

**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 28 OF 33		
	<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)
Cohen for Congress

A. Full Name (Last, First, Middle Initial) NATIONAL ASSOCIATION OF BROADCASTERS POLITICAL ACTION COMMITTEE (NABPAC)		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2014	
Mailing Address 1771 N STREET NW		Amount of Each Disbursement this Period 3000.00	
City WASHINGTON State DC Zip Code 20036	Purpose of Disbursement Fundraising Event	Transaction ID : D452286	
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:	Category/Type		

B. Full Name (Last, First, Middle Initial) Rick Maynard		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014	
Mailing Address 2530 Harvard		Amount of Each Disbursement this Period 1000.00	
City Memphis State TN Zip Code 38112	Purpose of Disbursement Payroll	Transaction ID : D452290	
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:	Category/Type		

C. Full Name (Last, First, Middle Initial) Rick Maynard		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2014	
Mailing Address 2530 Harvard		Amount of Each Disbursement this Period 1000.00	
City Memphis State TN Zip Code 38112	Purpose of Disbursement Payroll	Transaction ID : D452285	
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:	Category/Type		

SUBTOTAL of Disbursements This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	[Empty Box]