

**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"/> 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. NORMA TORRES FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 728 W EDNA PLACE

City COVINA State CA Zip Code 91722

Purpose of Disbursement Contribution

Candidate Name
Torres, Norma, J., Rep.,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: CA District: 35

Date of Disbursement

MM / DD / YYYY
05 / 30 / 2018

FEC Identification Number

C C00557652

Transaction ID : D183543

Amount of Each Disbursement this Period

1000.00

Memo Item

B. ANNA ESHOO FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 555 Capitol Mall, Suite 1425

City Sacramento State CA Zip Code 95814

Purpose of Disbursement Contribution

Candidate Name
Eshoo, Anna, G., Rep.,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: CA District: 18

Date of Disbursement

MM / DD / YYYY
05 / 15 / 2018

FEC Identification Number

C C00258475

Transaction ID : D183436

Amount of Each Disbursement this Period

1000.00

Memo Item

C. FRIENDS OF CHERI BUSTOS

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 77

City EAST MOLINE State IL Zip Code 61244

Purpose of Disbursement Contribution

Candidate Name
Bustos, Cheri, , Rep.,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: IL District: 17

Date of Disbursement

MM / DD / YYYY
05 / 15 / 2018

FEC Identification Number

C C00498568

Transaction ID : D183439

Amount of Each Disbursement this Period

2500.00

Memo Item

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

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

4500.00