

State: NV District: 00

Transaction ID: SB23.6076

Date of Disbursement

09 / 30 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF CLAY SHAW

Mailing Address P.O. Box 2188
2600 NE 14th. Street Causeway

City Fort Lauderdale State FL Zip Code 33303

Purpose of Disbursement Contribution

Candidate Name E CLAY JR SHAW

Category/Type

Office Sought: House Senate President

Disbursement For: 2006 Primary General Other (specify) ▼

State: FL District: 22

Transaction ID: SB23.6043

Date of Disbursement

09 / 07 / 2006

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)