

**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 63 OF 64			
	<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)  
**Mark Pocan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Takano for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2012
Mailing Address PO Box 5214		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : D658694</b>
City Riverside	State CA	
Zip Code 92517-5214	Purpose of Disbursement Contribution	Category/ Type
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: CA District: 41	

Full Name (Last, First, Middle Initial) <b>B. Cicilline Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2012
Mailing Address 236 Hope St		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : D664020</b>
City Providence	State RI	
Zip Code 02906-2212	Purpose of Disbursement Contribution	Category/ Type
Candidate Name <b>David N Cicilline</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: RI District: 01	

Full Name (Last, First, Middle Initial) <b>C.</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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2000.00
<b>TOTAL</b> This Period (last page this line number only).....	8000.00