

**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 85 OF 91	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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)
Richmond for Congress

Full Name (Last, First, Middle Initial) A. BONNIE WATSON COLEMAN FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 180 UPLAND AVENUE		Amount of Each Disbursement this Period 1000.00 Transaction ID : D404327
City EWING State NJ Zip Code 08638	Purpose of Disbursement Contribution	
Candidate Name BONNIE WATSON COLEMAN		Category/ Type
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: NJ District: 12		

Full Name (Last, First, Middle Initial) B. Democratic Congressional Campaign Committee		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 430 S Capitol St SE FI 2		Amount of Each Disbursement this Period 15000.00 Transaction ID : D399838
City Washington State DC Zip Code 20003-4024	Purpose of Disbursement Contribution	
Candidate Name		Category/ Type
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. Dooky Chase Foundation		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 2301 Orleans Ave.		Amount of Each Disbursement this Period 250.00 Transaction ID : D402995
City New Orleans State LA Zip Code 70119	Purpose of Disbursement Donation	
Candidate Name		Category/ Type
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).....	16250.00
TOTAL This Period (last page this line number only).....	