

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 744 OF 746

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)

AMERICAN ASSOCIATION FOR JUSTICE POLITICAL ACTION COMMITTEE (AAJ PAC)

Full Name (Last, First, Middle Initial)

A. Kitrick, Mark, , Mr., Esq.

Mailing Address 60 Spring St., Penthouse

City
ColumbusState
OHZip Code
43215-7520Purpose of Disbursement
Refund of Contribution from Individual

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	12	/	2019

FEC Identification Number

C**Transaction ID : 13796148**

Amount of Each Disbursement this Period

183.26

☐ Memo Item Refund of Contribution from Individual

Full Name (Last, First, Middle Initial)

B. Osborne, Curtis, C., , Esq.

Mailing Address 11020 David Taylor Dr., Ste. 310

City
CharlotteState
NCZip Code
28262-1102Purpose of Disbursement
Refund of Contribution from Individual

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	10	/	2019

FEC Identification Number

C**Transaction ID : 13865767**

Amount of Each Disbursement this Period

166.66

☐ Memo Item Refund of Contribution from Individual

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

349.92

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

349.92