

**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)  
**Land O'Lakes, Inc., PAC**

Full Name (Last, First, Middle Initial)

**A. Rep. Blaine Luetkemeyer**

Mailing Address 1740 LHOB

City Washington State DC Zip Code 20515-2509

Purpose of Disbursement  
Contribution to Federal Candidate

Candidate Name  
**Rep. Blaine Luetkemeyer**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: MO District: 09

Date of Disbursement

/  /   
04 / 13 / 2015

**Transaction ID : D165867**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Rep. Bob Gibbs**

Mailing Address 329 CHOB

City Washington State DC Zip Code 20515-3518

Purpose of Disbursement  
Contribution to Federal Candidate

Candidate Name  
**Rep. Bob Gibbs**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: OH District: 18

Date of Disbursement

/  /   
03 / 25 / 2015

**Transaction ID : D165877**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Rep. Cheri Bustos**

Mailing Address 1009 LHOB

City Washington State DC Zip Code 20515-6601

Purpose of Disbursement  
Contribution to Federal Candidate

Candidate Name  
**Rep. Cheri Bustos**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: IL District: 17

Date of Disbursement

/  /   
03 / 17 / 2015

**Transaction ID : D166037**

Amount of Each Disbursement this Period

1000.00

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

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

3000.00