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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)
Americas Health Insurance Plans PAC (AHIP PAC)

A. Full Name (Last, First, Middle Initial)
Prosperity Pac

Mailing Address 7804 Evening Lane

City: Alexandria | State: VA | Zip Code: 22306

Purpose of Disbursement: 2005 Contribution

Candidate Name

Category/Type

Office Sought: House / Senate / President

State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: 4829170506225835092
Date of Disbursement: 06 / 22 / 2005

Amount of Each Disbursement this Period: 2500.00

B. Full Name (Last, First, Middle Initial)
Rangel for Congress

Mailing Address PO Box 5577
Manhattanville Station

City: New York | State: NY | Zip Code: 10027

Purpose of Disbursement: 2006 Primary

Candidate Name: Rangel Charles

Category/Type

Office Sought: X House / Senate / President

State: NY District: 15

Disbursement For: 2006 X Primary / General / Other (specify)

Transaction ID: 8637780504145457135
Date of Disbursement: 04 / 15 / 2005

Amount of Each Disbursement this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
Rely on Your Beliefs Fund

Mailing Address 209 Pennsylvania Avenue Southeast

City: Washington | State: DC | Zip Code: 20003

Purpose of Disbursement: 2005 Contribution

Candidate Name

Category/Type

Office Sought: House / Senate / President

State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: 1761740503904008639
Date of Disbursement: 03 / 30 / 2005

Amount of Each Disbursement this Period: 5000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 8500.00

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