

**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)

Jaime Harrison for US Senate

Full Name (Last, First, Middle Initial)

**A. Kelly, Lawrence, , ,**

Mailing Address 15050 SW 88Th Ave

City  
TigardState  
ORZip Code  
97224-5737Purpose of Disbursement  
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		0	9		2	0	2	0

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : VVB49APJ707

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Killion, Mead, , ,**Mailing Address 680 Versailles Cir  
Unit BCity  
Elk Grove VlgState  
ILZip Code  
60007-3546Purpose of Disbursement  
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		0	2		2	0	2	0

FEC Identification Number

C

Amount of Each Disbursement this Period

300.00

Transaction ID : VVB49APHFA5

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. Killion, Mead, , ,**Mailing Address 680 Versailles Cir  
Unit BCity  
Elk Grove VlgState  
ILZip Code  
60007-3546Purpose of Disbursement  
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		0	2		2	0	2	0

FEC Identification Number

C

Amount of Each Disbursement this Period

150.00

Transaction ID : VVB49APHFD8

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

950.00

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