

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NEA Fund for Children and Public Education

Full Name (Last, First, Middle Initial)

A. Schertzing for Congress

Mailing Address P.O. Box 4382

City East Lansing State MI Zip Code 48826

Purpose of Disbursement
Contribution

011

Candidate Name

Eric Schertzing

Category/
Type

Office Sought: House
 Senate
 President
State: MI District: 08

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 24 / 2014

Transaction ID : B538039

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

B. McCollum for Congress

Mailing Address P.O. Box 14131

City St. Paul State MN Zip Code 55114

Purpose of Disbursement
Contribution

011

Candidate Name

Betty McCollum

Category/
Type

Office Sought: House
 Senate
 President
State: MN District: 04

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 31 / 2014

Transaction ID : B538621

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

C. New Jersey Democratic State Committee

Mailing Address 196 West State Street

City Trenton State NJ Zip Code 08608

Purpose of Disbursement
Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Not Applicable

Date of Disbursement

MM / DD / YYYY
10 / 21 / 2014

Transaction ID : B537464

Amount of Each Disbursement this Period

2500.00

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

9500.00

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