

**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 checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <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 VICTORY PAC

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. BROGHAMER CONSULTING LLC | | Date of Disbursement MM / DD / YYYY 09 / 01 / 2020 |
| Mailing Address 502 MONROE ST | | FEC Identification Number C [REDACTED] Transaction ID : SB21B.4244 Amount of Each Disbursement this Period [REDACTED] 651.35 |
| City NEWPORT | State KY | Zip Code 41071 |
| Purpose of Disbursement COMPLIANCE CONSULTING | | Category/ Type [REDACTED] |
| Candidate Name | | |
| 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: | <input type="checkbox"/> Memo Item | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. CHAFFETZ, JASON, , , | | Date of Disbursement MM / DD / YYYY 09 / 11 / 2020 |
| Mailing Address 502 MONROE ST | | FEC Identification Number C [REDACTED] Transaction ID : SB21B.4245 Amount of Each Disbursement this Period [REDACTED] 1896.92 |
| City NEWPORT | State KY | Zip Code 41071 |
| Purpose of Disbursement TRAVEL REIMBURSEMENT - SEE MEMOS | | Category/ Type [REDACTED] |
| Candidate Name | | |
| 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: | <input type="checkbox"/> Memo Item | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. TRUMP INTERNATIONAL HOTEL | | Date of Disbursement MM / DD / YYYY 09 / 11 / 2020 |
| Mailing Address 1100 PENNSYLVANIA AVE NW | | FEC Identification Number C [REDACTED] Transaction ID : SB21B.4245. Amount of Each Disbursement this Period [REDACTED] 683.95 |
| City WASHINGTON | State DC | Zip Code 20004 |
| Purpose of Disbursement TRAVEL | | Category/ Type [REDACTED] |
| Candidate Name | | |
| 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: | <input checked="" type="checkbox"/> Memo Item | |

| | |
|--|--------------------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | [REDACTED] 2548.27 |
| TOTAL This Period (last page this line number only).....▶ | [REDACTED] |