

**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)  
**CONTINUING AMERICAS STRENGTH & SECURITY**

Full Name (Last, First, Middle Initial)

**A. KELLY A AYOTTE**

Mailing Address PO BOX 937

City MANCHESTER State NH Zip Code 03105

Purpose of Disbursement  
CAMPAIGN CONTRIBUTION

Candidate Name  
**KELLY A AYOTTE**

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

Date of Disbursement

MM / DD / YYYY  
08 / 31 / 2015

Transaction ID : **SB23.4860**

Amount of Each Disbursement this Period

5000.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. MICHAEL D CRAPO**

Mailing Address PO BOX 1948

City BOISE State ID Zip Code 83701

Purpose of Disbursement  
CAMPAIGN CONTRIBUTION

Candidate Name  
**MICHAEL D CRAPO**

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

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2015

Transaction ID : **SB23.4857**

Amount of Each Disbursement this Period

5000.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF JOE HECK**

Mailing Address PO BOX 753908

City LAS VEGAS State NV Zip Code 89136

Purpose of Disbursement  
CAMPAIGN CONTRIBUTION

Candidate Name  
**JOE HECK**

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

Date of Disbursement

MM / DD / YYYY  
08 / 31 / 2015

Transaction ID : **SB23.4743**

Amount of Each Disbursement this Period

5000.00

Category/  
Type

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

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

15000.00