

**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)

COMMITTEE ON ARRANGEMENTS FOR THE 2020 REPUBLICAN NATIONAL CONVENTION

Full Name (Last, First, Middle Initial)

A. Trump International Hotel

Mailing Address 1100 Pennsylvania Ave

City
Washington

State
DC

Zip Code
20004

Purpose of Disbursement
Meeting Expense

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	8			2	0	2	0		

FEC Identification Number

C

Transaction ID : SB21B.9567.3
Amount of Each Disbursement this Period

188.30

Memo Item

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 555 Market Street

City
San Francisco

State
CA

Zip Code
94105

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	8			2	0	2	0		

FEC Identification Number

C

Transaction ID : SB21B.9567.3
Amount of Each Disbursement this Period

16.70

Memo Item

Full Name (Last, First, Middle Initial)

C. First Bankcard

Mailing Address PO Box 2818

City
Omaha

State
NE

Zip Code
68103

Purpose of Disbursement
Credit Card Payment

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	8			2	0	2	0		

FEC Identification Number

C

Transaction ID : SB21B.9614
Amount of Each Disbursement this Period

65511.84

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

65511.84