

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Julie Hamos for Congress

A. Full Name (Last, First, Middle Initial) U.S. Postmaster Northbrook <hr/> Mailing Address 2460 Dundee Road <hr/> City Northbrook State IL Zip Code 60062 <hr/> Purpose of Disbursement Postage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D65305 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 8 / 2 0 0 9
	Amount of Each Disbursement this Period 227.04
	Category/Type
	(Empty box for Category/Type)
B. Full Name (Last, First, Middle Initial) U.S. Postmaster Northbrook <hr/> Mailing Address 2460 Dundee Road <hr/> City Northbrook State IL Zip Code 60062 <hr/> Purpose of Disbursement Postage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D65293 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 7 / 2 0 0 9
	Amount of Each Disbursement this Period 88.00
	Category/Type
	(Empty box for Category/Type)
C. Full Name (Last, First, Middle Initial) U.S. Postmaster Northbrook <hr/> Mailing Address 2460 Dundee Road <hr/> City Northbrook State IL Zip Code 60062 <hr/> Purpose of Disbursement Postage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D65294 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 0 / 2 0 0 9
	Amount of Each Disbursement this Period 9265.65
	Category/Type
	(Empty box for Category/Type)

SUBTOTAL of Disbursements This Page (optional) ▶	9580.69
TOTAL This Period (last page this line number only) ▶	(Empty box)