

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
America's Foundation

ADDRESS (number and street) 1155 21st Street NW
Suite 300
 Check if different than previously reported. (ACC)
Washington DC 20036

2. **FEC IDENTIFICATION NUMBER** C00305797
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 03 01 2006 through 03 31 2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer MEREDITH G. KELLEY

Signature of Treasurer Electronically Filed by MEREDITH G. KELLEY Date 04 20 2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
America's Foundation

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		44545.60
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	2211.58									
(c) Total Receipts (from Line 19)	35585.71	64041.14								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	37797.29	108586.74								
7. Total Disbursements (from Line 31)	33069.71	103859.16								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	4727.58	4727.58								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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**

Write or Type Committee Name
America's Foundation

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	6

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	3500.00	11000.00
(i) Itemized (use Schedule A)	45.00	430.50
(ii) Unitemized	3545.00	11430.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	32000.00	52000.00
(c) Other Political Committees (such as PACs)	35545.00	63430.50
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
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.)	40.71	610.64
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 Transfer (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))	35585.71	64041.14
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	35585.71	64041.14

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) Shared 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.....	7769.71	60259.16
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	7769.71	60259.16
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	25000.00	25000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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	0.00	1000.00
(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))	0.00	1000.00
29. Other Disbursements.....	300.00	17600.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	33069.71	103859.16
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	33069.71	103859.16

DETAILED SUMMARY PAGE
of Disbursements

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)	35545.00	63430.50
34. Total Contribution Refunds (from Line 28(d))	0.00	1000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	35545.00	62430.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	7769.71	60259.16
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	7769.71	60259.16

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 27
	<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	

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)
America's Foundation

A. Full Name (Last, First, Middle Initial)
MR. RALPH W. HOOPER

Mailing Address 489 DEVON PARK DRIVE #300B

City State Zip Code
WAYNE PA 19087-1809

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

Name of Employer 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
03 / 31 / 2006

Transaction ID: SA11.10135165

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. MARY ANN PHILLIPS

Mailing Address 976 DERRING LANE

City State Zip Code
BRYN MAWR PA 19010-1749

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

Name of Employer Occupation
HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2006

Transaction ID: SA11.10135164

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. THEODORE S. RUSINOFF

Mailing Address 2995 MC CORMICK RD.

City State Zip Code
SILVER LAKE OH 44224-3857

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

Name of Employer Occupation
RUSINOFF TAX INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 12 / 2006

Transaction ID: SA11.10128001

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	▶	2500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 7 / 27	
	(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)
America's Foundation

A. Full Name (Last, First, Middle Initial)
MR. PETER J. WORTH

Mailing Address 99 PARK AVENUE
25TH FLOOR

City State Zip Code
NEW YORK NY 10016

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

Name of Employer Occupation
AMERICAN BENEFITS CONSULT- CHAIRMAN & CHIEF EXECUTIVE OFFICER
ING LLC

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	0	6

Transaction ID: SA11.10134274

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

1000.00

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	3500.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 27
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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)
America's Foundation

Full Name (Last, First, Middle Initial) A. AMERICAN HOSPITAL ASSOCIATION PAC		Date of Receipt M M / D D / Y Y Y Y Y 03 / 01 / 2006
Mailing Address 325 SEVENTH STREET N. W. SUITE 700		Transaction ID: SA11.10127951
City WASHINGTON State DC Zip Code 20004-2818	FEC ID number of contributing federal political committee. C C00106146	Amount of Each Receipt this Period 2500.00
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. AMERICAN HOSPITAL ASSOCIATION PAC		Date of Receipt M M / D D / Y Y Y Y Y 03 / 31 / 2006
Mailing Address 325 SEVENTH STREET N. W. SUITE 700		Transaction ID: SA11.10134273
City WASHINGTON State DC Zip Code 20004-2818	FEC ID number of contributing federal political committee. C C00106146	Amount of Each Receipt this Period 2500.00
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. ERNST & YOUNG PAC		Date of Receipt M M / D D / Y Y Y Y Y 03 / 31 / 2006
Mailing Address 1225 CONNECTICUT AVENUE N.W. SUITE 600		Transaction ID: SA11.10134276
City WASHINGTON State DC Zip Code 20036-2604	FEC ID number of contributing federal political committee. C C00227744	Amount of Each Receipt this Period 5000.00
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	▶	10000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 27
	(check only one)
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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)
America's Foundation

Full Name (Last, First, Middle Initial) A. FOOD MARKETING INSTITUTE PAC		Date of Receipt M M / D D / Y Y Y Y 03 / 12 / 2006
Mailing Address 655 15TH STREET N.W.		Transaction ID: SA11.10128003
City State Zip Code WASHINGTON DC 20005-5701	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C C00014555	CONTRIBUTION	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. GENERAL ELECTRIC COMPANY PAC		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2006
Mailing Address 1299 PENNSYLVANIA AVENUE NW MR. PETER D. PROWITT		Transaction ID: SA11.10134073
City State Zip Code WASHINGTON DC 20004-2407	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00024869	CONTRIBUTION	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MERCK EMPLOYEES PAC		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2006
Mailing Address 601 PENNSYLVANIA AVENUE N.W. NORTH BUILDING SUITE 1200		Transaction ID: SA11.10134275
City State Zip Code WASHINGTON DC 20004-2601	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00097485	CONTRIBUTION	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	7000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 27
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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)
America's Foundation

Full Name (Last, First, Middle Initial) A. PFIZER PAC		Date of Receipt M M / D D / Y Y Y Y Y 03 / 31 / 2006	
Mailing Address 235 E. 42ND STREET		Transaction ID: SA11.10134277	
City State Zip Code NEW YORK NY 10017-5703	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C C00016683		CONTRIBUTION	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) B. VERIZON COMMUNICATIONS INC. GOOD GOVERNMENT CLUB		Date of Receipt M M / D D / Y Y Y Y Y 03 / 31 / 2006	
Mailing Address 1717 ARCH STREET 47-S		Transaction ID: SA11.10134272	
City State Zip Code PHILADELPHIA PA 19103-2713	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C C00186288		CONTRIBUTION	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) C. WACHOVIA CORP. EMPLOYEES GOOD GOVERNMENT FEDERAL FUND		Date of Receipt M M / D D / Y Y Y Y Y 03 / 05 / 2006	
Mailing Address 301 S. COLLEGE STREET, T.W.-22		Transaction ID: SA11.10127978	
City State Zip Code CHARLOTTE NC 28288-0001	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C C00012518		CONTRIBUTION	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 5000.00		

SUBTOTAL of Receipts This Page (optional) ▶	15000.00
TOTAL This Period (last page this line number only) ▶	32000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full) America's Foundation

Full Name (Last, First, Middle Initial) A. Bryn Mawr Trust Company	
Mailing Address 801 Lancaster Avenue	
City Bryn Mawr	State PA
Zip Code 19010	
FEC ID number of contributing federal political committee. C	
Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00

Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2006
Transaction ID: 10001
Amount of Each Receipt this Period 40.71
Interest Income

SUBTOTAL of Receipts This Page (optional)	▶	40.71
TOTAL This Period (last page this line number only)	▶	40.71

**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)

PAGE 12 / 27

<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)
America's Foundation

Full Name (Last, First, Middle Initial) A. Susan B. Lewis		Transaction ID: 139 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address 416 Berkley Road		Amount of Each Disbursement this Period 759.28
City Haverford State PA Zip Code 19041	Purpose of Disbursement Net Payroll	
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 Express		Transaction ID: 105 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address Suite 0002		Amount of Each Disbursement this Period 695.81
City Chicago State IL Zip Code 60679-0002	Purpose of Disbursement Credit Card Payment	
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 Express		Transaction ID: 108 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address Suite 0002		Amount of Each Disbursement this Period 79.60
City Chicago State IL Zip Code 60679-0002	Purpose of Disbursement Finance Charge	
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) ▼	[MEMO ITEM] (SEE ABOVE - 03/14/06 AME- RICAN EXPRESS)

SUBTOTAL of Disbursements This Page (optional) ▶	1455.09
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)

PAGE 13 / 27

<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)
America's Foundation

A. AOL Online Service

Full Name (Last, First, Middle Initial)
AOL Online Service

Mailing Address PO Box 10810

City Herndon State VA Zip Code 20172

Purpose of Disbursement Internet

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 106
Date of Disbursement
03 / 14 / 2006

Amount of Each Disbursement this Period
23.90

[MEMO ITEM]
(SEE ABOVE - 03/14/06 AMERICAN EXPRESS)

B. AOL Online Service

Full Name (Last, First, Middle Initial)
AOL Online Service

Mailing Address PO Box 10810

City Herndon State VA Zip Code 20172

Purpose of Disbursement Internet

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 107
Date of Disbursement
03 / 14 / 2006

Amount of Each Disbursement this Period
23.90

[MEMO ITEM]
(SEE ABOVE - 03/14/06 AMERICAN EXPRESS)

C. Fedex

Full Name (Last, First, Middle Initial)
Fedex

Mailing Address 700 Downington Pike #105

City West Chester State PA Zip Code 19380

Purpose of Disbursement Postage/Delivery

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 113
Date of Disbursement
03 / 14 / 2006

Amount of Each Disbursement this Period
15.54

[MEMO ITEM]
(SEE ABOVE - 03/14/06 AMERICAN EXPRESS)

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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)

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<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)
America's Foundation

Full Name (Last, First, Middle Initial) A. Fedex		Transaction ID: 115 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address 700 Downington Pike #105		Amount of Each Disbursement this Period 11.40
City West Chester State PA Zip Code 19380	Purpose of Disbursement Postage/Delivery 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) ▼	[MEMO ITEM] (SEE ABOVE - 03/14/06 AMERICAN EXPRESS)

Full Name (Last, First, Middle Initial) B. Fedex		Transaction ID: 116 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address 700 Downington Pike #105		Amount of Each Disbursement this Period 19.14
City West Chester State PA Zip Code 19380	Purpose of Disbursement Postage/Delivery 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) ▼	[MEMO ITEM] (SEE ABOVE - 03/14/06 AMERICAN EXPRESS)

Full Name (Last, First, Middle Initial) C. Fedex		Transaction ID: 118 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address 700 Downington Pike #105		Amount of Each Disbursement this Period 17.81
City West Chester State PA Zip Code 19380	Purpose of Disbursement Postage/Delivery 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) ▼	[MEMO ITEM] (SEE ABOVE - 03/14/06 AMERICAN EXPRESS)

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)

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<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)
America's Foundation

Full Name (Last, First, Middle Initial) A. Fedex		Transaction ID: 119 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address 700 Downington Pike #105		Amount of Each Disbursement this Period 16.30
City West Chester State PA Zip Code 19380	[MEMO ITEM] (SEE ABOVE - 03/14/06 AMERICAN EXPRESS)	
Purpose of Disbursement Postage/Delivery 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. Fedex		Transaction ID: 120 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address 700 Downington Pike #105		Amount of Each Disbursement this Period 23.51
City West Chester State PA Zip Code 19380	[MEMO ITEM] (SEE ABOVE - 03/14/06 AMERICAN EXPRESS)	
Purpose of Disbursement Postage/Delivery 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. Garrett Hill Pizza		Transaction ID: 117 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address 910 Conestoga Road		Amount of Each Disbursement this Period 195.40
City Bryn Mawr State PA Zip Code 19010	[MEMO ITEM] (SEE ABOVE - 03/14/06 AMERICAN EXPRESS)	
Purpose of Disbursement Staff Meeting Expense-Meal 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) ▶	0.00
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)

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<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)
America's Foundation

A. UPS

Full Name (Last, First, Middle Initial)

Mailing Address 35 Glenlake Parkway Northeast

City Atlanta State GA Zip Code 30328

Purpose of Disbursement Postage/Delivery

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 109
Date of Disbursement
03 / 14 / 2006

Amount of Each Disbursement this Period
139.14

[MEMO ITEM]
(SEE ABOVE - 03/14/06 AMERICAN EXPRESS)

B. USPS

Full Name (Last, First, Middle Initial)

Mailing Address 1000 Tincum Island Road

City Philadelphia State PA Zip Code 19153

Purpose of Disbursement Postage/Delivery

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 110
Date of Disbursement
03 / 14 / 2006

Amount of Each Disbursement this Period
5.00

[MEMO ITEM]
(SEE ABOVE - 03/14/06 AMERICAN EXPRESS)

C. USPS

Full Name (Last, First, Middle Initial)

Mailing Address 1000 Tincum Island Road

City Philadelphia State PA Zip Code 19153

Purpose of Disbursement Postage/Delivery

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 111
Date of Disbursement
03 / 14 / 2006

Amount of Each Disbursement this Period
5.00

[MEMO ITEM]
(SEE ABOVE - 03/14/06 AMERICAN EXPRESS)

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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)

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<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)
America's Foundation

Full Name (Last, First, Middle Initial) A. USPS		Transaction ID: 114 Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2006
Mailing Address 1000 Tinicum Island Road		Amount of Each Disbursement this Period 79.00
City Philadelphia State PA Zip Code 19153	Purpose of Disbursement Postage/Delivery 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) ▼	[MEMO ITEM] (SEE ABOVE - 03/14/06 AMERICAN EXPRESS)

Full Name (Last, First, Middle Initial) B. Verizon Online		Transaction ID: 112 Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2006
Mailing Address 7901 E. Riverside Dr. #1-100		Amount of Each Disbursement this Period 41.17
City Austin State TX Zip Code 78744	Purpose of Disbursement Internet 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) ▼	[MEMO ITEM] (SEE ABOVE - 03/14/06 AMERICAN EXPRESS)

Full Name (Last, First, Middle Initial) C. American Heritage Credit Union		Transaction ID: 121 Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2006
Mailing Address P.O. Box 67001		Amount of Each Disbursement this Period 224.27
City Harrisburg State PA Zip Code 17106-7001	Purpose of Disbursement Credit Card Payment 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) ▶	224.27
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)

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<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)
America's Foundation

Full Name (Last, First, Middle Initial) A. American Heritage Credit Union		Transaction ID: 127 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address P.O. Box 67001		Amount of Each Disbursement this Period 67.85
City Harrisburg State PA Zip Code 17106-7001	Purpose of Disbursement Finance Charge Candidate Name	
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) ▼	[MEMO ITEM] (SEE ABOVE - 03/14/06 AMERICAN HERITAGE F.C.U.)

Full Name (Last, First, Middle Initial) B. Amtrak		Transaction ID: 124 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address 30th and Market St, Fl. 5		Amount of Each Disbursement this Period 17.00
City Philadelphia State PA Zip Code 19102	Purpose of Disbursement Travel Candidate Name	
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) ▼	[MEMO ITEM] (SEE ABOVE - 03/14/06 AMERICAN HERITAGE F.C.U.)

Full Name (Last, First, Middle Initial) C. AOL Online Service		Transaction ID: 122 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 10810		Amount of Each Disbursement this Period 23.90
City Herndon State VA Zip Code 20172	Purpose of Disbursement Internet Candidate Name	
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) ▼	[MEMO ITEM] (SEE ABOVE - 03/14/06 AMERICAN HERITAGE F.C.U.)

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)

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<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)
America's Foundation

Full Name (Last, First, Middle Initial) A. AOL Online Service		Transaction ID: 126 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 10810		Amount of Each Disbursement this Period 23.90
City Herndon State VA Zip Code 20172	[MEMO ITEM] (SEE ABOVE - 03/14/06 AMERICAN HERITAGE F.C.U.)	
Purpose of Disbursement Internet 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. Marathon Grill		Transaction ID: 123 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address 1818 Market Street		Amount of Each Disbursement this Period 31.68
City Philadelphia State PA Zip Code 19103	[MEMO ITEM] (SEE ABOVE - 03/14/06 AMERICAN HERITAGE F.C.U.)	
Purpose of Disbursement Meals 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. US Senate Restaurant (Cash Vault)		Transaction ID: 125 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address 511 Dirksen Senate Office Building		Amount of Each Disbursement this Period 59.94
City Washington State DC Zip Code 20510	[MEMO ITEM] (SEE ABOVE - 03/14/06 AMERICAN HERITAGE F.C.U.)	
Purpose of Disbursement Meals 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) ▶	0.00
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)

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<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)
America's Foundation

Full Name (Last, First, Middle Initial) A. American Heritage Credit Union		Transaction ID: 130 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address P.O. Box 67001		Amount of Each Disbursement this Period 29.78
City Harrisburg State PA Zip Code 17106-7001	Purpose of Disbursement Credit Card Payment Candidate Name	
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) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. American Heritage Credit Union		Transaction ID: 132 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address P.O. Box 67001		Amount of Each Disbursement this Period 5.88
City Harrisburg State PA Zip Code 17106-7001	Purpose of Disbursement Finance Charge Candidate Name	
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) ▼	Category/ Type

[MEMO ITEM]
(SEE ABOVE - 03/14/06 AMERICAN HERITAGE F.C.U.)

Full Name (Last, First, Middle Initial) C. AOL Online Service		Transaction ID: 131 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 10810		Amount of Each Disbursement this Period 23.90
City Herndon State VA Zip Code 20172	Purpose of Disbursement Internet Candidate Name	
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) ▼	Category/ Type

[MEMO ITEM]
(SEE ABOVE - 03/14/06 AMERICAN HERITAGE F.C.U.)

SUBTOTAL of Disbursements This Page (optional) ▶	29.78
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)

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<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)
America's Foundation

Full Name (Last, First, Middle Initial) A. Bankcard MTOT Discount		Transaction ID: 143 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 6
Mailing Address P.O. Box 189		Amount of Each Disbursement this Period 45.00
City Hagerstown	State MD Zip Code 21741-0189	
Purpose of Disbursement Merchant Credit Card Fees 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. Barna Advisory Services, PC		Transaction ID: 103 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 6
Mailing Address 270 S. Woodmont Drive		Amount of Each Disbursement this Period 3500.00
City Downingtown	State PA Zip Code 19335	
Purpose of Disbursement Accounting Fees 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. Bryn Mawr Trust Company		Transaction ID: 101 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 6
Mailing Address 801 Lancaster Avenue		Amount of Each Disbursement this Period 26.74
City Bryn Mawr	State PA Zip Code 19010	
Purpose of Disbursement Bank Service Charges 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) ▶	3571.74
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)
America's Foundation

Full Name (Last, First, Middle Initial) A. Bryn Mawr Trust Company		Transaction ID: 104 Date of Disbursement MM / DD / YYYY 03 / 14 / 2006	
Mailing Address 801 Lancaster Avenue		Amount of Each Disbursement this Period 580.00	
City Bryn Mawr	State PA		Zip Code 19010
Purpose of Disbursement Income Tax Payment			Category/ Type
Candidate Name			
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. Bryn Mawr Trust Company		Transaction ID: 141 Date of Disbursement MM / DD / YYYY 03 / 31 / 2006	
Mailing Address 801 Lancaster Avenue		Amount of Each Disbursement this Period 75.00	
City Bryn Mawr	State PA		Zip Code 19010
Purpose of Disbursement Bank Service Charges			Category/ Type
Candidate Name			
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. Paychex, Inc		Transaction ID: 102 Date of Disbursement MM / DD / YYYY 03 / 10 / 2006	
Mailing Address Valley Forge Corporate Center 1100 Adams Avenue		Amount of Each Disbursement this Period 103.60	
City Norristown	State PA		Zip Code 19403
Purpose of Disbursement Payroll Processing Fees			Category/ Type
Candidate Name			
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) ▶	758.60
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)

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<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)
America's Foundation

Full Name (Last, First, Middle Initial) A. Paychex, Inc		Transaction ID: 140 Date of Disbursement MM / DD / YYYY 03 / 31 / 2006
Mailing Address Valley Forge Corporate Center 1100 Adams Avenue		Amount of Each Disbursement this Period 329.40
City Norristown	State PA	
Zip Code 19403		Category/ Type
Purpose of Disbursement Payroll Taxes		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. Paychex, Inc		Transaction ID: 142 Date of Disbursement MM / DD / YYYY 03 / 31 / 2006
Mailing Address Valley Forge Corporate Center 1100 Adams Avenue		Amount of Each Disbursement this Period 18.06
City Norristown	State PA	
Zip Code 19403		Category/ Type
Purpose of Disbursement Workers Comp Insurance		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C. Sprint		Transaction ID: 133 Date of Disbursement MM / DD / YYYY 03 / 14 / 2006
Mailing Address PO Box 17621		Amount of Each Disbursement this Period 409.62
City Baltimore	State MD	
Zip Code 21297-1621		Category/ Type
Purpose of Disbursement Telephone Expenses		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional) ▶	757.08
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)

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<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)
America's Foundation

Full Name (Last, First, Middle Initial) A. Union League of Philadelphia		Transaction ID: 137 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 9 / 2 0 0 6
Mailing Address 140 South Broad Street		Amount of Each Disbursement this Period 378.67
City Philadelphia State PA Zip Code 19102-3083	Purpose of Disbursement Fundraising Event Costs Candidate Name	
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) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Transaction ID: 134 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address P.O. Box 41556		Amount of Each Disbursement this Period 579.07
City Philadelphia State PA Zip Code 19101-1556	Purpose of Disbursement Telephone Expenses Candidate Name	
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) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Wachovia Bank		Transaction ID: 144 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 9 / 2 0 0 6
Mailing Address 1753 Pinnacle Drive		Amount of Each Disbursement this Period 15.41
City Mclean State VA Zip Code 22102	Purpose of Disbursement Bank Service Charges Candidate Name	
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) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	973.15
TOTAL This Period (last page this line number only) ▶	7769.71

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)

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<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)
America's Foundation

Full Name (Last, First, Middle Initial) A. Ensign for Senate		Transaction ID: 136 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 0 6
Mailing Address P.O. Box 26568		Amount of Each Disbursement this Period 5000.00
City Las Vegas State NV Zip Code 89126	Category/ Type	
Purpose of Disbursement Campaign Contribution - General		
Candidate Name John Ensign		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Tom Kean for US Senate		Transaction ID: 135 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 0 6
Mailing Address Attn: Laura Slomka 187 Mill Lane		Amount of Each Disbursement this Period 5000.00
City Mountainside State NJ Zip Code 07092	Category/ Type	
Purpose of Disbursement Campaign Contribution - Primary		
Candidate Name Jr. Thomas Kean		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. National Republican Senatorial		Transaction ID: 138 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 9 / 2 0 0 6
Mailing Address Accounting Division P.O. Box 75103		Amount of Each Disbursement this Period 15000.00
City Washington State DC Zip Code 20013-5103	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name		
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) ▶	25000.00
TOTAL This Period (last page this line number only) ▶	25000.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
America's Foundation

Full Name (Last, First, Middle Initial) A. American Heritage Credit Union		Transaction ID: 128 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address P.O. Box 67001		Amount of Each Disbursement this Period 300.00
City Harrisburg State PA Zip Code 17106-7001	Purpose of Disbursement Credit Card Payment Candidate Name	
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) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. National Prayer Breakfast		Transaction ID: 129 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address		Amount of Each Disbursement this Period 300.00
City Bethesda State MD Zip Code 20009	Purpose of Disbursement Contribution Candidate Name	
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) ▼	Category/Type

[MEMO ITEM]
(SEE ABOVE - 03/14/06 AMERICAN HERITAGE F.C.U.)

SUBTOTAL of Disbursements This Page (optional)	300.00
TOTAL This Period (last page this line number only)	300.00

Image# 26960073067

Form/Schedule: **F3XN**

Transaction ID:

ALL EXPENDITURES ON SCHEDULE B, LINE 21(B) WERE PAC EXPENSES. REIMBURSEMENTS REPRESENT EXPENSES INCURRED ON BEHALF OF AMERICA'S FOUNDATION THAT WERE REIMBURSED AT THE EXACT AMOUNT CHARGED AT THE TIME THE EXPENSE WAS INCURRED. EVERYONE ASSOCIATED WITH AMERICA'S FOUNDATION IS MADE FULLY AWARE THAT IT IS REQUIRED TO PAY FOR GOODS AND SERVICES AT THE USUAL AND NORMAL CHARGE, AND AT NO TIME HAS THE COMMITTEE REQUESTED OR RECEIVED ANY DISCOUNT FOR GOODS OR SERVICES PROVIDED TO IT.
