

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

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)
ALCON PAC

Full Name (Last, First, Middle Initial) A. ADVANCED MEDICAL TECHNOLOGY ASSOCIATION PAC (ADVAMED PAC)		Transaction ID: SB23.4707																					
Mailing Address 1200 G STREET NW - SUITE 400		Date of Disbursement																					
City WASHINGTON State DC Zip Code 20005		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		3	1		2	0	0	6														
Purpose of Disbursement Donation by check		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10" style="text-align: right;">900.00</td> </tr> </table>		900.00																			
900.00																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2006																					
State: District:		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
		<table border="1"> <tr> <td colspan="2" style="text-align: center;">011</td> </tr> <tr> <td colspan="2" style="text-align: center;">Category/Type</td> </tr> </table>		011		Category/Type																	
011																							
Category/Type																							

Full Name (Last, First, Middle Initial) B. TEXAS FREEDOM FUND		Transaction ID: SB23.4706																					
Mailing Address 104 East Hume Avenue		Date of Disbursement																					
City Alexandria State VA Zip Code 22301		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	7		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		2	7		2	0	0	6														
Purpose of Disbursement Donation by Check		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10" style="text-align: right;">1500.00</td> </tr> </table>		1500.00																			
1500.00																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2006																					
State: District:		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
		<table border="1"> <tr> <td colspan="2" style="text-align: center;">011</td> </tr> <tr> <td colspan="2" style="text-align: center;">Category/Type</td> </tr> </table>		011		Category/Type																	
011																							
Category/Type																							

SUBTOTAL of Disbursements This Page (optional)	2400.00
TOTAL This Period (last page this line number only)	2400.00