

**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

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NAME OF COMMITTEE (In Full)

**Keystone Alliance Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Jindal for President**

Mailing Address PO Box 5101

City  
Baton Rouge

State  
LA

Zip Code  
70821-5101

Purpose of Disbursement  
Contribution to Committee

Candidate Name

**Jindal, Bobby, , Hon.,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			11			2015			

FEC Identification Number

**C**

**Transaction ID : B9BD2A0066**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Petri for Congress**

Mailing Address PO Box 544

City  
Langhorne

State  
PA

Zip Code  
19047-0544

Purpose of Disbursement  
Contribution to Committee

Candidate Name

**Petri, Scott, A., Rep.,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: PA District: 08

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			20			2015			

FEC Identification Number

**C**

**Transaction ID : BBFC2FE37B**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Marino For Congress**

Mailing Address PO BOX 653

City  
Williamsport

State  
PA

Zip Code  
17703-0653

Purpose of Disbursement  
Contribution to Committee

Candidate Name

**Marino, Tom, , Rep.,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: PA District: 10

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			22			2015			

FEC Identification Number

**C**

**Transaction ID : BED180932F**

Amount of Each Disbursement this Period

Memo Item

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

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

<input type="text" value="12000.00"/>
<input type="text" value=""/>