SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
☐ 17 ☐ 18 ☐ 19a ☐ 19b
☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
People for Patty Murray

A. Full Name (Last, First, Middle Initial)
Dr. John R. Koza

Mailing Address PO Box 1441

City: Los Altos State: CA Zip Code: 94023-4011

Purpose of Disbursement: Contribution Refund

Candidate Name

Category/Type

Office Sought: ☐ House ☐ Senate ☐ President

State: District:

Disbursement For: 2016
☒ Primary ☐ General
☐ Other (specify)

Date of Disbursement: 07 / 09 / 2015

Amount of Each Disbursement this Period: 1859.56

Transaction ID : D615913

B. Full Name (Last, First, Middle Initial)
Melanie Nathanson

Mailing Address 4278 Vacation Lane

City: Arlington State: VA Zip Code: 22207

Purpose of Disbursement: Contribution Refund

Candidate Name

Category/Type

Office Sought: ☐ House ☐ Senate ☐ President

State: District:

Disbursement For: 2016
☒ Primary ☐ General
☐ Other (specify)

Date of Disbursement: 07 / 12 / 2015

Amount of Each Disbursement this Period: 500.00

Transaction ID : D616085

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: ☐ House ☐ Senate ☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

Date of Disbursement: / /

Amount of Each Disbursement this Period:

SUBTOTAL of Disbursements This Page (optional) 2359.56

TOTAL This Period (last page this line number only) 8509.56

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