

**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)  
**CMR Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Ryan Costello for Congress**

Mailing Address PO Box 3154

City West Chester State PA Zip Code 19381-3154

Purpose of Disbursement  
Committee Contribution

011

Candidate Name

**Ryan A. Costello**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: PA District: 06

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2014

Transaction ID : SB23-893-1108-e

Amount of Each Disbursement this Period

2000

Full Name (Last, First, Middle Initial)

**B. Senger For Congress**

Mailing Address PO Box 4883

City Naperville State IL Zip Code 60567-4883

Purpose of Disbursement  
Committee Contribution

011

Candidate Name

**Darlene Senger**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: IL District: 11

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 23 / 2014

Transaction ID : SB23-868-1069-e

Amount of Each Disbursement this Period

2000

Full Name (Last, First, Middle Initial)

**C. Southerland For Congress**

Mailing Address PO Box 1692

City Lynn Haven State FL Zip Code 32444-6492

Purpose of Disbursement  
Committee Contribution

011

Candidate Name

**William Steve Southerland II**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: FL District: 02

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2014

Transaction ID : SB23-231-1100-e

Amount of Each Disbursement this Period

2500

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

6500.00

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