

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

PAGE 3640 OF 3654

<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 Porter For Congress

Full Name (Last, First, Middle Initial)

**A. Friedlander, Susan, , ,**

Mailing Address 1366 N Dearborn St

City  
ChicagoState  
ILZip Code  
60610-2052Purpose of Disbursement  
Contribution Refund

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	2	0

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : VTDGHAE6K45

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RMR Enterprises**Mailing Address 6320 Canoga Ave  
Ste 1300City  
Woodland HillsState  
CAZip Code  
91367-2600Purpose of Disbursement  
Contribution Refund

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	0

FEC Identification Number

C

Amount of Each Disbursement this Period

50.00

Transaction ID : VTDGHAE9VD5

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. Klauder, John, , ,**

Mailing Address 6735 Yellowstone Blvd

City  
Forest HillsState  
NYZip Code  
11375-2669Purpose of Disbursement  
Contribution Refund

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	2		2	0	2	0

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : VTDGHAE65J5

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

550.00

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