

**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)  
**Cracker Barrel Old Country Store, Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Jim Tracy For Congress**

Mailing Address PO Box 332490

City Murfreesboro State TN Zip Code 37133

Purpose of Disbursement  
2014 Primary

Candidate Name

**Jim Tracy**

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

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

**011**  
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2014

**Transaction ID : 21587145**

Amount of Each Disbursement this Period

1000.00

2014 Primary

Full Name (Last, First, Middle Initial)

**B. Cantor For Congress**

Mailing Address PO Box 17813

City Richmond State VA Zip Code 23226

Purpose of Disbursement  
2014 Primary

Candidate Name

**Rep. Eric I. Cantor**

Office Sought:  House  
 Senate  
 President  
State: VA District: 07

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

**011**  
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2014

**Transaction ID : 21587149**

Amount of Each Disbursement this Period

2500.00

2014 Primary

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

3500.00

3500.00