

**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)  
American Optometric Association Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) ACTON PAC <hr/> Mailing Address PO Box 442 <hr/> City Sharpsburg State GA Zip Code 30277 <hr/> Purpose of Disbursement Committee Contribution Candidate Name ACTON PAC <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 33378425 Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2011
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Committee Contribution

<b>B.</b> Full Name (Last, First, Middle Initial) Stivers For Congress <hr/> Mailing Address 4679 Winterset Drive <hr/> City Columbus State OH Zip Code 43220 <hr/> Purpose of Disbursement Candidate Contribution Candidate Name Mr. Steve Stivers <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 15 <hr/> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 33381117 Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2011
	Amount of Each Disbursement this Period 2500.00
	Category/ Type 011
	Candidate Contribution

<b>C.</b> Full Name (Last, First, Middle Initial) Allen West For Congress <hr/> Mailing Address PO Box 1028 <hr/> City Deerfield Beach State FL Zip Code 33443 <hr/> Purpose of Disbursement Candidate Contribution Candidate Name Rep. Allen West <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 22 <hr/> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 33381120 Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2011
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Candidate Contribution

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)