

**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)
CDM Smith Inc. National PAC

Full Name (Last, First, Middle Initial)

A. ADAM HASNER FOR US HOUSE

Mailing Address PO BOX 276093

City BOCA RATON State FL Zip Code 33427

Purpose of Disbursement
Campaign Contribution

011

Candidate Name

ADAM HASNER

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: FL District: 22

Date of Disbursement

MM / DD / YYYY
03 / 21 / 2012

Transaction ID : SB23.12477

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. BEN CARDIN FOR SENATE

Mailing Address P.O. BOX 21093

City CATONSVILLE State MD Zip Code 21228

Purpose of Disbursement
Campaign Contribution

011

Candidate Name

BENJAMIN L CARDIN

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MD District: 00

Date of Disbursement

MM / DD / YYYY
03 / 13 / 2012

Transaction ID : SB23.12450

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. BOB CASEY FOR SENATE INC

Mailing Address 700 13TH STREET NW SUITE 600

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
Campaign Contribution

011

Candidate Name

ROBERT P JR CASEY

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: PA District: 00

Date of Disbursement

MM / DD / YYYY
03 / 19 / 2012

Transaction ID : SB23.12454

Amount of Each Disbursement this Period

250.00

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

2250.00

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