

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Cohn for Congress

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	50008.28	289471.69
(b) Total Contribution Refunds (from Line 20(d))	500.00	1800.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	49508.28	287671.69
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	61401.12	223200.69
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	61401.12	223200.69
8. Cash on Hand at Close of Reporting Period (from Line 27).....	63871.00	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Cohn for Congress

Report Covering the Period: From: / / To: / /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	22200.00	188027.99
(ii) Unitemized.....	5308.28	49213.70
(iii) TOTAL of contributions from individuals ▶	27508.28	237241.69
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	22500.00	47130.00
(d) The Candidate.....	0.00	5100.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	50008.28	289471.69
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	50008.28	289471.69

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	61401.12	223200.69
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	500.00	1300.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	500.00	1800.00
21. OTHER DISBURSEMENTS	500.00	600.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	62401.12	225600.69

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	76263.84
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	50008.28
25. SUBTOTAL (add Line 23 and Line 24).....	126272.12
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	62401.12
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	63871.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Cohn for Congress

A. Full Name (Last, First, Middle Initial)
Geraldine Aaron

Mailing Address 1255 N Gulfstream Ave
Apt 1404

City Sarasota State FL Zip Code 34236-8934

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 03 / 2014

Transaction ID : VN915CWZ1Z3

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Philip MD Adler

Mailing Address 3507 Bayshore Blvd
Unit 1001

City Tampa State FL Zip Code 33629-8957

FEC ID number of contributing federal political committee. **C**

Name of Employer Health Point Medical Group Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 06 / 2014

Transaction ID : VN915D054W1

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Elaine Attias

Mailing Address 527 N Elm Dr
Beverly Hills

City Beverly Hills State CA Zip Code 90210-3418

FEC ID number of contributing federal political committee. **C**

Name of Employer self employed Occupation writer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 22 / 2014

Transaction ID : VN915CYHFQ4

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....

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

1750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Cohn for Congress

A. Full Name (Last, First, Middle Initial)
Sanford M Baklor

Mailing Address 12209 Tillinghast Cir

City State Zip Code
Palm Beach Gardens FL 33418-1554

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
MM / DD / YYYY
07 / 22 / 2014

Transaction ID : VN915CZV6J7

Amount of Each Receipt this Period
500.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City State Zip Code
Cambridge MA 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5448.28

Date of Receipt
MM / DD / YYYY
08 / 01 / 2014

Transaction ID : VN915CZV6J7E

Amount of Each Receipt this Period
500.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Ray E Bellamy MD

Mailing Address 509 Vinnedge Ride

City State Zip Code
Tallahassee FL 32303-5141

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Tallahassee Orthopedic clinic Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1975.00

Date of Receipt
MM / DD / YYYY
07 / 19 / 2014

Transaction ID : VN915CZ6BY6

Amount of Each Receipt this Period
100.00

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....

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

600.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cohn for Congress

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation **Conduit total listed in Agg. field**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **5448.28**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 28 / 2014

Transaction ID : VN915CZ6BY6E

Amount of Each Receipt this Period
 _____ **100.00**

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Ray E Bellamy MD

Mailing Address **509 Vinnedge Ride**

City **Tallahassee** State **FL** Zip Code **32303-5141**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Tallahassee Orthopedic clinic** Occupation **Physician**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **2075.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 25 / 2014

Transaction ID : VN915CZV6V8

Amount of Each Receipt this Period
 _____ **100.00**

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation **Conduit total listed in Agg. field**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **5448.28**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 01 / 2014

Transaction ID : VN915CZV6V8E

Amount of Each Receipt this Period
 _____ **100.00**

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....

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

_____ **100.00**

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cohn for Congress

A. Full Name (Last, First, Middle Initial)
Robert Bernhard

Mailing Address 3040 Grand Bay Blvd
Unit 226

City Longboat Key State FL Zip Code 34228-4199

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Not employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2014

Transaction ID : VN915CY1D20

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Robert Bernhard

Mailing Address 3040 Grand Bay Blvd
Unit 226

City Longboat Key State FL Zip Code 34228-4199

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Not employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
MM / DD / YYYY
07 / 27 / 2014

Transaction ID : VN915CZV7D8

Amount of Each Receipt this Period
50.00

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5448.28

Date of Receipt
MM / DD / YYYY
08 / 01 / 2014

Transaction ID : VN915CZV7D8E

Amount of Each Receipt this Period
50.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....

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

250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cohn for Congress

A. Full Name (Last, First, Middle Initial)
Robert Bucklin

Mailing Address 5122 Epping Ln

City State Zip Code
Zephyrhills FL 33541-2606

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Not Employed Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 09 / 2014

Transaction ID : VN915CXMNP0

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Elizabeth B Castor

Mailing Address 445 S 12th St
Unit 1506

City State Zip Code
Tampa FL 33602-3691

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED EDUCATION CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
425.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : VN915CZHDQ2

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Bruce Chapin

Mailing Address 2022 Hoffner Ave

City State Zip Code
Belle Isle FL 32809-3530

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
self mediator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 28 / 2014

Transaction ID : VN915CZ5GB0

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....

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

450.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cohn for Congress

A. Full Name (Last, First, Middle Initial)
VICKI B COX

Mailing Address 1200 California St
Unit 22C

City San Francisco State CA Zip Code 94109-0004

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation VOLUNTEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 17 / 2014

Transaction ID : VN915CY59A4

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Andy Crossfield

Mailing Address 5451 Kings Mont Dr

City Lakeland State FL Zip Code 33813-3242

FEC ID number of contributing federal political committee. **C**

Name of Employer Not employed Occupation Not employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
625.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 23 / 2014

Transaction ID : VN915CZV6M3

Amount of Each Receipt this Period
25.00

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5448.28

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 01 / 2014

Transaction ID : VN915CZV6M3E

Amount of Each Receipt this Period
25.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....

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

275.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cohn for Congress

A. Full Name (Last, First, Middle Initial)
Virginia Culbert

Mailing Address 235 Chaucer Ln

City Winter Haven State FL Zip Code 33884-2339

FEC ID number of contributing federal political committee. **C**

Name of Employer Polk County Board of County Commission Occupation Program Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 26 / 2014

Transaction ID : VN915CZV773

Amount of Each Receipt this Period
25.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5448.28**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 01 / 2014

Transaction ID : VN915CZV773E

Amount of Each Receipt this Period
25.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
James D Deal

Mailing Address PO Box 159

City Anoka State MN Zip Code 55303-0159

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 09 / 2014

Transaction ID : VN915CXMNX5

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....

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

525.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 58
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Cohn for Congress

A. Full Name (Last, First, Middle Initial)
Patrick T Dicesare II

Mailing Address 2846 Chatsworth Ln

City State Zip Code
Lakeland FL 33812-3875

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Dicesare, Davidson & Barker, PA Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 11 / 2014

Transaction ID : VN915CXSD25

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Michael Dukakis

Mailing Address 85 Perry St

City State Zip Code
Brookline MA 02446-6935

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Northeastern University Professor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 16 / 2014

Transaction ID : VN915CY3YQ3

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Anna Feldman

Mailing Address 5659 Sunset Falls Dr

City State Zip Code
Apollo Beach FL 33572-3112

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Hillsborough County Public Schools Retired Substitute Teacher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 30 / 2014

Transaction ID : VN915D0AEX7

Amount of Each Receipt this Period
25.00

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....

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

775.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cohn for Congress

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5448.28

Date of Receipt
 M M / D D / Y Y Y Y
08 / 06 / 2014

Transaction ID : VN915D0AEX7E

Amount of Each Receipt this Period
25.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
HOWARD L FIELDS

Mailing Address **755 Euclid Ave**

City **Berkeley** State **CA** Zip Code **94708-1348**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UNIVERSITY OF CALIFORNIA **PROFESSOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
07 / 30 / 2014

Transaction ID : VN915CZFDW5

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Steve Freedman

Mailing Address **18907 Avenue Biarritz**

City **Lutz** State **FL** Zip Code **33558-5311**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
USF **Professor**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
675.00

Date of Receipt
 M M / D D / Y Y Y Y
07 / 31 / 2014

Transaction ID : VN915CZHDT6

Amount of Each Receipt this Period
350.00

SUBTOTAL of Receipts This Page (optional).....

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

850.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cohn for Congress

A. Full Name (Last, First, Middle Initial)
William C Frye

Mailing Address 1608 Culbreath Isles Dr

City Tampa State FL Zip Code 33629-4825

FEC ID number of contributing federal political committee. **C**

Name of Employer: Trenam Kemker Occupation: attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 300.00

Date of Receipt: 07 / 31 / 2014

Transaction ID : VN915CZHDV4

Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
William C Frye

Mailing Address 1608 Culbreath Isles Dr

City Tampa State FL Zip Code 33629-4825

FEC ID number of contributing federal political committee. **C**

Name of Employer: Trenam Kemker Occupation: attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 400.00

Date of Receipt: 07 / 25 / 2014

Transaction ID : VN915CZV6X4

Amount of Each Receipt this Period: 100.00

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation: Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 5448.28

Date of Receipt: 08 / 01 / 2014

Transaction ID : VN915CZV6X4E

Amount of Each Receipt this Period: 100.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....

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

200.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cohn for Congress

A. Full Name (Last, First, Middle Initial)
Mark H Gibbons

Mailing Address 84 Davis Blvd
Apt 207

City Tampa State FL Zip Code 33606-3495

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 12 / 2014

Transaction ID : VN915CYSNQ9

Amount of Each Receipt this Period
25.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5448.28

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 23 / 2014

Transaction ID : VN915CYSNQ9E

Amount of Each Receipt this Period
25.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
MAURICE GOODMAN

Mailing Address 1380 Auburn Ct

City Boynton Beach State FL Zip Code 33436-8616

FEC ID number of contributing federal political committee. **C**

Name of Employer Goodman Communications, LLC Occupation communications consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 23 / 2014

Transaction ID : VN915CZV6P9

Amount of Each Receipt this Period
250.00

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....

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

275.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cohn for Congress

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation **Conduit total listed in Agg. field**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **5448.28**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 01 / 2014

Transaction ID : VN915CZV6P9E

Amount of Each Receipt this Period
 _____ **250.00**

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Susan Greenbaum

Mailing Address **517 Montrose Ave**

City **Temple Terrace** State **FL** Zip Code **33617-3837**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Not employed** Occupation **Not employed**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **150.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 01 / 2014

Transaction ID : VN915CZSSQ1

Amount of Each Receipt this Period
 _____ **25.00**

C. Full Name (Last, First, Middle Initial)
Susan Greenbaum

Mailing Address **517 Montrose Ave**

City **Temple Terrace** State **FL** Zip Code **33617-3837**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Not employed** Occupation **Not employed**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 30 / 2014

Transaction ID : VN915D0AEY5

Amount of Each Receipt this Period
 _____ **100.00**

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....

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

_____ **125.00**

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 58
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Cohn for Congress

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5448.28

Date of Receipt
 M M / D D / Y Y Y Y
08 / 06 / 2014

Transaction ID : VN915D0AEY5E

Amount of Each Receipt this Period
100.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Donald J Hayden

Mailing Address **1504 Bay Rd
Apt 3310**

City **Miami Beach** State **FL** Zip Code **33139-3281**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Berger Singerman attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 05 / 2014

Transaction ID : VN915D02GM9

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Rick T Hodges

Mailing Address **205 E Hooker St**

City **Bartow** State **FL** Zip Code **33830-5620**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
07 / 28 / 2014

Transaction ID : VN915CZ48A7

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....

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

800.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 OF 58
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Cohn for Congress

A. Full Name (Last, First, Middle Initial)
Richard Huggins

Mailing Address 1119 Candlewood Dr

City State Zip Code
Lakeland FL 33813-2854

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Not employed Not employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
900.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 10 2014

Transaction ID : VN915CYSNK8

Amount of Each Receipt this Period
100.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City State Zip Code
Cambridge MA 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5448.28

Date of Receipt
 M M / D D / Y Y Y Y
 07 23 2014

Transaction ID : VN915CYSNK8E

Amount of Each Receipt this Period
100.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Peter Jacobson

Mailing Address 4607 Clarksdale Ln

City State Zip Code
Brandon FL 33511-8068

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
self Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 31 2014

Transaction ID : VN915CZHE11

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

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

350.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 19 OF 58
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Cohn for Congress

A. Full Name (Last, First, Middle Initial)
William James

Mailing Address **22 Ladoga Ave**

City **Tampa** State **FL** Zip Code **33606-3804**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Capital Advisory Group** Occupation **Investments**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 21 / 2014

Transaction ID : VN915CYCNP0

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Carol S Kochman

Mailing Address **21150 Los Cabos Ct**

City **Land O Lakes** State **FL** Zip Code **34637-7806**

FEC ID number of contributing federal political committee. **C**

Name of Employer **retired** Occupation **none**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 28 / 2014

Transaction ID : VN915CZ5B03

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Gretchen Koehler

Mailing Address **5309 Ambrose Ct**

City **Tampa** State **FL** Zip Code **33647-1010**

FEC ID number of contributing federal political committee. **C**

Name of Employer **USF** Occupation **Educational Administrator**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 29 / 2014

Transaction ID : VN915D0AEV2

Amount of Each Receipt this Period
250.00

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....

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

750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cohn for Congress

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5448.28

Date of Receipt
 M M / D D / Y Y Y Y
08 / 06 / 2014

Transaction ID : VN915D0AEV2E

Amount of Each Receipt this Period
250.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Beverly Kohn

Mailing Address **6697 Warren a Woods Ave**

City **Three Oaks** State **MI** Zip Code **49128**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
07 / 30 / 2014

Transaction ID : VN915CZG2D3

Amount of Each Receipt this Period
400.00

C. Full Name (Last, First, Middle Initial)
Julie D Leach

Mailing Address **5315 Hidden Harbor Rd**

City **Sarasota** State **FL** Zip Code **34242-1427**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
none Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 06 / 2014

Transaction ID : VN915D05XT8

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....

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

500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Cohn for Congress

A. Full Name (Last, First, Middle Initial)
Linda Look

Mailing Address 9780 Leyland Dr
Unit 4

City Myrtle Beach State SC Zip Code 29572-5558

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-employed Occupation Writer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 30 / 2014

Transaction ID : VN915CZFSN5

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
William P McGrath

Mailing Address 4771 Independence Dr

City Bradenton State FL Zip Code 34210-1914

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 04 / 2014

Transaction ID : VN915D019X6

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
DANIEL J NEWLIN

Mailing Address 13821 Glynshele Dr

City Winter Garden State FL Zip Code 34787-5002

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2400.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 23 / 2014

Transaction ID : VN915CYVM28

Amount of Each Receipt this Period
2400.00

SUBTOTAL of Receipts This Page (optional).....

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

4650.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cohn for Congress

A. Full Name (Last, First, Middle Initial)
Jill M. Ogden

Mailing Address 1718 Follow Thru Rd N

City Saint Petersburg State FL Zip Code 33710-3722

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 25 / 2014

Transaction ID : VN915CZV708

Amount of Each Receipt this Period
100.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5448.28

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 01 / 2014

Transaction ID : VN915CZV708E

Amount of Each Receipt this Period
100.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Jill M. Ogden

Mailing Address 1718 Follow Thru Rd N

City Saint Petersburg State FL Zip Code 33710-3722

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 27 / 2014

Transaction ID : VN915CZV7E6

Amount of Each Receipt this Period
50.00

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....

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

150.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cohn for Congress

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5448.28

Date of Receipt
 M M / D D / Y Y Y Y
08 / 01 / 2014

Transaction ID : VN915CZV7E6E

Amount of Each Receipt this Period
50.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Robert Parks

Mailing Address **799 Brickell Plz
Ste 900**

City **Miami** State **FL** Zip Code **33131-2805**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Haggars Parks Haggard and Lewis attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 05 / 2014

Transaction ID : VN915D02YN5

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Huseyin Peker

Mailing Address **2549 Maitland Crossing Way
Apt 11106**

City **Orlando** State **FL** Zip Code **32810-7109**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Atlantic Institute Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
07 / 22 / 2014

Transaction ID : VN915CYGF29

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....

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

1000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 OF 58
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Cohn for Congress

A. Full Name (Last, First, Middle Initial)
Kay Perrin

Mailing Address 4141 Bayshore Blvd

City Tampa State FL Zip Code 33611-1806

FEC ID number of contributing federal political committee. **C**

Name of Employer Univ of Southern Florida Occupation Associate Professor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : VN915CZHDR0

Amount of Each Receipt this Period
 350.00

B. Full Name (Last, First, Middle Initial)
Donna J Petersen

Mailing Address 2905 W Euclid Ave

City Tampa State FL Zip Code 33629-8903

FEC ID number of contributing federal political committee. **C**

Name of Employer USF College of Public Health Occupation Interim Senior VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : VN915CZHDP4

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Chris Raemisch

Mailing Address 425 Eagle Ridge Dr

City Davenport State FL Zip Code 33837-4519

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Chiropractor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 05 / 2014

Transaction ID : VN915D03DY8

Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional).....

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

2350.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 25 OF 58
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Cohn for Congress

A. Full Name (Last, First, Middle Initial)
MICHAEL ROTHBAUM

Mailing Address 17320 Northway Cir

City State Zip Code
Boca Raton FL 33496-5911

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Not Employed Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 31 / 2014

Transaction ID : VN915CZHDM9

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Naomi Ryan

Mailing Address 16608 Willow Glen Dr

City State Zip Code
Odessa FL 33556-2315

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Not employed Not employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 28 / 2014

Transaction ID : VN915D0AEM8

Amount of Each Receipt this Period
50.00

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City State Zip Code
Cambridge MA 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5448.28

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 06 / 2014

Transaction ID : VN915D0AEM8E

Amount of Each Receipt this Period
50.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....

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

300.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cohn for Congress

A. Full Name (Last, First, Middle Initial)
David Sensibar

Mailing Address 5737 S Blackstone Ave

City Chicago State IL Zip Code 60637-1823

FEC ID number of contributing federal political committee. **C**

Name of Employer Construction Aggregates Corp Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 06 / 2014

Transaction ID : VN915D05YS3

Amount of Each Receipt this Period
1100.00

B. Full Name (Last, First, Middle Initial)
David Sensibar

Mailing Address 5737 S Blackstone Ave

City Chicago State IL Zip Code 60637-1823

FEC ID number of contributing federal political committee. **C**

Name of Employer Construction Aggregates Corp Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 06 / 2014

Transaction ID : VN915D0BDD9

Amount of Each Receipt this Period
400.00

C. Full Name (Last, First, Middle Initial)
Sam Shah

Mailing Address 3601 W Morrison Ave

City Tampa State FL Zip Code 33629-5113

FEC ID number of contributing federal political committee. **C**

Name of Employer Mangroves Soho Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 31 / 2014

Transaction ID : VN915CZHDW2

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....

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

1600.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cohn for Congress

A. Full Name (Last, First, Middle Initial)
Sudhir Shah

Mailing Address 17947 Cachet Isle Dr

City Tampa State FL Zip Code 33647-2703

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation real estate investor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 29 / 2014

Transaction ID : VN915CZDXT8

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Thomas Sharpenberg

Mailing Address 217 Cannon St

City Lakeland State FL Zip Code 33803-1003

FEC ID number of contributing federal political committee. **C**

Name of Employer publix Occupation QA inspector

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 06 / 2014

Transaction ID : VN915D05Z48

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Dana L Shires Jr

Mailing Address 1029 Royal Pass Rd

City Tampa State FL Zip Code 33602-5724

FEC ID number of contributing federal political committee. **C**

Name of Employer Lifelink Foundation, Inc. Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 08 / 2014

Transaction ID : VN915CXFRM3

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....

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

1450.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cohn for Congress

A. Full Name (Last, First, Middle Initial)
Elizabeth Strom

Mailing Address 13720 Halliford Dr

City Tampa State FL Zip Code 33624-6903

FEC ID number of contributing federal political committee. **C**

Name of Employer USF Occupation professor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **385.00**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 23 / 2014

Transaction ID : VN915CZV6Q7

Amount of Each Receipt this Period
 50.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5448.28**

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 01 / 2014

Transaction ID : VN915CZV6Q7E

Amount of Each Receipt this Period
 50.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Brian Sweet

Mailing Address 3944 Langdrum Dr

City Wesley Chapel State FL Zip Code 33543-7692

FEC ID number of contributing federal political committee. **C**

Name of Employer TechHealth Inc Occupation Business Analyst Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 01 / 2014

Transaction ID : VN915CY1B24

Amount of Each Receipt this Period
 500.00

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....

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

550.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 OF 58
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Cohn for Congress

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5448.28

Date of Receipt
 M M / D D / Y Y Y Y
07 / 14 / 2014

Transaction ID : VN915CY1B24E

Amount of Each Receipt this Period
500.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Andrew Tasi

Mailing Address **4608 W 86th St**

City **Bloomington** State **MN** Zip Code **55437-1316**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
federal reserve Software Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 06 / 2014

Transaction ID : VN915D05ZT1

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
cleo Townsend

Mailing Address **2707 Spring Meadow Dr**

City **Plant City** State **FL** Zip Code **33566-9619**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
none not employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
585.00

Date of Receipt
 M M / D D / Y Y Y Y
07 / 12 / 2014

Transaction ID : VN915CYSNP1

Amount of Each Receipt this Period
25.00

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....

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

225.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cohn for Congress

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation **Conduit total listed in Agg. field**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **5448.28**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 23 / 2014

Transaction ID : VN915CYSNP1E

Amount of Each Receipt this Period
 _____ **25.00**

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Ione Townsend

Mailing Address **2707 Spring Meadow Dr**

City **Plant City** State **FL** Zip Code **33566-9619**

FEC ID number of contributing federal political committee. **C**

Name of Employer **H. Lee Moffitt Cancer Center** Occupation **nurse practitioner**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **150.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 18 / 2014

Transaction ID : VN915CZ6BR9

Amount of Each Receipt this Period
 _____ **25.00**

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation **Conduit total listed in Agg. field**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **5448.28**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 28 / 2014

Transaction ID : VN915CZ6BR9E

Amount of Each Receipt this Period
 _____ **25.00**

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....

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

_____ **25.00**

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cohn for Congress

A. Full Name (Last, First, Middle Initial)
Ione Townsend

Mailing Address 2707 Spring Meadow Dr

City Plant City	State FL	Zip Code 33566-9619
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer H. Lee Moffitt Cancer Center	Occupation nurse practitioner
--	----------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
175.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 25 / 2014

Transaction ID : VN915CZV724

Amount of Each Receipt this Period
25.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City Cambridge	State MA	Zip Code 02238-2110
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer	Occupation Conduit total listed in Agg. field
------------------	--

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5448.28

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 01 / 2014

Transaction ID : VN915CZV724E

Amount of Each Receipt this Period
25.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Ione Townsend

Mailing Address 2707 Spring Meadow Dr

City Plant City	State FL	Zip Code 33566-9619
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer H. Lee Moffitt Cancer Center	Occupation nurse practitioner
--	----------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 28 / 2014

Transaction ID : VN915D0AEH5

Amount of Each Receipt this Period
25.00

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....

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

50.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cohn for Congress

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation **Conduit total listed in Agg. field**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **5448.28**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 06 / 2014

Transaction ID : VN915D0AEH5E

Amount of Each Receipt this Period
 _____ **25.00**

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Ione Townsend

Mailing Address **2707 Spring Meadow Dr**

City **Plant City** State **FL** Zip Code **33566-9619**

FEC ID number of contributing federal political committee. **C**

Name of Employer **H. Lee Moffitt Cancer Center** Occupation **nurse practitioner**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **225.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : VN915D0AFC6

Amount of Each Receipt this Period
 _____ **25.00**

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation **Conduit total listed in Agg. field**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **5448.28**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 06 / 2014

Transaction ID : VN915D0AFC6E

Amount of Each Receipt this Period
 _____ **25.00**

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....

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

_____ **25.00**

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cohn for Congress

A. Full Name (Last, First, Middle Initial)
Jefferson Voss

Mailing Address PO Box 305

City State Zip Code
Oakland FL 34760-0305

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Tavistock Financial Corp Sr. Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 01 / 2014

Transaction ID : VN915CZMCT7

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Matthew Weidner

Mailing Address 250 Mirror Lake Dr N

City State Zip Code
Saint Petersburg FL 33701-3200

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Matthew Weidner PA Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1550.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 28 / 2014

Transaction ID : VN915D0AEE1

Amount of Each Receipt this Period
100.00

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City State Zip Code
Cambridge MA 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5448.28

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 06 / 2014

Transaction ID : VN915D0AEE1E

Amount of Each Receipt this Period
100.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....

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

600.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 OF 58
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Cohn for Congress

A. Full Name (Last, First, Middle Initial)
ELLEN YORKE

Mailing Address 5465 Mystic Ct

City Columbia State MD Zip Code 21044-1835

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MEMORIAL SLOAN-KETTERING CANCER CT MEDICAL PHYSICIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : VN915CZKA28

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Maria Zlotnitsky

Mailing Address 5201 Tpc Blvd

City Lutz State FL Zip Code 33558-2867

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
US EEOC CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 27 / 2014

Transaction ID : VN915CZV7A5

Amount of Each Receipt this Period
150.00

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5448.28

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 01 / 2014

Transaction ID : VN915CZV7A5E

Amount of Each Receipt this Period
150.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....

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

650.00

22200.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 35 OF 58
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
Cohn for Congress

A. Full Name (Last, First, Middle Initial)
COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

Mailing Address 501 3rd St NW

City Washington State DC Zip Code 20001-2760

FEC ID number of contributing federal political committee. **C** C00002089

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 23 / 2014

Transaction ID : VN915CYVB36

Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
ENGINEERS POLITICAL EDUCATION COMMITTEE (EPEC)/INTERNATIONAL UNION OF OPERATING ENGINEERS

Mailing Address 1125 17th St NW

City Washington State DC Zip Code 20036-4709

FEC ID number of contributing federal political committee. **C** C00029504

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 01 / 2014

Transaction ID : VN915CZSSM7

Amount of Each Receipt this Period
 5000.00

C. Full Name (Last, First, Middle Initial)
ENGINEERS POLITICAL EDUCATION COMMITTEE (EPEC)/INTERNATIONAL UNION OF OPERATING ENGINEERS

Mailing Address 1125 17th St NW

City Washington State DC Zip Code 20036-4709

FEC ID number of contributing federal political committee. **C** C00029504

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 01 / 2014

Transaction ID : VN915CZSSP3

Amount of Each Receipt this Period
 5000.00

SUBTOTAL of Receipts This Page (optional).....

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

12500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 58
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cohn for Congress

A. Full Name (Last, First, Middle Initial)
Iron Workers Political Action League Multi Candidate Committee

Mailing Address 1750 New York Ave NW

City Washington State DC Zip Code 20006-5305

FEC ID number of contributing federal political committee. **C C00027359**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 09 / 2014

Transaction ID : VN915CXMMN4

Amount of Each Receipt this Period
 5000.00

B. Full Name (Last, First, Middle Initial)
UNITED ASSOCIATION POLITICAL EDUCATION COMMITTEE (UNITED ASSOCIATION OF JOURNEYMEN AND APP

Mailing Address 3 Park Pl

City Annapolis State MD Zip Code 21401-3687

FEC ID number of contributing federal political committee. **C C00012476**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 14 / 2014

Transaction ID : VN915CY0TY8

Amount of Each Receipt this Period
 2500.00

C. Full Name (Last, First, Middle Initial)
UNITED ASSOCIATION POLITICAL EDUCATION COMMITTEE (UNITED ASSOCIATION OF JOURNEYMEN AND APP

Mailing Address 3 Park Pl

City Annapolis State MD Zip Code 21401-3687

FEC ID number of contributing federal political committee. **C C00012476**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 14 / 2014

Transaction ID : VN915CY0TZ5

Amount of Each Receipt this Period
 2500.00

SUBTOTAL of Receipts This Page (optional).....

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

10000.00

22500.00

**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 58	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Cohn for Congress

A. 4C Partners

Full Name (Last, First, Middle Initial)

Mailing Address 201 3rd St NE
Suite 210

City Washington State DC Zip Code 20002-5707

Purpose of Disbursement
Consulting: campaign administration services

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
07 / 01 / 2014

Amount of Each Disbursement this Period
3000.00

Transaction ID : VN81X9TAZ91

Category/Type

B. ActBlue Technical Services

Full Name (Last, First, Middle Initial)

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

Purpose of Disbursement
Credit card processing fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
07 / 14 / 2014

Amount of Each Disbursement this Period
27.73

Transaction ID : VN81X9TPXP2

Category/Type

C. ActBlue Technical Services

Full Name (Last, First, Middle Initial)

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

Purpose of Disbursement
Credit card processing fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
07 / 23 / 2014

Amount of Each Disbursement this Period
16.09

Transaction ID : VN81X9TPXQ0

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 3043.82

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

**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 38 OF 58	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Cohn for Congress

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 18.51 Transaction ID : VN81X9TPXR8
City Somerville State MA Zip Code 02144-3132	Purpose of Disbursement Credit card processing fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 87.80 Transaction ID : VN81X9TPXS6
City Somerville State MA Zip Code 02144-3132	Purpose of Disbursement Credit card processing fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 9.57 Transaction ID : VN81X9TP1F7
City Somerville State MA Zip Code 02144-3132	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	115.88
TOTAL This Period (last page this line number only).....	

**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 39 OF 58	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Cohn for Congress

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 59.80
City Somerville State MA Zip Code 02144-3132	Purpose of Disbursement Credit card processing fee	
Candidate Name	Category/Type	Transaction ID : VN81X9TQE63
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Anzalone Liszt Grove Research		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 1140 19th St NW Ste 610		Amount of Each Disbursement this Period 25500.00
City Washington State DC Zip Code 20036-6608	Purpose of Disbursement Polling	
Candidate Name	Category/Type	Transaction ID : VN81X9TKPM0
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Baughman Company		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 10 G St NE Ste 710		Amount of Each Disbursement this Period 3000.00
City Washington State DC Zip Code 20002-4288	Purpose of Disbursement Consulting: Campaign management & administrative services	
Candidate Name	Category/Type	Transaction ID : VN81X9TKHR1
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	28559.80
TOTAL This Period (last page this line number only).....	

**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 40 OF 58	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Cohn for Congress

Full Name (Last, First, Middle Initial) A. Blue State Digital		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 406 7th St NW FI 3		Amount of Each Disbursement this Period 350.00 Transaction ID : VN81X9TB1E4
City Washington	State DC Zip Code 20004-2260	
Purpose of Disbursement Data services	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Alan Cohn		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 7903 Hampton Lake Dr		Amount of Each Disbursement this Period 2197.19 Transaction ID : VN81X9TPXW9
City Tampa	State FL Zip Code 33647-3662	
Purpose of Disbursement Payroll	Category/Type	
Candidate Name Alan Cohn		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 15		

Full Name (Last, First, Middle Initial) c. Alan Cohn		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 7903 Hampton Lake Dr		Amount of Each Disbursement this Period 2197.19 Transaction ID : VN81X9TPXX7
City Tampa	State FL Zip Code 33647-3662	
Purpose of Disbursement Payroll	Category/Type	
Candidate Name Alan Cohn		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 15		

SUBTOTAL of Disbursements This Page (optional).....	4744.38
TOTAL This Period (last page this line number only).....	

**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 41 OF 58			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Cohn for Congress

Full Name (Last, First, Middle Initial) A. CSPN, Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address PO Box 1458		Amount of Each Disbursement this Period 1619.88
City Land O Lakes	State FL	
Zip Code 34639-1458	Purpose of Disbursement Consulting: Campaign Logistical Support	Transaction ID : VN81X9TAZ83
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Expedia		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 333 108th Ave NE		Amount of Each Disbursement this Period 795.03
City Bellevue	State WA	
Zip Code 98004-5736	Purpose of Disbursement Travel	Transaction ID : VN81X9TKZM8
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. FedEx		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 17505 Preserve Walk Ln		Amount of Each Disbursement this Period 77.42
City Tampa	State FL	
Zip Code 33647-3244	Purpose of Disbursement Printing	Transaction ID : VN81X9TKP85
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2492.33
TOTAL This Period (last page this line number only).....	

**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 42 OF 58			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Cohn for Congress

Full Name (Last, First, Middle Initial) A. FedEx		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 17505 Preserve Walk Ln		Amount of Each Disbursement this Period 31.58
City Tampa	State FL	
Zip Code 33647-3244	Purpose of Disbursement Printing	Transaction ID : VN81X9TKPA1
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. FedEx		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address 17505 Preserve Walk Ln		Amount of Each Disbursement this Period 28.30
City Tampa	State FL	
Zip Code 33647-3244	Purpose of Disbursement Shipping	Transaction ID : VN81X9TQG33
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. First Data Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period 739.91
City Atlanta	State GA	
Zip Code 30342-1651	Purpose of Disbursement Credit Card Processing Fee	Transaction ID : VN81X9TKHC7
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	799.91
TOTAL This Period (last page this line number only).....	

**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 43 OF 58			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Cohn for Congress

A. First Data Merchant Services

Full Name (Last, First, Middle Initial)

Mailing Address 5565 Glenridge Connector NE Ste 2000

City Atlanta State GA Zip Code 30342-1651

Purpose of Disbursement Credit card processing fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 04 / 2014

Amount of Each Disbursement this Period: 704.01

Transaction ID : VN81X9TQFV0

Category/Type

B. Google

Full Name (Last, First, Middle Initial)

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement Online Advertising

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 03 / 2014

Amount of Each Disbursement this Period: 39.50

Transaction ID : VN81X9TM029

Category/Type

c. Google

Full Name (Last, First, Middle Initial)

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement Online advertising

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 04 / 2014

Amount of Each Disbursement this Period: 45.15

Transaction ID : VN81X9TQG83

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 788.66

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

**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 44 OF 58			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Cohn for Congress

Full Name (Last, First, Middle Initial) A. Holiday Inn		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address PO Box 30321		Amount of Each Disbursement this Period 18.95 Transaction ID : VN81X9TKSK8
City Salt Lake City	State UT	
Zip Code 84130-0321	Purpose of Disbursement Lodging	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Dossie Marrone		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 7903 Hampton Lake Dr		Amount of Each Disbursement this Period 1250.87 Transaction ID : VN81X9T1EB7
City Tampa	State FL	
Zip Code 33647-3662	Purpose of Disbursement Payroll	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Dossie Marrone		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 7903 Hampton Lake Dr		Amount of Each Disbursement this Period 1250.87 Transaction ID : VN81X9TPY27
City Tampa	State FL	
Zip Code 33647-3662	Purpose of Disbursement Payroll	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2520.69
TOTAL This Period (last page this line number only).....	

**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 45 OF 58		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Cohn for Congress

Full Name (Last, First, Middle Initial) A. Dossie Marrone		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 7903 Hampton Lake Dr		Amount of Each Disbursement this Period 1250.87 Transaction ID : VN81X9TPY43
City Tampa State FL Zip Code 33647-3662	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Michelle Martinez		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 8133 Golden Sands Dr		Amount of Each Disbursement this Period 1920.99 Transaction ID : VN81X9T1EF9
City Orlando State FL Zip Code 32819-6914	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Michelle Martinez		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 8133 Golden Sands Dr		Amount of Each Disbursement this Period 1920.99 Transaction ID : VN81X9TPYF9
City Orlando State FL Zip Code 32819-6914	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5092.85
TOTAL This Period (last page this line number only).....	

**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 58	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Cohn for Congress

Full Name (Last, First, Middle Initial) A. Michelle Martinez		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 8133 Golden Sands Dr		Amount of Each Disbursement this Period 481.61 Transaction ID : VN81X9TPY50
City Orlando	State FL Zip Code 32819-6914	
Purpose of Disbursement Mileage	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Michelle Martinez		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 8133 Golden Sands Dr		Amount of Each Disbursement this Period 382.36 Transaction ID : VN81X9TKVG0
City Orlando	State FL Zip Code 32819-6914	
Purpose of Disbursement Mileage	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Florida Blue		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address PO Box 1798		Amount of Each Disbursement this Period 362.51 Transaction ID : VN81X9TPY76
City Jacksonville	State FL Zip Code 32231-0014	
Purpose of Disbursement Health insurance	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	863.97
TOTAL This Period (last page this line number only).....	

**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 47 OF 58	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Cohn for Congress

Full Name (Last, First, Middle Initial) A. Michelle Martinez		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 8133 Golden Sands Dr		Amount of Each Disbursement this Period 2089.36 Transaction ID : VN81X9TPYB8
City Orlando	State FL Zip Code 32819-6914	
Purpose of Disbursement Payroll	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Mortgage Management Group		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014
Mailing Address 722 Sailfish Dr		Amount of Each Disbursement this Period 588.50 Transaction ID : VN81X9TQFS4
City Brandon	State FL Zip Code 33511-6230	
Purpose of Disbursement Rent	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. NGP VAN, Inc		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 450.00 Transaction ID : VN81X9TAZA9
City Washington	State DC Zip Code 20005-5006	
Purpose of Disbursement Software	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3127.86
TOTAL This Period (last page this line number only).....	

**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 48 OF 58	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Cohn for Congress

Full Name (Last, First, Middle Initial) A. NGP VAN, Inc		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 1650.00 Transaction ID : VN81X9TJ8X3
City Washington State DC Zip Code 20005-5006	Purpose of Disbursement Software Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 211 N Dale Mabry Hwy		Amount of Each Disbursement this Period 28.88 Transaction ID : VN81X9TKJE5
City Tampa State FL Zip Code 33609-1236	Purpose of Disbursement Office Supplies Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 211 N Dale Mabry Hwy		Amount of Each Disbursement this Period 7.99 Transaction ID : VN81X9TKJF3
City Tampa State FL Zip Code 33609-1236	Purpose of Disbursement Office Supplies Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1686.87
TOTAL This Period (last page this line number only).....	

**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 49 OF 58	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Cohn for Congress

Full Name (Last, First, Middle Initial) A. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 211 N Dale Mabry Hwy		Amount of Each Disbursement this Period 65.48
City Tampa	State FL Zip Code 33609-1236	
Purpose of Disbursement Office Supplies		Transaction ID : VN81X9TKJQ4
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 211 N Dale Mabry Hwy		Amount of Each Disbursement this Period 101.64
City Tampa	State FL Zip Code 33609-1236	
Purpose of Disbursement Office Supplies		Transaction ID : VN81X9TKJH7
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Paychex, Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 3060 Williams Dr Ste 200		Amount of Each Disbursement this Period 83.15
City Fairfax	State VA Zip Code 22031-4642	
Purpose of Disbursement Payroll Processing Fee		Transaction ID : VN81X9T1DX7
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	250.27
TOTAL This Period (last page this line number only).....	

**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 50 OF 58	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Cohn for Congress

Full Name (Last, First, Middle Initial) A. Paychex, Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 3060 Williams Dr Ste 200		Amount of Each Disbursement this Period 1134.14
City Fairfax	State VA Zip Code 22031-4642	
Purpose of Disbursement Payroll Taxes	Category/Type	Transaction ID : VN81X9T1DZ3
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Paychex, Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 3060 Williams Dr Ste 200		Amount of Each Disbursement this Period 1643.20
City Fairfax	State VA Zip Code 22031-4642	
Purpose of Disbursement Payroll Processing Fee	Category/Type	Transaction ID : VN81X9TM0J5
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Paychex, Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 3060 Williams Dr Ste 200		Amount of Each Disbursement this Period 103.05
City Fairfax	State VA Zip Code 22031-4642	
Purpose of Disbursement Payroll Taxes	Category/Type	Transaction ID : VN81X9TM0K3
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2880.39
TOTAL This Period (last page this line number only).....	

**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 51 OF 58	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Cohn for Congress

Full Name (Last, First, Middle Initial) A. Paychex, Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 3060 Williams Dr Ste 200		Amount of Each Disbursement this Period 94.55
City Fairfax	State VA Zip Code 22031-4642	
Purpose of Disbursement Payroll Taxes	Category/Type	Transaction ID : VN81X9TM0M1
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. Paychex, Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 3060 Williams Dr Ste 200		Amount of Each Disbursement this Period 1743.96
City Fairfax	State VA Zip Code 22031-4642	
Purpose of Disbursement Payroll Processing Fee	Category/Type	Transaction ID : VN81X9TM0N9
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) c. RP&G Printing		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 2664 Cypress Ridge Blvd Ste 104		Amount of Each Disbursement this Period 347.75
City Wesley Chapel	State FL Zip Code 33544-6325	
Purpose of Disbursement Printing	Category/Type	Transaction ID : VN81X9TQG17
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2186.26
TOTAL This Period (last page this line number only).....	

**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 52 OF 58	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Cohn for Congress

Full Name (Last, First, Middle Initial) A. Steve Saladino		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 2379 W Beach St		Amount of Each Disbursement this Period 412.50 Transaction ID : VN81X9TM003
City Tampa State FL Zip Code 33607-2611	Purpose of Disbursement Website Services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Shell Oil		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 5602 E Fowler Ave		Amount of Each Disbursement this Period 81.48 Transaction ID : VN81X9TPYJ3
City Temple Terrace State FL Zip Code 33617-2308	Purpose of Disbursement Travel	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Tampa Electric		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address PO Box 111		Amount of Each Disbursement this Period 59.29 Transaction ID : VN81X9TKPB9
City Tampa State FL Zip Code 33601-0111	Purpose of Disbursement Utilities	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	553.27
TOTAL This Period (last page this line number only).....	

**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 53 OF 58			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Cohn for Congress

Full Name (Last, First, Middle Initial) A. USAirways		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 4000 E Sky Harbor Blvd		Amount of Each Disbursement this Period 279.00
City Phoenix	State AZ	
Zip Code 85034-3802	Purpose of Disbursement Travel	Transaction ID : VN81X9TKZW1
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. USAirways		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 4000 E Sky Harbor Blvd		Amount of Each Disbursement this Period 43.00
City Phoenix	State AZ	
Zip Code 85034-3802	Purpose of Disbursement Travel	Transaction ID : VN81X9TKZX9
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. USAirways		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 4000 E Sky Harbor Blvd		Amount of Each Disbursement this Period 18.00
City Phoenix	State AZ	
Zip Code 85034-3802	Purpose of Disbursement Travel	Transaction ID : VN81X9TKZZ5
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	340.00
TOTAL This Period (last page this line number only).....	

**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 54 OF 58			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Cohn for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement											
A. USPS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>07</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	07		07		2014
M M	/	D D	/	Y Y Y Y									
07		07		2014									
Mailing Address 16350 Bruce B Donns Blvd		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Tampa</td> <td>FL</td> <td>33647</td> </tr> </table>		City	State	Zip Code	Tampa	FL	33647	<table border="1"> <tr> <td>2.03</td> </tr> </table>		2.03			
City	State	Zip Code											
Tampa	FL	33647											
2.03													
Purpose of Disbursement Postage		Transaction ID : VN81X9TKP28											
Candidate Name		Category/Type											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:													

Full Name (Last, First, Middle Initial)		Date of Disbursement											
B. USPS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>07</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	07		07		2014
M M	/	D D	/	Y Y Y Y									
07		07		2014									
Mailing Address 16350 Bruce B Donns Blvd		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Tampa</td> <td>FL</td> <td>33647</td> </tr> </table>		City	State	Zip Code	Tampa	FL	33647	<table border="1"> <tr> <td>2.38</td> </tr> </table>		2.38			
City	State	Zip Code											
Tampa	FL	33647											
2.38													
Purpose of Disbursement Postage		Transaction ID : VN81X9TKP43											
Candidate Name		Category/Type											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:													

Full Name (Last, First, Middle Initial)		Date of Disbursement											
C. USPS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>10</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	07		10		2014
M M	/	D D	/	Y Y Y Y									
07		10		2014									
Mailing Address 16350 Bruce B Donns Blvd		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Tampa</td> <td>FL</td> <td>33647</td> </tr> </table>		City	State	Zip Code	Tampa	FL	33647	<table border="1"> <tr> <td>49.00</td> </tr> </table>		49.00			
City	State	Zip Code											
Tampa	FL	33647											
49.00													
Purpose of Disbursement Postage		Transaction ID : VN81X9TKP51											
Candidate Name		Category/Type											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:													

SUBTOTAL of Disbursements This Page (optional).....	53.41
TOTAL This Period (last page this line number only).....	

**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 55 OF 58	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Cohn for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. USPS		M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 16350 Bruce B Donns Blvd		Amount of Each Disbursement this Period 49.00
City Tampa	State FL Zip Code 33647	
Purpose of Disbursement Postage	Category/Type	Transaction ID : VN81X9TKP69
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. USPS		M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 16350 Bruce B Donns Blvd		Amount of Each Disbursement this Period 52.57
City Tampa	State FL Zip Code 33647	
Purpose of Disbursement Postage	Category/Type	Transaction ID : VN81X9TKP77
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. Verizon		M M / D D / Y Y Y Y 07 / 29 / 2014
Mailing Address 140 West St		Amount of Each Disbursement this Period 145.33
City New York	State NY Zip Code 10007-2141	
Purpose of Disbursement Telephone Services	Category/Type	Transaction ID : VN81X9TKPE2
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	246.90
TOTAL This Period (last page this line number only).....	

**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 56 OF 58		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Cohn for Congress

Full Name (Last, First, Middle Initial) A. Vonage		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2014
Mailing Address 23 Main St		Amount of Each Disbursement this Period 75.51 Transaction ID : VN81X9TKPC7
City Holmdel	State NJ	
Zip Code 07733-2136	Purpose of Disbursement Telephone Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
Candidate Name	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:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
Candidate Name	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:	

SUBTOTAL of Disbursements This Page (optional).....	75.51
TOTAL This Period (last page this line number only).....	60422.91

**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 57 OF 58			
	<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)
Cohn for Congress

Full Name (Last, First, Middle Initial) A. Barbara Sundheimer		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address 7501 Mahogany Bend PI		Amount of Each Disbursement this Period 500.00
City Boca Raton	State FL Zip Code 33434-5159	
Purpose of Disbursement Refund of Contribution	Candidate Name	Transaction ID : VN81X9TKH35
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	500.00

**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 58 OF 58	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Cohn for Congress

Full Name (Last, First, Middle Initial) A. North Tampa Athletic Association		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2014
Mailing Address PO Box 46847		Amount of Each Disbursement this Period 500.00
City Tampa State FL Zip Code 33646-0108	Purpose of Disbursement Donation	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : VN81X9TM044
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name		
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:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name		
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:		

SUBTOTAL of Disbursements This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	500.00