# 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
[X] 20a [ ] 20b [ ] 20c [ ] 21



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NAME OF COMMITTEE (In Full)
Jim Himes for Congress

**A.**
Full Name (Last, First, Middle Initial): James Babb
Mailing Address: 3 Hendrie Drive
City: Old Greenwich State: CT Zip Code: 06870
Purpose of Disbursement: Refund
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [ ] Primary [X] General [ ] Other (specify)
**Transaction ID:** D338541
Date of Disbursement: 07 / 09 / 2010
Amount of Each Disbursement this Period: 350.00

**B.**
Full Name (Last, First, Middle Initial): Ronald D. Blatt, M.D.
Mailing Address: 1171 Valley Rd
City: New Canaan State: CT Zip Code: 06840
Purpose of Disbursement: Refund
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [ ] Primary [X] General [ ] Other (specify)
**Transaction ID:** D338546
Date of Disbursement: 07 / 09 / 2010
Amount of Each Disbursement this Period: 100.00

**C.**
Full Name (Last, First, Middle Initial): Donald I Brownstein
Mailing Address: 359 Merriebrook Lane
City: Stamford State: CT Zip Code: 06902
Purpose of Disbursement: Refund
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [ ] Primary [X] General [ ] Other (specify)
**Transaction ID:** D338539
Date of Disbursement: 07 / 09 / 2010
Amount of Each Disbursement this Period: 100.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ **550.00**

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