

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

ADVANCING FREEDOM FUND

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>	<input type="text" value="6904.78"/>	<input type="text" value="6904.78"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="6904.78"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="154836.91"/>	<input type="text" value="154836.91"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="161741.69"/>	<input type="text" value="161741.69"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="146993.96"/>	<input type="text" value="146993.96"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="14747.73"/>	<input type="text" value="14747.73"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="5250.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

ADVANCING FREEDOM FUND

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	21303.00	21303.00
(ii) Unitemized	133533.91	133533.91
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	154836.91	154836.91
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	154836.91	154836.91
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	154836.91	154836.91
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	154836.91	154836.91

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	146458.96	146458.96
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	146458.96	146458.96
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	535.00	535.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	535.00	535.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	146993.96	146993.96
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	146993.96	146993.96

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	154836.91	154836.91
34. Total Contribution Refunds (from Line 28(d))	535.00	535.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	154301.91	154301.91
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	146458.96	146458.96
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	146458.96	146458.96

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA
Transaction ID :

This report is amended to update identification information, including the occupation and employer information, for several contributors. This report increases the amount of itemized receipts from \$16888 to \$21303. This increase is due to the aggregation of contributor records once additional information was received via responses from contributors responding to Advancing Freedom Fund's follow up requests for missing identification information. The totals as reflected on the Summary Page for: Receipts (Line 6(c)), Disbursements (Line 7), Cash on Hand (Line 8), and Debts and Obligations (Line 9) are unchanged.

Form/Schedule:
Transaction ID:

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
ADVANCING FREEDOM FUND

Full Name (Last, First, Middle Initial) A. CHARLOTTE ABELL		Date of Receipt MM / DD / YYYY 02 / 13 / 2015
Mailing Address 3789 RUM ROW		Transaction ID : SA11AI.4473
City NAPLES	State FL	Zip Code 34102
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 400.00	
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. CHARLOTTE ABELL		Date of Receipt MM / DD / YYYY 05 / 04 / 2015
Mailing Address 3789 RUM ROW		Transaction ID : SA11AI.4474
City NAPLES	State FL	Zip Code 34102
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 900.00	
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	

Full Name (Last, First, Middle Initial) C. MARGARET ADAMS		Date of Receipt MM / DD / YYYY 05 / 07 / 2015
Mailing Address 8240 HEALY DR		Transaction ID : SA11AI.4549
City MOBILE	State AL	Zip Code 36695
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	1400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 45
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
ADVANCING FREEDOM FUND

A. MARGARET ADAMS
 Full Name (Last, First, Middle Initial)
 Mailing Address 8240 HEALY DR
 City MOBILE State AL Zip Code 36695
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2015
Transaction ID : SA11AI.4551
 Amount of Each Receipt this Period
 100.00

B. JOHN BARNA
 Full Name (Last, First, Middle Initial)
 Mailing Address 122 HEATHER COURT
 City PALM DESERT State CA Zip Code 92260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2015
Transaction ID : SA11AI.4341
 Amount of Each Receipt this Period
 100.00

C. KATHLEEN BEST
 Full Name (Last, First, Middle Initial)
 Mailing Address 805 S 173RD CT APT 320
 City OMAHA State NE Zip Code 68118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 04 / 2015
Transaction ID : SA11AI.4541
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 45
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
ADVANCING FREEDOM FUND

A. KATHLEEN BEST
 Full Name (Last, First, Middle Initial)
 Mailing Address 805 S 173RD CT APT 320
 City OMAHA State NE Zip Code 68118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 11 / 2015
Transaction ID : SA11AI.4542
 Amount of Each Receipt this Period
 250.00

B. ADELE BINDER
 Full Name (Last, First, Middle Initial)
 Mailing Address 225 S LAKE AVE
 City PASADENA State CA Zip Code 91101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 03 / 2015
Transaction ID : SA11AI.4407
 Amount of Each Receipt this Period
 300.00

C. JANICE BIRKELAND
 Full Name (Last, First, Middle Initial)
 Mailing Address 509 ROUTE 530 APT 166
 City MANCHESTER TOWNSHIP State NJ Zip Code 08759
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 11 / 2015
Transaction ID : SA11AI.4491
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 525.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 45
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
ADVANCING FREEDOM FUND

A. KELLY BOEN
Full Name (Last, First, Middle Initial)
Mailing Address 280 E 64TH AVE
City DENVER State CO Zip Code 80221
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt 02 / 15 / 2015
Transaction ID : SA11AI.4429
Amount of Each Receipt this Period 125.00

B. RICHARD BOWMAN
Full Name (Last, First, Middle Initial)
Mailing Address 4200 PARK BLVD NO 533
City OAKLAND State CA Zip Code 94602
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 276.00

Date of Receipt 05 / 12 / 2015
Transaction ID : SA11AI.4479
Amount of Each Receipt this Period 188.00

C. CHARLES BRUNIE
Full Name (Last, First, Middle Initial)
Mailing Address 5 PARTRIDGE HOLLOW RD
City GREENWICH State CT Zip Code 06831
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 04 / 2015
Transaction ID : SA11AI.4489
Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional).....▶ 813.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 45
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
ADVANCING FREEDOM FUND

A. HELEN COFFEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 2607 ALBERT PIKE RD
 City HOT SPRINGS State AR Zip Code 71913
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 04 / 2015
Transaction ID : SA11AI.4420
 Amount of Each Receipt this Period
 200.00

B. HELEN COFFEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 2607 ALBERT PIKE RD
 City HOT SPRINGS State AR Zip Code 71913
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 04 / 2015
Transaction ID : SA11AI.5576
 Amount of Each Receipt this Period
 200.00

C. BRENDA DEAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 911 S PRAIRIE LN
 City RAYMORE State MO Zip Code 64083
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 04 / 2015
Transaction ID : SA11AI.4561
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 650.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
ADVANCING FREEDOM FUND

A. BRENDA DEAN
Full Name (Last, First, Middle Initial)

Mailing Address 911 S PRAIRIE LN

City RAYMORE State MO Zip Code 64083

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 11 / 2015

Transaction ID : SA11AI.4562

Amount of Each Receipt this Period
250.00

B. DONNA DENNIS
Full Name (Last, First, Middle Initial)

Mailing Address 54894 300TH ST

City Austin State MN Zip Code 55912

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **205.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 12 / 2015

Transaction ID : SA11AI.5898

Amount of Each Receipt this Period
50.00

C. Druscilla Doehrman
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 2165

City Naples State FL Zip Code 34108

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 20 / 2015

Transaction ID : SA11AI.4586

Amount of Each Receipt this Period
400.00

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 45
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
ADVANCING FREEDOM FUND

A. JERRY DOHERTY
 Full Name (Last, First, Middle Initial)
 Mailing Address 21 SUSAN LN
 City COUNCIL BLUFFS State IA Zip Code 51503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 09 / 2015
Transaction ID : SA11AI.4390
 Amount of Each Receipt this Period
 250.00

B. LOIS EDGERLY
 Full Name (Last, First, Middle Initial)
 Mailing Address 32 HIGHLAND ST
 City CAMBRIDGE State MA Zip Code 02138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 05 / 2015
Transaction ID : SA11AI.4455
 Amount of Each Receipt this Period
 100.00

C. LOIS EDGERLY
 Full Name (Last, First, Middle Initial)
 Mailing Address 32 HIGHLAND ST
 City CAMBRIDGE State MA Zip Code 02138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 04 / 2015
Transaction ID : SA11AI.4459
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 45
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
ADVANCING FREEDOM FUND

A. LOIS EDGERLY
 Full Name (Last, First, Middle Initial)
 Mailing Address 32 HIGHLAND ST
 City CAMBRIDGE State MA Zip Code 02138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2015
Transaction ID : SA11AI.4456
 Amount of Each Receipt this Period
 50.00

B. LOIS EDGERLY
 Full Name (Last, First, Middle Initial)
 Mailing Address 32 HIGHLAND ST
 City CAMBRIDGE State MA Zip Code 02138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2015
Transaction ID : SA11AI.4460
 Amount of Each Receipt this Period
 50.00

C. LOIS EDGERLY
 Full Name (Last, First, Middle Initial)
 Mailing Address 32 HIGHLAND ST
 City CAMBRIDGE State MA Zip Code 02138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2015
Transaction ID : SA11AI.4461
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
ADVANCING FREEDOM FUND

A. RAYMOND Fink
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 134

City Williamston State MI Zip Code 48895

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 05 / 04 / 2015
Transaction ID : SA11AI.4573

Amount of Each Receipt this Period
 100.00

B. RAYMOND Fink
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 134

City Williamston State MI Zip Code 48895

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 05 / 11 / 2015
Transaction ID : SA11AI.4574

Amount of Each Receipt this Period
 150.00

C. FRANCIS FITZPATRICK
Full Name (Last, First, Middle Initial)

Mailing Address 100 E ANCHOR AVE

City EUGENE State OR Zip Code 97404

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 02 / 02 / 2015
Transaction ID : SA11AI.4322

Amount of Each Receipt this Period
 300.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
ADVANCING FREEDOM FUND

A. FRANCIS FITZPATRICK
Full Name (Last, First, Middle Initial)

Mailing Address 100 E ANCHOR AVE

City EUGENE State OR Zip Code 97404

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2015

Transaction ID : SA11AI.4321

Amount of Each Receipt this Period
 200.00

B. FRANCIS FITZPATRICK
Full Name (Last, First, Middle Initial)

Mailing Address 100 E ANCHOR AVE

City EUGENE State OR Zip Code 97404

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2015

Transaction ID : SA11AI.4323

Amount of Each Receipt this Period
 200.00

C. BETTY FOGLEMAN
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 510

City BUTNER State NC Zip Code 27509

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2015

Transaction ID : SA11AI.4564

Amount of Each Receipt this Period
 600.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 45
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
ADVANCING FREEDOM FUND

Full Name (Last, First, Middle Initial)
A. BETTY FOGLEMAN

Mailing Address **PO BOX 510**

City **BUTNER** State **NC** Zip Code **27509**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1200.00**

Date of Receipt
05 / 15 / 2015
Transaction ID : SA11AI.6333

Amount of Each Receipt this Period
600.00

Full Name (Last, First, Middle Initial)
B. SANDRA FOSTER

Mailing Address **2712 CREEKWOOD DR**

City **GRAPEVINE** State **TX** Zip Code **76051**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Best Effort Attempted to Collect** Occupation **Best Effort Attempted to Collect**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
02 / 05 / 2015
Transaction ID : SA11AI.4427

Amount of Each Receipt this Period
400.00

Full Name (Last, First, Middle Initial)
C. PERRY GAME

Mailing Address **3493 AVIARY WAY**

City **WOODBIDGE** State **VA** Zip Code **22192**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
05 / 10 / 2015
Transaction ID : SA11AI.4471

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **1500.00**

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
ADVANCING FREEDOM FUND

Full Name (Last, First, Middle Initial) A. Nancy Garrett		Date of Receipt MM / DD / YYYY 05 / 12 / 2015 Transaction ID : SA11AI.6516
Mailing Address 7799 S.W. Scholls Ferry Road		Amount of Each Receipt this Period 100.00
City Beaverton	State OR	Zip Code 97008
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. NATALIA HARKAWAY		Date of Receipt MM / DD / YYYY 05 / 13 / 2015 Transaction ID : SA11AI.4534
Mailing Address 7819 SYCAMORE DR		Amount of Each Receipt this Period 300.00
City FALLS CHURCH	State VA	Zip Code 22042
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ralph Heck		Date of Receipt MM / DD / YYYY 02 / 09 / 2015 Transaction ID : SA11AI.4369
Mailing Address 1548 Keyes Rd		Amount of Each Receipt this Period 350.00
City Leasburg	State MO	Zip Code 65535
FEC ID number of contributing federal political committee. C		
Name of Employer Best Effort Attempted to Collect	Occupation Best Effort Attempted to Collect	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 OF 45
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ADVANCING FREEDOM FUND

A. JACK HERETH
Full Name (Last, First, Middle Initial)

Mailing Address 2269 E CHEROKEE DR

City WOODSTOCK State GA Zip Code 30188

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Best Effort Attempted to Collect Best Effort Attempted to Collect

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 11 / 2015

Transaction ID : SA11AI.4410

Amount of Each Receipt this Period
150.00

B. JEAN HOLDREN
Full Name (Last, First, Middle Initial)

Mailing Address 3246 GATEWAY CIR

City CHARLOTTESVILLE State VA Zip Code 22911

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Best Effort Attempted to Collect Best Effort Attempted to Collect

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 12 / 2015

Transaction ID : SA11AI.4469

Amount of Each Receipt this Period
250.00

c. Donna Kellogg
Full Name (Last, First, Middle Initial)

Mailing Address 11991 36Th Street NW

City Watford City State ND Zip Code 58854

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Best Effort Attempted to Collect Best Effort Attempted to Collect

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 13 / 2015

Transaction ID : SA11AI.4335

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 900.00

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
ADVANCING FREEDOM FUND

A. GARY KIRKE
Full Name (Last, First, Middle Initial)

Mailing Address 5465 MILLS CIVIC PKWY

City WEST DES MOINES	State IA	Zip Code 50266
-------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation DOCTOR
-----------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 05 / 2015
Transaction ID : SA11AI.4509

Amount of Each Receipt this Period
600.00

B. GARY KIRKE
Full Name (Last, First, Middle Initial)

Mailing Address 5465 MILLS CIVIC PKWY

City WEST DES MOINES	State IA	Zip Code 50266
-------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation DOCTOR
-----------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 05 / 2015
Transaction ID : SA11AI.7554

Amount of Each Receipt this Period
600.00

C. GARY KIRKE
Full Name (Last, First, Middle Initial)

Mailing Address 5465 MILLS CIVIC PKWY

City WEST DES MOINES	State IA	Zip Code 50266
-------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation DOCTOR
-----------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2015
Transaction ID : SA11AI.4510

Amount of Each Receipt this Period
600.00

SUBTOTAL of Receipts This Page (optional).....▶	1800.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 21 OF 45
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
ADVANCING FREEDOM FUND

A. LILLIAN KREUGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 6756 N 72Nd Avenue
 City Wausau State WI Zip Code 54401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Best Effort Attempted to Collect Best Effort Attempted to Collect
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 20 / 2015
Transaction ID : SA11AI.4519
 Amount of Each Receipt this Period
 100.00

B. Alice Lebewohl
 Full Name (Last, First, Middle Initial)
 Mailing Address 5500 Calle Real APT A 129
 City Santa Barbara State CA Zip Code 93111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 09 / 2015
Transaction ID : SA11AI.4512
 Amount of Each Receipt this Period
 400.00

C. Alice Lebewohl
 Full Name (Last, First, Middle Initial)
 Mailing Address 5500 Calle Real APT A 129
 City Santa Barbara State CA Zip Code 93111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 09 / 2015
Transaction ID : SA11AI.7775
 Amount of Each Receipt this Period
 400.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 900.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
ADVANCING FREEDOM FUND

A. Alice Lebewohl
 Full Name (Last, First, Middle Initial)
 Mailing Address 5500 Calle Real APT A 129
 City Santa Barbara State CA Zip Code 93111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 08 / 2015
Transaction ID : SA11AI.4513
 Amount of Each Receipt this Period
 200.00

B. Alice Lebewohl
 Full Name (Last, First, Middle Initial)
 Mailing Address 5500 Calle Real APT A 129
 City Santa Barbara State CA Zip Code 93111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 08 / 2015
Transaction ID : SA11AI.7774
 Amount of Each Receipt this Period
 200.00

C. Alice Lebewohl
 Full Name (Last, First, Middle Initial)
 Mailing Address 5500 Calle Real APT A 129
 City Santa Barbara State CA Zip Code 93111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 11 / 2015
Transaction ID : SA11AI.4514
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
ADVANCING FREEDOM FUND

A. Alice Lebewohl
 Full Name (Last, First, Middle Initial)
 Mailing Address 5500 Calle Real APT A 129
 City Santa Barbara State CA Zip Code 93111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt
 05 / 11 / 2015
Transaction ID : SA11AI.7776
 Amount of Each Receipt this Period
 200.00

B. MARILYN MARTIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1527 RIVERSIDE DRIVE N
 City HUDSON State WI Zip Code 54016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 05 / 11 / 2015
Transaction ID : SA11AI.4367
 Amount of Each Receipt this Period
 100.00

C. SHIRLEY MARTIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1373 FLANAGAN DR
 City CHRISTIANSBURG State VA Zip Code 24073
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 02 / 12 / 2015
Transaction ID : SA11AI.4344
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 24 OF 45
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
ADVANCING FREEDOM FUND

A. TRUDY MCCRORY
 Full Name (Last, First, Middle Initial)
 Mailing Address 426 PARKWOOD DR
 City PRATTVILLE State AL Zip Code 36067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2015
Transaction ID : SA11AI.4482
 Amount of Each Receipt this Period
 150.00

B. Joe Meek
 Full Name (Last, First, Middle Initial)
 Mailing Address 712 Gopher Walk Way
 City Sanibel State FL Zip Code 33957
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 04 / 2015
Transaction ID : SA11AI.4525
 Amount of Each Receipt this Period
 300.00

C. Joe Meek
 Full Name (Last, First, Middle Initial)
 Mailing Address 712 Gopher Walk Way
 City Sanibel State FL Zip Code 33957
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2015
Transaction ID : SA11AI.4524
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 25 OF 45
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
ADVANCING FREEDOM FUND

Full Name (Last, First, Middle Initial)
A. Jane Mellen

Mailing Address PO Box 1190

City Hot Springs State VA Zip Code 24445

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 11 / 2015

Transaction ID : SA11AI.4567

Amount of Each Receipt this Period
300.00

Full Name (Last, First, Middle Initial)
B. HERTA MESSIK

Mailing Address 14 BALLO PLACE

City EDISON State NJ Zip Code 08820

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2015

Transaction ID : SA11AI.4353

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. HERTA MESSIK

Mailing Address 14 BALLO PLACE

City EDISON State NJ Zip Code 08820

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2015

Transaction ID : SA11AI.4354

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **800.00**

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 26 OF 45
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ADVANCING FREEDOM FUND

A. ANNA NAUMAN
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 60291

City OKLAHOMA CITY State OK Zip Code 73146

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2015

Transaction ID : SA11AI.4593

Amount of Each Receipt this Period
 300.00

B. JW NEWBY JR.
Full Name (Last, First, Middle Initial)

Mailing Address 7802 WICKERSHAM LN

City HOUSTON State TX Zip Code 77063

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Self Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2015

Transaction ID : SA11AI.4532

Amount of Each Receipt this Period
 500.00

C. SARAH NOZNISKY
Full Name (Last, First, Middle Initial)

Mailing Address 54 HARDING AVENUE

City KENMORE State NY Zip Code 14217

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2015

Transaction ID : SA11AI.4502

Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	900.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 27 OF 45
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ADVANCING FREEDOM FUND

A. ALBERT PENNY
Full Name (Last, First, Middle Initial)

Mailing Address 15044 BANFF CT

City BATON ROUGE State LA Zip Code 70819

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Best Effort Attempted to Collect Best Effort Attempted to Collect

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
05 / 22 / 2015
Transaction ID : SA11AI.4361

Amount of Each Receipt this Period
100.00

B. ANNE POLLARD
Full Name (Last, First, Middle Initial)

Mailing Address 109 STEELE ST NE

City HUNTSVILLE State AL Zip Code 35801

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Best Effort Attempted to Collect MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
02 / 08 / 2015
Transaction ID : SA11AI.4331

Amount of Each Receipt this Period
300.00

C. JOHN PRINTZOS
Full Name (Last, First, Middle Initial)

Mailing Address 1009 RUSTON PASS

City FORT WAYNE State IN Zip Code 46825

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Best Effort Attempted to Collect Best Effort Attempted to Collect

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
05 / 07 / 2015
Transaction ID : SA11AI.4329

Amount of Each Receipt this Period
350.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
ADVANCING FREEDOM FUND

A. LENORA PUSTA
 Full Name (Last, First, Middle Initial)
 Mailing Address 138 W SUNFLOWER DR
 City PAYSON State AZ Zip Code 85541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2015
Transaction ID : SA11AI.4350
 Amount of Each Receipt this Period
 150.00

B. Mary Ransom
 Full Name (Last, First, Middle Initial)
 Mailing Address 1819 Yermo Pl
 City Fullerton State CA Zip Code 92833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Best Effort Attempted to Collect Occupation Best Effort Attempted to Collect
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2015
Transaction ID : SA11AI.4377
 Amount of Each Receipt this Period
 100.00

C. Mary Ransom
 Full Name (Last, First, Middle Initial)
 Mailing Address 1819 Yermo Pl
 City Fullerton State CA Zip Code 92833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Best Effort Attempted to Collect Occupation Best Effort Attempted to Collect
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2015
Transaction ID : SA11AI.4378
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
ADVANCING FREEDOM FUND

A. Richard Rogers
 Full Name (Last, First, Middle Initial)
 Mailing Address 4639 W Vermillion Dr
 City South Jordan State UT Zip Code 84095
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2015
Transaction ID : SA11AI.4485
 Amount of Each Receipt this Period
 100.00

B. Anne Ryan
 Full Name (Last, First, Middle Initial)
 Mailing Address 5402 Pennock Point Rd
 City Jupiter State FL Zip Code 33458
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Best Effort Attempted to Collect Occupation Best Effort Attempted to Collect
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 03 / 2015
Transaction ID : SA11AI.4504
 Amount of Each Receipt this Period
 500.00

C. Anne Ryan
 Full Name (Last, First, Middle Initial)
 Mailing Address 5402 Pennock Point Rd
 City Jupiter State FL Zip Code 33458
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Best Effort Attempted to Collect Occupation Best Effort Attempted to Collect
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 03 / 2015
Transaction ID : SA11AI.4505
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional).....▶	1100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 30 OF 45
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ADVANCING FREEDOM FUND

A. Anne Ryan
Full Name (Last, First, Middle Initial)

Mailing Address 5402 Pennock Point Rd

City Jupiter State FL Zip Code 33458

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Best Effort Attempted to Collect Best Effort Attempted to Collect

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt
02 / 10 / 2015
Transaction ID : SA11AI.4506

Amount of Each Receipt this Period
200.00

B. Anne Ryan
Full Name (Last, First, Middle Initial)

Mailing Address 5402 Pennock Point Rd

City Jupiter State FL Zip Code 33458

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Best Effort Attempted to Collect Best Effort Attempted to Collect

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1800.00

Date of Receipt
05 / 11 / 2015
Transaction ID : SA11AI.4507

Amount of Each Receipt this Period
600.00

C. Joan Saunders
Full Name (Last, First, Middle Initial)

Mailing Address 1375 Bungalow Ln

City Mattituck State NY Zip Code 11952

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
02 / 14 / 2015
Transaction ID : SA11AI.4348

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 900.00

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
ADVANCING FREEDOM FUND

A. Joan Saunders
 Full Name (Last, First, Middle Initial)
 Mailing Address 1375 Bungalow Ln
 City Mattituck State NY Zip Code 11952
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 18 / 2015
Transaction ID : SA11AI.4347
 Amount of Each Receipt this Period
 100.00

B. DOROTHY SCULLI
 Full Name (Last, First, Middle Initial)
 Mailing Address 5290 ROSAMOND LN APT 21
 City WATERFORD State MI Zip Code 48327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 04 / 2015
Transaction ID : SA11AI.4497
 Amount of Each Receipt this Period
 50.00

C. DOROTHY SCULLI
 Full Name (Last, First, Middle Initial)
 Mailing Address 5290 ROSAMOND LN APT 21
 City WATERFORD State MI Zip Code 48327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2015
Transaction ID : SA11AI.4498
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
ADVANCING FREEDOM FUND

Full Name (Last, First, Middle Initial)
A. Barbara Smith

Mailing Address 3222 E Hampshire Ave

City Milwaukee State WI Zip Code 53211

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Best Effort Attempted to Collect Best Effort Attempted to Collect

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2015
Transaction ID : SA11AI.4464

Amount of Each Receipt this Period
150.00

Full Name (Last, First, Middle Initial)
B. PHILIP SMITH

Mailing Address PO BOX 146

City JAMESTOWN State CO Zip Code 80455

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 04 / 2015
Transaction ID : SA11AI.4581

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C. PHILIP SMITH

Mailing Address PO BOX 146

City JAMESTOWN State CO Zip Code 80455

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2015
Transaction ID : SA11AI.4578

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 33 OF 45
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
ADVANCING FREEDOM FUND

A. CORINNE SPENCE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1508 EUREKA RD
 City ROSEVILLE State CA Zip Code 95661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2015
Transaction ID : SA11AI.4433
 Amount of Each Receipt this Period
 400.00

B. CORINNE SPENCE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1508 EUREKA RD
 City ROSEVILLE State CA Zip Code 95661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2015
Transaction ID : SA11AI.4363
 Amount of Each Receipt this Period
 50.00

C. GLORIA STEVENS
 Full Name (Last, First, Middle Initial)
 Mailing Address 3091 HIGHLANDS BRIDGE RD
 City SARASOTA State FL Zip Code 34235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2015
Transaction ID : SA11AI.4442
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 34 OF 45
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
ADVANCING FREEDOM FUND

Full Name (Last, First, Middle Initial)
A. ROBERT SUMMERS

Mailing Address 2630 BAYWOOD DR

City State Zip Code
MIDLAND MI 48642

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 05 / 2015

Transaction ID : SA11AI.4424

Amount of Each Receipt this Period
300.00

Full Name (Last, First, Middle Initial)
B. ROBERT SUMMERS

Mailing Address 2630 BAYWOOD DR

City State Zip Code
MIDLAND MI 48642

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 13 / 2015

Transaction ID : SA11AI.4425

Amount of Each Receipt this Period
300.00

Full Name (Last, First, Middle Initial)
c. James Sylte

Mailing Address 215 Skogmo Blvd

City State Zip Code
Fergus Falls MN 56537

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Employed FARMER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 11 / 2015

Transaction ID : SA11AI.4399

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 635.00

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 36 OF 45
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
ADVANCING FREEDOM FUND

A. Full Name (Last, First, Middle Initial)
ERNEST WESTMAN

Mailing Address 2165 MONTCLAIR STREET

City State Zip Code
SAN DIEGO CA 92104

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 11 / 2015

Transaction ID : SA11AI.4402

Amount of Each Receipt this Period
325.00

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	21303.00

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
ADVANCING FREEDOM FUND

Full Name (Last, First, Middle Initial) A. American Liberty Group		Date of Disbursement MM / DD / YYYY 02 / 05 / 2015
Mailing Address 611 Pennsylvania Ave SE Ste 227		Transaction ID : SB21B.4289
City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period 6255.75	
Purpose of Disbursement Fundraising Services	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. American Liberty Group		Date of Disbursement MM / DD / YYYY 02 / 06 / 2015
Mailing Address 611 Pennsylvania Ave SE Ste 227		Transaction ID : SB21B.4290
City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period 43650.60	
Purpose of Disbursement Fundraising Services	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. American Liberty Group		Date of Disbursement MM / DD / YYYY 02 / 19 / 2015
Mailing Address 611 Pennsylvania Ave SE Ste 227		Transaction ID : SB21B.4291
City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period 26015.75	
Purpose of Disbursement Fundraising Services	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional).....▶	75922.10
TOTAL This Period (last page this line number only).....▶	

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
ADVANCING FREEDOM FUND

Full Name (Last, First, Middle Initial) A. American Liberty Group		Date of Disbursement MM / DD / YYYY 03 / 06 / 2015
Mailing Address 611 Pennsylvania Ave SE Ste 227		Transaction ID : SB21B.4292
City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period 2191.13	
Purpose of Disbursement Fundraising Services	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) B. American Liberty Group		Date of Disbursement MM / DD / YYYY 03 / 16 / 2015
Mailing Address 611 Pennsylvania Ave SE Ste 227		Transaction ID : SB21B.4293
City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period 2639.19	
Purpose of Disbursement Fundraising Services	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) C. American Liberty Group		Date of Disbursement MM / DD / YYYY 03 / 24 / 2015
Mailing Address 611 Pennsylvania Ave SE Ste 227		Transaction ID : SB21B.4295
City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period 1401.25	
Purpose of Disbursement Fundraising Services	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶	6231.57
TOTAL This Period (last page this line number only)..... ▶	

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
ADVANCING FREEDOM FUND

Full Name (Last, First, Middle Initial) A. American Liberty Group		Date of Disbursement MM / DD / YYYY 03 / 30 / 2015
Mailing Address 611 Pennsylvania Ave SE Ste 227		Transaction ID : SB21B.4296
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Fundraising Services	Amount of Each Disbursement this Period 1032.65
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:		

Full Name (Last, First, Middle Initial) B. American Liberty Group		Date of Disbursement MM / DD / YYYY 04 / 02 / 2015
Mailing Address 611 Pennsylvania Ave SE Ste 227		Transaction ID : SB21B.4297
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Fundraising Services	Amount of Each Disbursement this Period 1172.49
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:		

Full Name (Last, First, Middle Initial) C. American Liberty Group		Date of Disbursement MM / DD / YYYY 05 / 01 / 2015
Mailing Address 611 Pennsylvania Ave SE Ste 227		Transaction ID : SB21B.4298
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Fundraising Services	Amount of Each Disbursement this Period 2432.00
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:		

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

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

4637.14

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
ADVANCING FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. American Liberty Group

Mailing Address 611 Pennsylvania Ave SE
Ste 227

City Washington State DC Zip Code 20003

Purpose of Disbursement
Fundraising Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4299

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. American Liberty Group

Mailing Address 611 Pennsylvania Ave SE
Ste 227

City Washington State DC Zip Code 20003

Purpose of Disbursement
Fundraising Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4300

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. American Liberty Group

Mailing Address 611 Pennsylvania Ave SE
Ste 227

City Washington State DC Zip Code 20003

Purpose of Disbursement
Fundraising Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4303

Amount of Each Disbursement this Period

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

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

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
ADVANCING FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. American Liberty Group

Mailing Address 611 Pennsylvania Ave SE
Ste 227

City Washington State DC Zip Code 20003

Purpose of Disbursement
Fundraising Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 28 / 2015

Transaction ID : SB21B.4304

Amount of Each Disbursement this Period

6139.67

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 01 / 2015

Transaction ID : SB21B.4310

Amount of Each Disbursement this Period

34.86

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 01 / 2015

Transaction ID : SB21B.4311

Amount of Each Disbursement this Period

144.37

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

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

6318.90

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
ADVANCING FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. Global Payments

Mailing Address 10705 Red Run Blvd

City Owings Mills State MD Zip Code 21117

Purpose of Disbursement
Merchant Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 12 / 2015

Transaction ID : **SB21B.4318**

Amount of Each Disbursement this Period

3165.91

Full Name (Last, First, Middle Initial)

B. Global Payments

Mailing Address 10705 Red Run Blvd

City Owings Mills State MD Zip Code 21117

Purpose of Disbursement
Merchant Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 25 / 2015

Transaction ID : **SB21B.4317**

Amount of Each Disbursement this Period

2283.91

Full Name (Last, First, Middle Initial)

C. Global Payments

Mailing Address 10705 Red Run Blvd

City Owings Mills State MD Zip Code 21117

Purpose of Disbursement
Merchant Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 02 / 2015

Transaction ID : **SB21B.4316**

Amount of Each Disbursement this Period

219.59

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

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

5669.41

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
ADVANCING FREEDOM FUND

Full Name (Last, First, Middle Initial)

A. Global Payments

Mailing Address 10705 Red Run Blvd

City Owings Mills State MD Zip Code 21117

Purpose of Disbursement
Merchant Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 05 / 2015

Transaction ID : **SB21B.4315**

Amount of Each Disbursement this Period

107.29

Full Name (Last, First, Middle Initial)

B. Global Payments

Mailing Address 10705 Red Run Blvd

City Owings Mills State MD Zip Code 21117

Purpose of Disbursement
Merchant Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 02 / 2015

Transaction ID : **SB21B.4314**

Amount of Each Disbursement this Period

1982.64

Full Name (Last, First, Middle Initial)

C. Washington Intelligence Bureau

Mailing Address 4128 Pepsi Pl

City Chantilly State VA Zip Code 20151

Purpose of Disbursement
Research Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 27 / 2015

Transaction ID : **SB21B.4313**

Amount of Each Disbursement this Period

792.18

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

2882.11

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

146144.19

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 44 OF 45
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
ADVANCING FREEDOM FUND

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gober Hilgers PLLC	Nature of Debt (Purpose): Legal and Compliance Services
Mailing Address 1005 Congress Ave Ste 350	
City State Austin TX Zip Code 78701	

Outstanding Balance Beginning This Period 2000.00	Transaction ID : SD10.4105	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gober Hilgers PLLC	Nature of Debt (Purpose): Legal and Compliance Services
Mailing Address 1005 Congress Ave Ste 350	
City State Austin TX Zip Code 78701	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4284	
Amount Incurred This Period 857.50	Payment This Period 0.00	Outstanding Balance at Close of This Period 857.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gober Hilgers PLLC	Nature of Debt (Purpose): Legal and Compliance Services
Mailing Address 1005 Congress Ave Ste 350	
City State Austin TX Zip Code 78701	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4285	
Amount Incurred This Period 315.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 315.00

1) SUBTOTALS This Period This Page (optional)..... ▶	3172.50
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 45 OF 45
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
ADVANCING FREEDOM FUND

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gober Hilgers PLLC	Nature of Debt (Purpose): Legal and Compliance Services
Mailing Address 1005 Congress Ave Ste 350	
City State Austin TX Zip Code 78701	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4286	
Amount Incurred This Period 765.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 765.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gober Hilgers PLLC	Nature of Debt (Purpose): Legal and Compliance Services
Mailing Address 1005 Congress Ave Ste 350	
City State Austin TX Zip Code 78701	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4287	
Amount Incurred This Period 770.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 770.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gober Hilgers PLLC	Nature of Debt (Purpose): Legal and Compliance Services
Mailing Address 1005 Congress Ave Ste 350	
City State Austin TX Zip Code 78701	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4288	
Amount Incurred This Period 542.50	Payment This Period 0.00	Outstanding Balance at Close of This Period 542.50

1) SUBTOTALS This Period This Page (optional)..... ▶	2077.50
2) TOTALS This Period (last page this line number only)..... ▶	5250.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	5250.00