

**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)

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<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 Hospital Association PAC

Full Name (Last, First, Middle Initial)

**A. Leadership 21**

Mailing Address 5501 Cherokee Ave.  
Ste. 112

City Alexandria State VA Zip Code 22312

Purpose of Disbursement  
2004 Contribution

Candidate Name

Office Sought: House Senate President  
Disbursement For: Primary General Other (specify) ▼

State: District

011  
Category/  
Type

Transaction ID: 10175418

Date of Disbursement

09 / 28 / 2004

Amount of Each Disbursement this Period

4000.00

2004 Contribution

Full Name (Last, First, Middle Initial)

**B. Dave Camp for Congress**

Mailing Address P.O. Box 423

City Midland State MI Zip Code 48640

Purpose of Disbursement  
Contribution

Candidate Name  
Rep. Dave Camp

Office Sought:  House Senate President  
Disbursement For: 2004 Primary  General Other (specify) ▼

State: MI District 4

011  
Category/  
Type

Transaction ID: 10175463

Date of Disbursement

09 / 28 / 2004

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

**C. Crowley for Congress**

Mailing Address B4-58 Grand Avenue

City Elmhurst State NY Zip Code 11373

Purpose of Disbursement  
Contribution

Candidate Name  
Rep. Joe Crowley

Office Sought:  House Senate President  
Disbursement For: 2004 Primary  General Other (specify) ▼

State: NY District 7

011  
Category/  
Type

Transaction ID: 10281883

Date of Disbursement

09 / 28 / 2004

Amount of Each Disbursement this Period

1000.00

Contribution

SUBTOTAL of Disbursements This Page (optional) ▶

6000.00

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