

# SCHEDULE B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 11757 / 11784

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Kamala Harris for the People**

Full Name (Last, First, Middle Initial) <b>A. Griffith, Marissa, , ,</b>			Date of Disbursement MM / DD / YYYY 02 / 17 / 2019	
Mailing Address 3734 Wade St			FEC Identification Number C	
City Los Angeles	State CA	Zip Code 90066-3622	Transaction ID : 500011369	
Purpose of Disbursement Refund		Candidate Name	Amount of Each Disbursement this Period 100.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. Grunfeld, Nancy, , ,</b>			Date of Disbursement MM / DD / YYYY 03 / 07 / 2019	
Mailing Address 10121 Counselman Rd			FEC Identification Number C	
City Potomac	State MD	Zip Code 20854-5021	Transaction ID : 500011664	
Purpose of Disbursement Refund		Candidate Name	Amount of Each Disbursement this Period 2800.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>
State:	District:			

Full Name (Last, First, Middle Initial) <b>c. Guthrie, John, , ,</b>			Date of Disbursement MM / DD / YYYY 03 / 01 / 2019	
Mailing Address 10 Fox Knoll Ct			FEC Identification Number C	
City Lutherville Timonium	State MD	Zip Code 21093-2848	Transaction ID : 500011515	
Purpose of Disbursement Refund		Candidate Name	Amount of Each Disbursement this Period 2700.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>
State:	District:			

**Subtotal Of Receipts This Page** (optional)..... 5600.00

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