

**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 checked="" 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)
ROMNEY VICTORY, INC.

Full Name (Last, First, Middle Initial) A. ROBERT CRAWFORD Jr		Date of Disbursement MM / DD / YYYY 12 / 31 / 2012
Mailing Address 676 LAKE ROAD		Transaction ID : SB28A.3433
City LAKE FOREST State IL Zip Code 60045	Amount of Each Disbursement this Period 16700.00	
Purpose of Disbursement CONTRIBUTION REFUND	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. KEVIN M. CROSBY		Date of Disbursement MM / DD / YYYY 12 / 31 / 2012
Mailing Address 6 HARBOR VIEW LANE		Transaction ID : SB28A.3434
City MARBLEHEAD State MA Zip Code 01945-3008	Amount of Each Disbursement this Period 16700.00	
Purpose of Disbursement CONTRIBUTION REFUND	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. JAMES DAW		Date of Disbursement MM / DD / YYYY 12 / 05 / 2012
Mailing Address 1474 HARVELL DRIVE		Transaction ID : SB28A.2617
City BATAVIA State IL Zip Code 60510	Amount of Each Disbursement this Period 260.24	
Purpose of Disbursement CONTRIBUTION REFUND	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional).....▶	33660.24
TOTAL This Period (last page this line number only).....▶	