

**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 169 OF 173			
	<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)
Steve Israel for Congress Committee

Full Name (Last, First, Middle Initial) A. Working Families Party Of New York		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address 88 Third Ave		Amount of Each Disbursement this Period 1000.00 Transaction ID : D395131
City Brooklyn	State NY	
Zip Code 11217	Purpose of Disbursement Nonfederal Contribution	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) B. Nassau County Independence Party		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address 219 Mineola Blvd.		Amount of Each Disbursement this Period 350.00 Transaction ID : D395132
City Mineola	State NY	
Zip Code 11501	Purpose of Disbursement Nonfederal Contribution	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. National Action Committee (NACPAC)		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address 3389 Sheridan Street Suite 424		Amount of Each Disbursement this Period 500.00 Transaction ID : D397674
City Hollywood	State FL	
Zip Code 33021	Purpose of Disbursement 2014 Contribution	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).....	1850.00
TOTAL This Period (last page this line number only).....	