

**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. Blommendahl, Dale, E, ,				Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2019	
Mailing Address 4243 Thomas Ct					
City Simi Valley		State CA	Zip Code 93063-1107		
Purpose of Disbursement Contribution Refund			<input type="checkbox"/>		
Candidate Name			Category/ Type		
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) ▼			
State:	District:				
Full Name (Last, First, Middle Initial) B. Breznican, Jill, , ,				Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2019	
Mailing Address 28044 Liana Ln					
City Valencia		State CA	Zip Code 91354-1481		
Purpose of Disbursement Contribution Refund			<input type="checkbox"/>		
Candidate Name			Category/ Type		
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020			
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State:	District:				
Full Name (Last, First, Middle Initial) c. Brazill, Wendy, , ,				Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2019	
Mailing Address 339 Adelaide Dr					
City Santa Monica		State CA	Zip Code 90402-1229		
Purpose of Disbursement Contribution Refund			<input type="checkbox"/>		
Candidate Name			Category/ Type		
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) ▼			
State:	District:				
SUBTOTAL of Disbursements This Page (optional).....▶				3100.00	
TOTAL This Period (last page this line number only).....▶					