

**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)  
American Optometric Association Political Action Committee

Full Name (Last, First, Middle Initial)  
**A. New Jersey Democratic State Committee**

Mailing Address 196 West State Street

City State Zip Code  
Trenton NJ 08608

Purpose of Disbursement  
Contributions to State Party Committees

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 24929015  
Date of Disbursement  
11 / 01 / 2006

Amount of Each Disbursement this Period  
5000.00

Contributions to State Party Committees (207)

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	5000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	5000.00