

**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"/> 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)

Kellogg Company Better Government Committee

Full Name (Last, First, Middle Initial)

A. Great Lakes PAC

Mailing Address 1718 M St. NW
#234

City
Washington

State
DC

Zip Code
20036

Purpose of Disbursement
2018 Contribution

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	8		2	0	1	8

FEC Identification Number

C []

Transaction ID : 77373611

Amount of Each Disbursement this Period

[] 5000.00

2018 Contribution

Memo Item

Full Name (Last, First, Middle Initial)

B. Deb Fischer For Us Senate Inc

Mailing Address 5555 South St

City
Lincoln

State
NE

Zip Code
68506

Purpose of Disbursement
2018 Contribution

011

Category/
Type

Candidate Name

Fischer, Deb, , Sen.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: NE District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	8		2	0	1	8

FEC Identification Number

C C00498907

Transaction ID : 77373616

Amount of Each Disbursement this Period

[] 1000.00

2018 Contribution

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

[]

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C []

Amount of Each Disbursement this Period

[]

Memo Item

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

[] 6000.00

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

[] 14000.00