

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Astellas US LLC PAC (Astellas PAC)**

Full Name (Last, First, Middle Initial)

**A. Hatch Election Committee Inc**

Mailing Address PO Box 3986

City Washington State DC Zip Code 20027

Purpose of Disbursement  
Contribution

011

Candidate Name  
**Orrin G Hatch**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: UT District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	1	6

Transaction ID : **B604356**

Amount of Each Disbursement this Period

3	0	0	0	0	0	0	0	0	0
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Memo Item

Full Name (Last, First, Middle Initial)

**B. American Dream Project**

Mailing Address PO Box 2485

City Springfield State VA Zip Code 22152

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	6

Transaction ID : **B618598**

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0
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Memo Item

Full Name (Last, First, Middle Initial)

**C. MBE PAC Making Business Excel PAC**

Mailing Address 1020 North Fairfax Street  
Suite 20

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	1	6

Transaction ID : **B604432**

Amount of Each Disbursement this Period

3	0	0	0	0	0	0	0	0	0
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Memo Item

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

8	5	0	0	0	0	0	0	0	0
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**TOTAL** This Period (last page this line number only)..... ▶

8	5	0	0	0	0	0	0	0	0
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