

**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)

PepsiCo, Inc. Concerned Citizens Fund

Full Name (Last, First, Middle Initial)

A. POMPEO FOR CONGRESS INC

Mailing Address PO BOX 780146

City State Zip Code
Wichita KS 67278-0146

Purpose of Disbursement
Political contribution

Candidate Name

Rep. Mike R. Pompeo

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: KS District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	28	/	2015

Transaction ID : B0EE41F076E114288AD4

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. PEOPLE FOR BEN

Mailing Address PO BOX 31129

City State Zip Code
SANTA FE NM 87594

Purpose of Disbursement
Political contribution

Candidate Name

Rep. Ben Ray Lujan Jr.

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NM District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	11	/	2015

Transaction ID : B8129930D1ECA4AE4A9A

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. BLUM FOR CONGRESS

Mailing Address 2728 ASBURY ROAD SUITE 400

City State Zip Code
DUBUQUE IA 52001

Purpose of Disbursement
Political contribution

Candidate Name

Rep. Rodney L. Blum

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: IA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	12	/	2015

Transaction ID : B8F4BC872E3EC42D3AD9

Amount of Each Disbursement this Period

1000.00

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

3500.00

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

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