

**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)

**SYNGENTA CORPORATION EMPLOYEE POLITICAL ACTION COMMITTEE (SYNGENTA PAC)**

Full Name (Last, First, Middle Initial)

**A. CROPLIFE AMERICA POLITICAL ACTION COMMITTEE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		24		2015

Mailing Address 1156 15TH STREET NW SUITE 400

**Transaction ID : SB23.82024**

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

6,000.00
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Purpose of Disbursement

Category/Type
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Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. DAVID ROUZER FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		22		2015

Mailing Address PO BOX 2267

**Transaction ID : SB23.81914**

City SMITHFIELD State NC Zip Code 27577

Amount of Each Disbursement this Period

2,000.00
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Purpose of Disbursement

Category/Type
---------------

Candidate Name

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

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. DAVID SCOTT FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		14		2015

Mailing Address P.O. BOX 960821

**Transaction ID : SB23.81961**

City RIVERDALE State GA Zip Code 30296

Amount of Each Disbursement this Period

2,000.00
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Purpose of Disbursement

Category/Type
---------------

Candidate Name

Office Sought:  House  Senate  President  
State: GA District: 13

Disbursement For:  Primary  General  Other (specify) ▼

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

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

6,000.00
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6,000.00
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