

**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)

**Keeping Republican Ideas Strong Timely & Inventive (KRISTI PAC)**

Full Name (Last, First, Middle Initial)

**A. Comstock for Congress**

Mailing Address PO Box 71596

City State Zip Code  
Henrico VA 23255

Purpose of Disbursement  
Political Contribution

Candidate Name

**Barbara J. Comstock**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: VA District: 10

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 16 / 2014

**Transaction ID : SB23.4546**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Comstock for Congress**

Mailing Address PO Box 71596

City State Zip Code  
Henrico VA 23255

Purpose of Disbursement  
Political Contribution

Candidate Name

**Barbara J. Comstock**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: VA District: 10

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 24 / 2014

**Transaction ID : SB23.4573**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

**C. Friends of David Jolly**

Mailing Address PO Box 1158

City State Zip Code  
Indian Rocks Beach FL 33785

Purpose of Disbursement  
Political Contribution

Candidate Name

**David W Jolly**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Special-General

State: FL District: 13

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2014

**Transaction ID : SB23.4550**

Amount of Each Disbursement this Period

1000.00

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

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

3500.00