

**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)	PAGE 46 OF 74			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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)  
**FRIENDS OF HAGEDORN**

Full Name (Last, First, Middle Initial) <b>A. HUBBARD, KAREN H, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 3415 UNIVERSITY AVE W			FEC Identification Number <b>C</b>		
City SAINT PAUL	State MN	Zip Code 55114-1019	Amount of Each Disbursement this Period 2900.00		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : <b>BC60655A9A3864CBAA39</b>		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. MILLER, HUGH, L., ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address PO BOX 30099			FEC Identification Number <b>C</b>		
City WINONA	State MN	Zip Code 55987-1099	Amount of Each Disbursement this Period 2900.00		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : <b>BADEA1E0F25DD49088D2</b>		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. HELGESON, RANDI, J, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2022		
Mailing Address 16485 ELLERDALE LN			FEC Identification Number <b>C</b>		
City EDEN PRAIRIE	State MN	Zip Code 55346-1431	Amount of Each Disbursement this Period 2900.00		
Purpose of Disbursement REFUND: REFUND OF CONTRIBUTIONS		Category/ Type 010	Transaction ID : <b>B7652A5A84DE0414DB9E</b>		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	8700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	