

**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)				PAGE <u>1</u> OF <u>1</u>	
	<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)  
**ARROWHEAD GROUP FEDERAL POLITICAL ACTION COMMITTEE**

A. <b>SANCHEZ, Loretta</b>		Date of Disbursement
Mailing Address <b>1230 LHOB</b>		<b>07 14 2009</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20515</b>
Purpose of Disbursement <b>Fundraising</b>	Candidate Name <b>SAA</b>	Amount of Each Disbursement this Period <b>500.00</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Fundraising</b>	Category/ Type <b>011</b>
State: <b>CA</b>	District: <b>47th</b>	

B. <b>BACA, Joe</b>		Date of Disbursement
Mailing Address <b>1527 LHOB</b>		<b>10 02 2009</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20515</b>
Purpose of Disbursement <b>FUNDRAISING</b>	Candidate Name <b>SAA</b>	Amount of Each Disbursement this Period <b>1000.00</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Fundraising</b>	Category/ Type <b>011</b>
State: <b>CA</b>	District: <b>43rd</b>	

C. <b>Royce, Ed</b>		Date of Disbursement
Mailing Address <b>2785 RHOB</b>		<b>11 05 2009</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20515</b>
Purpose of Disbursement <b>FUNDRAISING</b>	Candidate Name <b>SAA</b>	Amount of Each Disbursement this Period <b>500.00</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Fundraising</b>	Category/ Type <b>011</b>
State: <b>CA</b>	District: <b>40th</b>	

SUBTOTAL of Disbursements This Page (optional).....	<b>2000.00</b>
TOTAL This Period (last page this line number only).....	<b>2000.00</b>

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