

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ALL-AMERICAN VICTORY COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Duvnjak, Karlo, J, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 13 / 2019		
Mailing Address 1449 Elderfields Rd			<b>Transaction ID : SA11AI.4119</b>		
City Manhasset	State NY	Zip Code 11030	Amount of Each Receipt this Period _____ 5600.00		
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>			
Name of Employer None		Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 5600.00			
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Frankel, John, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 13 / 2019		
Mailing Address 228 Park Ave Ste 31732			<b>Transaction ID : SA11AI.4117</b>		
City New York	State NY	Zip Code 10003	Amount of Each Receipt this Period _____ 1000.00		
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>			
Name of Employer FT Venture Capital		Occupation Venture Capitalist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 1000.00			
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Harrison, Todd, R, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 25 / 2019		
Mailing Address 63 Donnybrook Dr			<b>Transaction ID : SA11AI.4125</b>		
City Demarest	State NJ	Zip Code 07627	Amount of Each Receipt this Period _____ 500.00		
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>			
Name of Employer McDermott Will & Emery		Occupation Attorney			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 500.00			
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			_____ 7100.00		
<b>TOTAL</b> This Period (last page this line number only)..... ▶			_____		