

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
ARAB AMERICAN LEADERSHIP COUNCIL PAC

ADDRESS (number and street) 1600 K STREET NW SUITE 601
 Check if different than previously reported. (ACC)
WASHINGTON DC 20006

2. **FEC IDENTIFICATION NUMBER** C00194225
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on 11 07 2006 in the State of _____

5. Covering Period 10 19 2006 through 11 27 2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Dr. James J Zogby

Signature of Treasurer Electronically Filed by Dr. James J Zogby Date 12 06 2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
ARAB AMERICAN LEADERSHIP COUNCIL PAC

Report Covering the Period: From:

M	M
1	0

D	D
1	9

Y	Y	Y	Y
2	0	0	6

 To:

M	M
1	1

D	D
2	7

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		9583.65
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	34728.29									
(c) Total Receipts (from Line 19)	37885.00	83273.95								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	72613.29	92857.60								
7. Total Disbursements (from Line 31)	68024.28	88268.59								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	4589.01	4589.01								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
ARAB AMERICAN LEADERSHIP COUNCIL PAC

Report Covering the Period: From:

M	M
1	0

D	D
1	9

Y	Y	Y	Y
2	0	0	6

 To:

M	M
1	1

D	D
2	7

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	33000.00	74400.00
(i) Itemized (use Schedule A)	3985.00	7973.95
(ii) Unitemized	36985.00	82373.95
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	900.00	900.00
(c) Other Political Committees (such as PACs)	37885.00	83273.95
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	37885.00	83273.95
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	37885.00	83273.95

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	2121.28	5935.59
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	2121.28	5935.59
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	64000.00	77000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	900.00	900.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	900.00	900.00
29. Other Disbursements.....	1003.00	4433.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	68024.28	88268.59
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	68024.28	88268.59

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	37885.00	83273.95
34. Total Contribution Refunds (from Line 28(d))	900.00	900.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	36985.00	82373.95
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	2121.28	5935.59
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2121.28	5935.59

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 36
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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)
ARAB AMERICAN LEADERSHIP COUNCIL PAC

Full Name (Last, First, Middle Initial) A. Mr. Wajdi Abdeen		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6	
Mailing Address 6302 West Bell Road		Transaction ID: SA11A1.5865	
City State Zip Code Glendale AZ 85308	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self - Employed	Occupation Convenience Store Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) B. Dr. Bassel Abou-Khalil		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6	
Mailing Address 5836 Fredericksburg Drive		Transaction ID: SA11A1.5831	
City State Zip Code Nashville TN 37215-4807	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Vanderbilt University	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. Dr. Yousef Abu-Sbaih		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6	
Mailing Address 86 West Oneida Street		Transaction ID: SA11A1.5751	
City State Zip Code Oswego NY 13126	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self-Employed	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional) ▶	3500.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
ARAB AMERICAN LEADERSHIP COUNCIL PAC

A. Full Name (Last, First, Middle Initial)
Ms Muna Al-Aseer

Mailing Address 3820 Bellewater Blvd.

City State Zip Code
Riverview FL 33569-3100

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Tampa General Hospital Occupational Therapist

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	3	/	2	0	0	6

Transaction ID: SA11A1.5859

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Maryam Al-zubidi

Mailing Address 9413 S. 26th Drive

City State Zip Code
Phoenix AZ 85041

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Information Requested

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	6	/	2	0	0	6

Transaction ID: SA11A1.5867

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Steve Arkwi

Mailing Address 5320 E. Doubletree Ranch Road

City State Zip Code
Paradise Valley AZ 85253-1620

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Information Requested

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	6	/	2	0	0	6

Transaction ID: SA11A1.5869

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► 1250.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 36
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ARAB AMERICAN LEADERSHIP COUNCIL PAC

A. Full Name (Last, First, Middle Initial) Mr. Issa Baconi		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 6
Mailing Address 7 Dawes Place		Transaction ID: SA11A1.5787
City State Zip Code Larchmont NY 10538	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Arab Bank PLC	Occupation Executive Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B. Full Name (Last, First, Middle Initial) Mr. James Barkate		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6
Mailing Address 105 Mulberry Drive		Transaction ID: SA11A1.5833
City State Zip Code Metairie LA 70005	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Southern Abstrac	Occupation Abstractor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C. Full Name (Last, First, Middle Initial) Tawfiq Barqawi		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 6 / 2 0 0 6
Mailing Address 34 Wendee Way		Transaction ID: SA11A1.5897
City State Zip Code Sewell NJ 08080-3526	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Employed	Occupation Franchise 7/11 Store Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	1050.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 36
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
ARAB AMERICAN LEADERSHIP COUNCIL PAC

A. Full Name (Last, First, Middle Initial)
Dr. Yahya Basha

Mailing Address 30701 Woodward Suite LL

City State Zip Code
Royal Oak MI 48073

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Basha Diagnostic President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 0 6

Transaction ID: SA11A1.5846

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Madeline Bassil

Mailing Address 19191 River Road

City State Zip Code
Athens OH 45701

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Not Currently Employed Journalism

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 6

Transaction ID: SA11A1.5871

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Ms Maysa Beydoun

Mailing Address 26155 Timber Trail

City State Zip Code
Dearborn Heights MI 48127

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Arab American Chamber of Comm.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 6

Transaction ID: SA11A1.5873

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)	▶	2500.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 36
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
ARAB AMERICAN LEADERSHIP COUNCIL PAC

Full Name (Last, First, Middle Initial) A. Ms Maysa Beydoun		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 26155 Timber Trail		Transaction ID: SA11A1.5972
City Dearborn Heights State MI Zip Code 48127	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period -1000.00
Name of Employer Arab American Chamber of Comm. Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	check returned unpaid
Aggregate Year-to-Date ▼		

Full Name (Last, First, Middle Initial) B. Mrs. Mona Charif		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 0 6
Mailing Address 7331 Carta Valley Drive		Transaction ID: SA11A1.5789
City Dallas State TX Zip Code 75248	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00
Name of Employer EDS Occupation Marketing Communications	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼		

Full Name (Last, First, Middle Initial) C. Mrs. Michelle Chebbani		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 6
Mailing Address 211 Woodcrest Dr.		Transaction ID: SA11A1.5874
City Dearborn State MI Zip Code 48124-1161	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00
Name of Employer Omnex Occupation Office Manager	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼		

SUBTOTAL of Receipts This Page (optional)	-250.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
ARAB AMERICAN LEADERSHIP COUNCIL PAC

A. Full Name (Last, First, Middle Initial)
Mrs. Camilla Collova

Mailing Address 1007 Meadow Hill Drive

City State Zip Code
Lancaster PA 17601

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 19 / 2006

Transaction ID: SA11A1.5755

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Dr. Farouk EL-Baz

Mailing Address 28 Oakleigh Drive

City State Zip Code
Laconia NH 03246

FEC ID number of contributing federal political committee. **C**

Name of Employer Boston University Occupation Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 19 / 2006

Transaction ID: SA11A1.5757

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Hossam Fadel

Mailing Address 3503 Lost Tree Court

City State Zip Code
Martinez GA 30907

FEC ID number of contributing federal political committee. **C**

Name of Employer Self employed Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 19 / 2006

Transaction ID: SA11A1.5761

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► 900.00

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
ARAB AMERICAN LEADERSHIP COUNCIL PAC

A. Full Name (Last, First, Middle Initial)
Hussam Fadhli

Mailing Address 9908 West County Road 18E

City Loveland State CO Zip Code 80537

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 5 / 2 0 0 6

Transaction ID: SA11A1.5791

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Dr. Richard Fadil

Mailing Address 975 Clifton Avenue

City Clifton State NJ Zip Code 07013

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 0 2 / 2 0 0 6

Transaction ID: SA11A1.5848

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Hani Findakly

Mailing Address 629 Rivercrest Drive

City McLean State VA Zip Code 22101

FEC ID number of contributing federal political committee. **C**

Name of Employer Clinton Groups Occupation Investment Advisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 5 / 2 0 0 6

Transaction ID: SA11A1.5805

Amount of Each Receipt this Period
 3000.00

SUBTOTAL of Receipts This Page (optional) ► 3500.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 36
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ARAB AMERICAN LEADERSHIP COUNCIL PAC

Full Name (Last, First, Middle Initial) A. Edward Gabriel		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6
Mailing Address 1101 Vermont Ave NW Suite 411		Transaction ID: SA11A1.5762
City Washington State DC Zip Code 20005	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer The Gabriel Company Occupation President & CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. Mr. Samuel Halaby		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6
Mailing Address PO Box 189		Transaction ID: SA11A1.5839
City Pittsford State NY Zip Code 14534	Amount of Each Receipt this Period 3500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed Occupation Managing Partner, Greece Park Preatly,		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3500.00	

Full Name (Last, First, Middle Initial) C. Mr. Samer Hamadeh		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6
Mailing Address 200 W 58th Street #10A		Transaction ID: SA11A1.5879
City New York State NY Zip Code 10019-1432	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Vault Occupation Publisher/President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	4750.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 36
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ARAB AMERICAN LEADERSHIP COUNCIL PAC

Full Name (Last, First, Middle Initial) A. Ahmad Husami		Date of Receipt MM / DD / YYYY 11 / 13 / 2006
Mailing Address 4609 Pepperwood Avenue		Transaction ID: SA11A1.5896
City Longbeach	State CA	Zip Code 90808
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Husmai and Associates	Occupation Certified Financial Planner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Mr. Nidal Ibrahim		Date of Receipt MM / DD / YYYY 11 / 02 / 2006
Mailing Address P.O. Box 753		Transaction ID: SA11A1.5850
City Huntington Beach	State CA	Zip Code 92648
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Arab American Institute	Occupation Executive Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Dr. Kamal Itani		Date of Receipt MM / DD / YYYY 11 / 02 / 2006
Mailing Address 130 Gay Street		Transaction ID: SA11A1.5852
City Westwood	State MA	Zip Code 02090-2515
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Boston University	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	1750.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 36
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
ARAB AMERICAN LEADERSHIP COUNCIL PAC

Full Name (Last, First, Middle Initial) A. Dr. Raymond Jallow		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 6	
Mailing Address 2530 Pak Oak Court		Transaction ID: SA11A1.5806	
City State Zip Code Los Angeles CA 90068	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Jallow International Ltd.	Occupation Chief Economist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		

Full Name (Last, First, Middle Initial) B. Mr. Ali Jawad		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6	
Mailing Address 201 Hampshire Court		Transaction ID: SA11A1.5890	
City State Zip Code Dearborn MI 48124-1123	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Armada Corporation	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) C. Mr. Samer Khanachet		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 6	
Mailing Address 9 Elmwood street		Transaction ID: SA11A1.5747	
City State Zip Code Cambridge MA 02338	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Arab Banker Association	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional) ▶	1800.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 36
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
ARAB AMERICAN LEADERSHIP COUNCIL PAC

Full Name (Last, First, Middle Initial) A. Omar Khudari		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 6	
Mailing Address 16 Belfry Terrace		Transaction ID: SA11A1.5807	
City State Zip Code Lexington MA 02421		Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Cecropia, Inc. Video Game Developer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. Ms Dana King		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6	
Mailing Address 13 Ellensview Circle		Transaction ID: SA11A1.5842	
City State Zip Code Richmond VA 23226		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation N / A Homemaker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Dr. Wassim Mazraany		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 6	
Mailing Address 12 Independence Ave		Transaction ID: SA11A1.5812	
City State Zip Code Hampden ME 04444		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Self-Employed Surgeon			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	2750.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 36
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
ARAB AMERICAN LEADERSHIP COUNCIL PAC

Full Name (Last, First, Middle Initial) A. Michael Petruzzell		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6	
Mailing Address 2323 Tracy Place, NW		Transaction ID: SA11A1.5881	
City State Zip Code Washington DC 20008-1640	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Qorvis Communication Inc.	Occupation Managing Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) B. Mr. Monty Rahman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6	
Mailing Address 8507 Horseshoe Road		Transaction ID: SA11A1.5773	
City State Zip Code Ellicott City MD 21043	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Mars Group, Inc.	Occupation Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Denyse Sabagh		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6	
Mailing Address 1728 Lamont Street, NW		Transaction ID: SA11A1.5883	
City State Zip Code Washington DC 20010	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Duane - Morris	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional) ▶	3250.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 36
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
ARAB AMERICAN LEADERSHIP COUNCIL PAC

Full Name (Last, First, Middle Initial) A. Mrs. Helen Hatab Samhan		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 6	
Mailing Address 6333 Lakewood Drive		Transaction ID: SA11A1.5844	
City Falls Church	State VA	Zip Code 22041-1210	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Arab American Institute	Occupation Non-profit Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. Hon. William Shaheen		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 0 6	
Mailing Address 73 Perkins Road Madbury		Transaction ID: SA11A1.5816	
City Madbury	State NH	Zip Code 03820	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self-Employed	Occupation Lawyer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) C. Dr. Nezer Shobassy		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 2001 9th Avenue, Suite 305		Transaction ID: SA11A1.5863	
City Port Arthur	State TX	Zip Code 77642	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Gastroenterology Associate	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional) ▶	2500.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 36
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
ARAB AMERICAN LEADERSHIP COUNCIL PAC

Full Name (Last, First, Middle Initial) A. Mr. Tarek Suwwan de Felipe		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 6
Mailing Address 1773 Magnolia Lake Court		Transaction ID: SA11A1.5885
City State Zip Code San Jose CA 95131	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Armada Corporation Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Mr. Nabil Takla		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 6
Mailing Address 19 Deer Park Road		Transaction ID: SA11A1.5887
City State Zip Code Danbury CT 06811	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer The Morganti Group, Inc. Occupation Corporate Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Dr. James J Zogby		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 6
Mailing Address 1600 K Street NW		Transaction ID: SA11A1.5889
City State Zip Code Washington DC 20006	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Abra American Institute Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional) ▶	2750.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 20 / 36	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ARAB AMERICAN LEADERSHIP COUNCIL PAC

A. Full Name (Last, First, Middle Initial)
Mr. John Zogby

Mailing Address 10 Oakwood Drive

City State Zip Code
New Hartford NY 13413

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed
Occupation
Pollster

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	9	/	2	0	0	6

Transaction ID: SA11A1.5778

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	33000.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
ARAB AMERICAN LEADERSHIP COUNCIL PAC

A. Full Name (Last, First, Middle Initial)
Jewels Of The West Inc.
Mailing Address 4009 N Brown Ave
City State Zip Code
Scottsdale AZ 85251
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 0 6
Transaction ID: SA11C.5967
Amount of Each Receipt this Period
400.00
Corporate Receipt Refunded

B. Full Name (Last, First, Middle Initial)
Pay Low
Mailing Address 2644 E Greenway Pkwy.
City State Zip Code
Phoenix AZ 85032
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 6
Transaction ID: SA11C.5965
Amount of Each Receipt this Period
500.00
Corporate receipt refunded

SUBTOTAL of Receipts This Page (optional)	▶	900.00
TOTAL This Period (last page this line number only)	▶	900.00

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 22 / 36

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input 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)
ARAB AMERICAN LEADERSHIP COUNCIL PAC

Full Name (Last, First, Middle Initial)
A. Byron S. Adams

Mailing Address 1615 L Street, NW # 100

City Washington State DC Zip Code 20036

Purpose of Disbursement
Fundraising Mailer

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.5904
Date of Disbursement

^M ^M / ^D ^D / ^Y ^Y ^Y ^Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

**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 23 / 36

<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)
ARAB AMERICAN LEADERSHIP COUNCIL PAC

Full Name (Last, First, Middle Initial) A. ABERCROMBIE FOR CONGRESS		Transaction ID: SB23.5905 Date of Disbursement																				
Mailing Address c/o 1357 Kapiolani Blvd. Ste. 1005 c/o 1357 Kapiolani Blvd. Ste. 1005		<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>1</td><td>/</td><td>0</td><td>3</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	1	/	0	3	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	0	3	/	2	0	0	6													
City Honolulu	State HI	Zip Code 96814																				
Purpose of Disbursement		Amount of Each Disbursement this Period																				
Candidate Name		<table border="1"><tr><td>2000.00</td></tr></table>	2000.00																			
2000.00																						
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: HI	District: 01																					

Full Name (Last, First, Middle Initial) B. A WHOLE LOT OF PEOPLE FOR GRIJALVA CONGRESSNL CMTE		Transaction ID: SB23.5917 Date of Disbursement																				
Mailing Address P.O. Box 1242		<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>1</td><td>/</td><td>0</td><td>3</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	1	/	0	3	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	0	3	/	2	0	0	6													
City Tucson	State AZ	Zip Code 85702																				
Purpose of Disbursement		Amount of Each Disbursement this Period																				
Candidate Name		<table border="1"><tr><td>2000.00</td></tr></table>	2000.00																			
2000.00																						
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: AZ	District: 07																					

Full Name (Last, First, Middle Initial) C. BARBARA LEE FOR CONGRESS		Transaction ID: SB23.5909 Date of Disbursement																				
Mailing Address 1736 FRANKLIN STREET #500		<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>1</td><td>/</td><td>0</td><td>3</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	1	/	0	3	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	0	3	/	2	0	0	6													
City OAKLAND	State CA	Zip Code 94612																				
Purpose of Disbursement		Amount of Each Disbursement this Period																				
Candidate Name		<table border="1"><tr><td>2000.00</td></tr></table>	2000.00																			
2000.00																						
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: CA	District: 09																					

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>6000.00</td></tr></table>	6000.00
6000.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td> </td></tr></table>	

**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)
ARAB AMERICAN LEADERSHIP COUNCIL PAC

Full Name (Last, First, Middle Initial) A. BECERRA FOR CONGRESS		Transaction ID: SB23.5936 Date of Disbursement
Mailing Address P.O. Box 261060		<input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/>
City Los Angeles	State CA	Zip Code 90026
Purpose of Disbursement		Amount of Each Disbursement this Period <input type="text" value="2000.00"/>
Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA	District: 31	

Full Name (Last, First, Middle Initial) B. BLUMENAUER FOR CONGRESS		Transaction ID: SB23.5942 Date of Disbursement
Mailing Address 830 NE Holladay #105		<input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/>
City Portland	State OR	Zip Code 97232
Purpose of Disbursement		Amount of Each Disbursement this Period <input type="text" value="2000.00"/>
Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OR	District: 03	

Full Name (Last, First, Middle Initial) C. CAPUANO FOR CONGRESS COMMITTEE		Transaction ID: SB23.5914 Date of Disbursement
Mailing Address PO BOX 440305		<input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/>
City SOMERVILLE	State MA	Zip Code 02144
Purpose of Disbursement		Amount of Each Disbursement this Period <input type="text" value="2000.00"/>
Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MA	District: 08	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="6000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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

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NAME OF COMMITTEE (In Full)
ARAB AMERICAN LEADERSHIP COUNCIL PAC

Full Name (Last, First, Middle Initial) A. CHAFEE FOR SENATE		Transaction ID: SB23.5900
Mailing Address PO BOX 7329		Date of Disbursement 10 / 19 / 2006
City WARWICK	State RI	Zip Code 02887
Purpose of Disbursement		Amount of Each Disbursement this Period 2000.00
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: RI	District: 00	

Full Name (Last, First, Middle Initial) B. CHAFEE FOR SENATE		Transaction ID: SB23.5953
Mailing Address PO BOX 7329		Date of Disbursement 11 / 06 / 2006
City WARWICK	State RI	Zip Code 02887
Purpose of Disbursement		Amount of Each Disbursement this Period 1000.00
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: RI	District: 00	

Full Name (Last, First, Middle Initial) C. CHARLES BOUSTANY JR. FOR CONGRESS		Transaction ID: SB23.5941
Mailing Address Post Office Box 80126		Date of Disbursement 11 / 03 / 2006
City Lafayette	State LA	Zip Code 70598
Purpose of Disbursement		Amount of Each Disbursement this Period 2000.00
Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: LA	District: 07	

SUBTOTAL of Disbursements This Page (optional)	5000.00
TOTAL This Period (last page this line number only)	

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)
ARAB AMERICAN LEADERSHIP COUNCIL PAC

Full Name (Last, First, Middle Initial) A. CHRIS WAKIM FOR CONGRESS		Transaction ID: SB23.5954 Date of Disbursement
Mailing Address PO Box 2176		<input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/>
City Wheeling	State WV	Zip Code 26003
Purpose of Disbursement	<input type="text" value="1000.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WV District: 01		

Full Name (Last, First, Middle Initial) B. COMMITTEE TO RE-ELECT NYDIA M. VELAZQUEZ TO CONGRESS		Transaction ID: SB23.5945 Date of Disbursement
Mailing Address 315 Inspiration Lane		<input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/>
City Gaithersburg	State MD	Zip Code 20878
Purpose of Disbursement	<input type="text" value="2000.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY District: 12		

Full Name (Last, First, Middle Initial) C. DEFAZIO FOR CONGRESS		Transaction ID: SB23.5915 Date of Disbursement
Mailing Address PO Box 1316		<input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/>
City Springfield	State OR	Zip Code 97477
Purpose of Disbursement	<input type="text" value="2000.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OR District: 04		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="5000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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)
ARAB AMERICAN LEADERSHIP COUNCIL PAC

Full Name (Last, First, Middle Initial) A. DOGGETT FOR US CONGRESS		Transaction ID: SB23.5978 Date of Disbursement 11 / 03 / 2006
Mailing Address PO Box 5843		Amount of Each Disbursement this Period 2000.00
City Austin	State TX	
Zip Code 78763		
Purpose of Disbursement		
Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TX District: 25		

Full Name (Last, First, Middle Initial) B. Ellison For Congress		Transaction ID: SB23.5952 Date of Disbursement 11 / 06 / 2006
Mailing Address P O Box 11818		Amount of Each Disbursement this Period 1000.00
City Minneapolis	State MN	
Zip Code 55411		
Purpose of Disbursement		
Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MN District: 5		

Full Name (Last, First, Middle Initial) C. FRIENDS OF FARR		Transaction ID: SB23.5916 Date of Disbursement 11 / 03 / 2006
Mailing Address 555 Capitol Mall Suite 1425		Amount of Each Disbursement this Period 2000.00
City Sacramento	State CA	
Zip Code 95814		
Purpose of Disbursement		
Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA District: 17		

SUBTOTAL of Disbursements This Page (optional) ▶	5000.00
TOTAL This Period (last page this line number only) ▶	

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

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NAME OF COMMITTEE (In Full)
ARAB AMERICAN LEADERSHIP COUNCIL PAC

A. Full Name (Last, First, Middle Initial)
FRIENDS OF JIM MCDERMOTT

Mailing Address 710 9TH STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: WA District: 7

Disbursement For: 2006
 Primary General
 Other (specify) ▼

Transaction ID: SB23.5912

Date of Disbursement

11 / 03 / 2006

Amount of Each Disbursement this Period

2000.00

B. Full Name (Last, First, Middle Initial)
FRIENDS OF LOIS CAPP

Mailing Address PO Box 23940

City Santa Barbara State CA Zip Code 93121

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: CA District: 23

Disbursement For: 2006
 Primary General
 Other (specify) ▼

Transaction ID: SB23.5939

Date of Disbursement

11 / 03 / 2006

Amount of Each Disbursement this Period

2000.00

C. Full Name (Last, First, Middle Initial)
FRIENDS OF MAURICE HINCHEY

Mailing Address PO Box 4497

City Kingston State NY Zip Code 12402

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: NY District: 22

Disbursement For: 2006
 Primary General
 Other (specify) ▼

Transaction ID: SB23.5919

Date of Disbursement

11 / 03 / 2006

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional) ▶

6000.00

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

**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)
ARAB AMERICAN LEADERSHIP COUNCIL PAC

Full Name (Last, First, Middle Initial) A. FRIENDS OF RAY LAHOOD		Transaction ID: SB23.5932 Date of Disbursement
Mailing Address 4238 N Knoxville Ave 4238 N Knoxville Ave		<input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>
City Peoria	State IL	Zip Code 61614
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="2000.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL	District: 18	

Full Name (Last, First, Middle Initial) B. ISSA FOR CONGRESS		Transaction ID: SB23.5980 Date of Disbursement
Mailing Address P O BOX 760		<input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>
City VISTA	State CA	Zip Code 92085
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="2000.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA	District: 49	

Full Name (Last, First, Middle Initial) C. JESSE JACKSON JR FOR CONGRESS COMMITT		Transaction ID: SB23.5935 Date of Disbursement
Mailing Address POST OFFICE BOX 49026		<input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>
City CHICAGO	State IL	Zip Code 60649
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="2000.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL	District: 02	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="6000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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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)
ARAB AMERICAN LEADERSHIP COUNCIL PAC

Full Name (Last, First, Middle Initial) A. KAPTUR FOR CONGRESS		Transaction ID: SB23.5908 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address P.O. Box 899 P.O. Box 899		Amount of Each Disbursement this Period 2000.00
City Toledo State OH Zip Code 43697		
Purpose of Disbursement	Category/ Type	
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 09	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. KEEP NICK RAHALL IN CONGRESS COMMITTEE		Transaction ID: SB23.5934 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address P O Box 64		Amount of Each Disbursement this Period 2000.00
City Beckley State WV Zip Code 25802		
Purpose of Disbursement	Category/ Type	
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 3	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. KILPATRICK FOR UNITED STATES CONGRESS		Transaction ID: SB23.5958 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6
Mailing Address PO BOX 32175		Amount of Each Disbursement this Period 2000.00
City DETROIT State MI Zip Code 48232		
Purpose of Disbursement	Category/ Type	
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	6000.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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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)
ARAB AMERICAN LEADERSHIP COUNCIL PAC

Full Name (Last, First, Middle Initial) A. MCCOLLUM FOR CONGRESS		Transaction ID: SB23.5924 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address P.O. Box 14131		Amount of Each Disbursement this Period 2000.00	
City St. Paul State MN Zip Code 55114	Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 04 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Category/Type			
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MEL WATT FOR CONGRESS COMMITTEE		Transaction ID: SB23.5929 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address PO BOX 36831		Amount of Each Disbursement this Period 2000.00	
City CHARLOTTE State NC Zip Code 28236	Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 12 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Category/Type			
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MORAN FOR CONGRESS		Transaction ID: SB23.5926 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 618 North Washington Street		Amount of Each Disbursement this Period 2000.00	
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 08 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Category/Type			
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Disbursements This Page (optional) ▶	6000.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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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

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NAME OF COMMITTEE (In Full)
ARAB AMERICAN LEADERSHIP COUNCIL PAC

Full Name (Last, First, Middle Initial) A. OBEY, DAVID R		Transaction ID: SB23.5982 Date of Disbursement
Mailing Address 1212 Grand Ave #32		<input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/>
City WAUSAU	State WI	Zip Code 54403
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="2000.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WI District: 07		

Full Name (Last, First, Middle Initial) B. PETE STARK RE-ELECTION COMMITTEE		Transaction ID: SB23.5913 Date of Disbursement
Mailing Address P.O. Box 8331		<input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/>
City Fremont	State CA	Zip Code 94537
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="2000.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA District: 13		

Full Name (Last, First, Middle Initial) C. PRICE FOR CONGRESS COMMITTEE		Transaction ID: SB23.5937 Date of Disbursement
Mailing Address P. O. Box 1986		<input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/>
City Raleigh	State NC	Zip Code 27602
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="2000.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NC District: 04		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="6000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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)
ARAB AMERICAN LEADERSHIP COUNCIL PAC

Full Name (Last, First, Middle Initial)

A. RE-ELECT CONGRESSMAN KUCINICH COMT.

Mailing Address P.O Box 110475

City Cleveland State OH Zip Code 44111

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House Senate President
State: OH District: 10
Disbursement For: 2006
 Primary General
 Other (specify) ▼

Transaction ID: SB23.5901

Date of Disbursement

10 / 30 / 2006

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. SHEILA JACKSON LEE FOR CONGRESS

Mailing Address 4412 ALMEDA

City HOUSTON State TX Zip Code 77044

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House Senate President
State: TX District: 18
Disbursement For: 2006
 Primary General
 Other (specify) ▼

Transaction ID: SB23.5956

Date of Disbursement

11 / 06 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. VAN HOLLEN FOR CONGRESS

Mailing Address 10537 St. Paul Street

City Kennington State MD Zip Code 20895

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House Senate President
State: MD District: 08
Disbursement For: 2006
 Primary General
 Other (specify) ▼

Transaction ID: SB23.5944

Date of Disbursement

11 / 03 / 2006

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional) ►

5000.00

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

**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)
ARAB AMERICAN LEADERSHIP COUNCIL PAC

Full Name (Last, First, Middle Initial)
A. WALTER JONES COMMITTEE 2006

Transaction ID: SB23.5920

Date of Disbursement

Mailing Address PO BOX 99667

^M 1	^M /	^D 0	^D 3	^Y 2	^Y 0	^Y 0	^Y 6
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City RALEIGH State NC Zip Code 27624

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President
State: NC District: 03

Disbursement For: 2006
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

64000.00

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 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 checked="" type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
ARAB AMERICAN LEADERSHIP COUNCIL PAC

Full Name (Last, First, Middle Initial) A. Jewels Of The West Inc.		Transaction ID: SB28C.5971																					
Mailing Address 4009 N Brown Ave		Date of Disbursement																					
City Scottsdale State AZ Zip Code 85251		<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>1</td><td>/</td><td>0</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	1	/	0	7	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	0	7	/	2	0	0	6														
Purpose of Disbursement Refund of receipt		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10" style="text-align: right;">400.00</td> </tr> </table>		400.00																			
400.00																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type																					
State: District:																							

Full Name (Last, First, Middle Initial) B. Pay Low		Transaction ID: SB28C.5970																					
Mailing Address 2644 E Greenway Pkwy.		Date of Disbursement																					
City Phoenix State AZ Zip Code 85032		<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>1</td><td>/</td><td>0</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	1	/	0	7	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	0	7	/	2	0	0	6														
Purpose of Disbursement Refund of Receipt		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10" style="text-align: right;">500.00</td> </tr> </table>		500.00																			
500.00																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type																					
State: District:																							

SUBTOTAL of Disbursements This Page (optional) ►

900.00

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

900.00

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
ARAB AMERICAN LEADERSHIP COUNCIL PAC

Full Name (Last, First, Middle Initial) A. Bank of America		Transaction ID: SB29.5987 Date of Disbursement
Mailing Address 1701 Eye Street		<input type="text" value="10"/> <input type="text" value="31"/> / <input type="text" value="2006"/>
City Washington	State DC	Zip Code 20006
Purpose of Disbursement Bank Service Charge	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="3.00"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Friends for David Farhat		Transaction ID: SB29.5960 Date of Disbursement
Mailing Address 3461 Whispering Woods Drive		<input type="text" value="11"/> <input type="text" value="06"/> / <input type="text" value="2006"/>
City Muskegon	State MI	Zip Code 48126
Purpose of Disbursement State House Race	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="500.00"/>
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MI District:		

Full Name (Last, First, Middle Initial) C. New Leaders Victory Fund		Transaction ID: SB29.5961 Date of Disbursement
Mailing Address 154422 Kennebec		<input type="text" value="11"/> <input type="text" value="06"/> / <input type="text" value="2006"/>
City Southgate	State MI	Zip Code 48195
Purpose of Disbursement State PAC of State House Candidate	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="500.00"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 13		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1003.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="1003.00"/>