

**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 37 OF 42			
	<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				

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NAME OF COMMITTEE (In Full)  
**KISTNER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. RODRIGUEZ, ALBERTO, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2020		
Mailing Address 5977 SW 51ST ST					
City MIAMI	State FL	Zip Code 33155-6321	FEC Identification Number C		
Purpose of Disbursement REFUND: CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 250.00		
Candidate Name		Transaction ID : B52989592346241288C5			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>		
State: District:					

Full Name (Last, First, Middle Initial) <b>B. HARTUNG, DANIEL, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2020		
Mailing Address 708 HEARTLAND TRL					
City MADISON	State WI	Zip Code 53717-2172	FEC Identification Number C		
Purpose of Disbursement REFUND: CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 1000.00		
Candidate Name		Transaction ID : BEDAB6F39C78640D1ABB			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>		
State: District:					

Full Name (Last, First, Middle Initial) <b>C.</b>			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address					
City	State	Zip Code	FEC Identification Number C		
Purpose of Disbursement		Category/ Type	Amount of Each Disbursement this Period		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1250.00