

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

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

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NAME OF COMMITTEE (In Full)  
**Katie Hill for Congress**

Full Name (Last, First, Middle Initial)

**A. Cook, Myrna, , ,**

Mailing Address 921 Bluegrass Ln

City  
Los AngelesState  
CAZip Code  
90049-1432Purpose of Disbursement  
Contribution Refund

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	8		2	0	1	8

FEC Identification Number

**C**

Amount of Each Disbursement this Period

100.00

Transaction ID : VTDF6ABE1D4

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Dash, Harold, , ,**

Mailing Address 25429 Via Escovar

City  
ValenciaState  
CAZip Code  
91355-2913Purpose of Disbursement  
Contribution Refund

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	9		2	0	1	8

FEC Identification Number

**C**

Amount of Each Disbursement this Period

250.00

Transaction ID : VTDF6AAWVV8

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Davis, William, , ,**

Mailing Address 1604 Solano Ave

City  
AlbanyState  
CAZip Code  
94707-2109Purpose of Disbursement  
Contribution Refund

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	9		2	0	1	8

FEC Identification Number

**C**

Amount of Each Disbursement this Period

100.00

Transaction ID : VTDF6AAWVV6

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

450.00

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