

**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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
National Pork Producers Pork PAC

Full Name (Last, First, Middle Initial) A. Team Marshall		Date of Disbursement MM / DD / YYYY 03 / 15 / 2018
Mailing Address PO Box 26141		FEC Identification Number C 00632950 Transaction ID : D182695
City Alexandria	State VA	Zip Code 22313-6141
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 5000.00
Candidate Name Marshall, Roger, , ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: KS District: 01	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Team Marshall		Date of Disbursement MM / DD / YYYY 03 / 15 / 2018
Mailing Address PO Box 26141		FEC Identification Number C 00632950 Transaction ID : D182696
City Alexandria	State VA	Zip Code 22313-6141
Purpose of Disbursement contribution		Amount of Each Disbursement this Period 1500.00
Candidate Name Marshall, Roger, , ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: KS District: 01	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	6500.00
TOTAL This Period (last page this line number only).....▶	76500.00