

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Rely on Your Beliefs Fund

Report Covering the Period: From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	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>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		218710.98
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	150186.85									
(c) Total Receipts (from Line 19)	52500.00	491888.09								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	202686.85	710599.07								
7. Total Disbursements (from Line 31)	85005.18	592917.40								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	117681.67	117681.67								
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
Rely on Your Beliefs Fund

Report Covering the Period: From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	8

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	6000.00	32300.00
(i) Itemized (use Schedule A)	0.00	61.52
(ii) Unitemized	6000.00	32361.52
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	41500.00	442700.00
(c) Other Political Committees (such as PACs)	47500.00	475061.52
(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	6826.57
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	5000.00	10000.00
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 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))	52500.00	491888.09
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	52500.00	491888.09

DETAILED SUMMARY PAGE

of Disbursements

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.....	65213.48	339584.23
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	65213.48	339584.23
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	19791.70	248333.17
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	0.00
(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	0.00
29. Other Disbursements.....	0.00	5000.00
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))..	85005.18	592917.40
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	85005.18	592917.40

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	47500.00	475061.52
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	47500.00	475061.52
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	65213.48	339584.23
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	6826.57
38. Net Operating Expenditures (subtract Line 37 from Line 36)	65213.48	332757.66

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 31
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
Rely on Your Beliefs Fund

A. Full Name (Last, First, Middle Initial)
ACA International PAC
Mailing Address 4040 W 70th St
City Minneapolis State MN Zip Code 55435-4104
FEC ID number of contributing federal political committee. **C** C00034785
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00
Date of Receipt 08 / 04 / 2008
Transaction ID: 80805.C839
Amount of Each Receipt this Period 5000.00
Receipt

B. Full Name (Last, First, Middle Initial)
Ameren Fed PAC
Mailing Address 1331 Pennsylvania Ave NW Suite 512 N
City Washington State DC Zip Code 20004-1703
FEC ID number of contributing federal political committee. **C** C00206136
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00
Date of Receipt 08 / 04 / 2008
Transaction ID: 80805.C833
Amount of Each Receipt this Period 2500.00
Receipt

C. Full Name (Last, First, Middle Initial)
American Dental PAC
Mailing Address 1111 14th St NW Suite 1100
City Washington State DC Zip Code 20005-5627
FEC ID number of contributing federal political committee. **C** C00000729
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00
Date of Receipt 08 / 04 / 2008
Transaction ID: 80805.C836
Amount of Each Receipt this Period 5000.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 12500.00
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 7 / 31
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Rely on Your Beliefs Fund

A. Full Name (Last, First, Middle Initial)
Calpine Corporation PAC

Mailing Address 1401 H St NW
Suite 510

City Washington State DC Zip Code 20005-2024

FEC ID number of contributing federal political committee. **C** C00362640

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: 08 / 04 / 2008
Transaction ID: 80805.C832
 Amount of Each Receipt this Period: 1500.00
 Receipt

B. Full Name (Last, First, Middle Initial)
Clear Channel Communications PAC

Mailing Address 1401 I St NW Ste 401
Suite 401

City Washington State DC Zip Code 20005-6505

FEC ID number of contributing federal political committee. **C** C00279216

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 08 / 25 / 2008
Transaction ID: 80915.C845
 Amount of Each Receipt this Period: 5000.00
 Receipt

C. Full Name (Last, First, Middle Initial)
DTE Energy Company PAC

Mailing Address 2000 2nd Ave

City Detroit State MI Zip Code 48226-1203

FEC ID number of contributing federal political committee. **C** C00081547

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4500.00

Date of Receipt: 08 / 04 / 2008
Transaction ID: 80805.C837
 Amount of Each Receipt this Period: 2500.00
 Receipt

SUBTOTAL of Receipts This Page (optional) ► 9000.00

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 / 31
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Rely on Your Beliefs Fund

A. Full Name (Last, First, Middle Initial)
Duke Energy Corporation PAC

Mailing Address 422 South Church Street, PB05D

City State Zip Code
Charlotte NC 28202

FEC ID number of contributing federal political committee. **C** C00083535

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	5	/	2	0	0	8

Transaction ID: 80815.C840

Amount of Each Receipt this Period
2500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Edison International PAC

Mailing Address 555 12th St NW Suite 640

City State Zip Code
Washington DC 20004-1200

FEC ID number of contributing federal political committee. **C** C00019653

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	5	/	2	0	0	8

Transaction ID: 80815.C844

Amount of Each Receipt this Period
2500.00

Receipt

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

Mailing Address PO Box 805379

City State Zip Code
Chicago IL 60680-4115

FEC ID number of contributing federal political committee. **C** C00141218

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	4	/	2	0	0	8

Transaction ID: 80805.C831

Amount of Each Receipt this Period
2500.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **7500.00**

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 / 31
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Rely on Your Beliefs Fund

A. Full Name (Last, First, Middle Initial)
Federation of American Hospitals PAC

Mailing Address 801 Pennsylvania Ave NW Ste 245

City State Zip Code
Washington DC 20004-2697

FEC ID number of contributing federal political committee. C C00002261

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt MM / DD / YYYY
08 / 04 / 2008

Transaction ID: 80805.C834

Amount of Each Receipt this Period 2500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Fluor Corporation PAC

Mailing Address 403 E Capitol St SE

City State Zip Code
Washington DC 20003-3810

FEC ID number of contributing federal political committee. C C00034132

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt MM / DD / YYYY
08 / 15 / 2008

Transaction ID: 80815.C841

Amount of Each Receipt this Period 2500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Jacobs Engineering Group Inc. PAC

Mailing Address 413 New Jersey Ave SE

City State Zip Code
Washington DC 20003-4051

FEC ID number of contributing federal political committee. C C00142299

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt MM / DD / YYYY
08 / 04 / 2008

Transaction ID: 80805.C838

Amount of Each Receipt this Period 5000.00

Receipt

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) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 31
	(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)
Rely on Your Beliefs Fund

A. Full Name (Last, First, Middle Initial)
Medco Health PAC

Mailing Address 591 Redwood Hwy Ste 4000
Building 4000

City State Zip Code
Mill Valley CA 94941-3039

FEC ID number of contributing federal political committee. **C** C00384362

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 0 4 / 2 0 0 8

Transaction ID: 80805.C830

Amount of Each Receipt this Period
2500.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	2500.00
TOTAL This Period (last page this line number only)	▶	41500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 31
(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)
Rely on Your Beliefs Fund

A.

Full Name (Last, First, Middle Initial) Kirsten Chadwick		Date of Receipt MM / DD / YYYY 08 / 15 / 2008
Mailing Address 601 President Ford Lane		Transaction ID: 80815.C842
City Alexandria	State VA	Zip Code 22302
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Fierce Isakowitz & Blalock	Occupation Partner	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.

Full Name (Last, First, Middle Initial) Gayle Palmer		Date of Receipt MM / DD / YYYY 08 / 15 / 2008
Mailing Address 57 Fair Oaks Dr		Transaction ID: 80815.C843
City Saint Louis	State MO	Zip Code 63124-1521
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer None	Occupation Homemaker	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	6000.00
TOTAL This Period (last page this line number only)	6000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 / 31
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15
		<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Rely on Your Beliefs Fund

A.	Full Name (Last, First, Middle Initial) Walsh for Congress		Date of Receipt
	Mailing Address PO Box 1974		<input type="text" value="08"/> / <input type="text" value="04"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Syracuse	NY	13201-1974
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
	Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	Transaction ID: 80805.C835
			Amount of Each Receipt this Period <input type="text" value="5000.00"/>
			Refund of Contribution Made

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="5000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="5000.00"/>

**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)

PAGE 13 / 31

<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)
Rely on Your Beliefs Fund

A.	Full Name (Last, First, Middle Initial) Comcast Mailing Address PO Box 3005 City Southeastern State PA Zip Code 19398-3005 Purpose of Disbursement PAC Internet Service 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) ▼	Transaction ID: 80915.E1501 Date of Disbursement 08 / 25 / 2008	Amount of Each Disbursement this Period 45.95 PAC INTERNET SERVICE
B.	Full Name (Last, First, Middle Initial) UPS Mailing Address PO Box 72470244 City Philadelphia State PA Zip Code 19170-0001 Purpose of Disbursement PAC Shipping Expense 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) ▼	Transaction ID: 80805.E1496 Date of Disbursement 08 / 04 / 2008	Amount of Each Disbursement this Period 88.12 PAC SHIPPING EXPENSE
C.	Full Name (Last, First, Middle Initial) UPS Mailing Address PO Box 72470244 City Philadelphia State PA Zip Code 19170-0001 Purpose of Disbursement PAC Shipping Expense 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) ▼	Transaction ID: 80915.E1505 Date of Disbursement 08 / 25 / 2008	Amount of Each Disbursement this Period 57.38 PAC SHIPPING EXPENSE

SUBTOTAL of Disbursements This Page (optional) ▶

191.45

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 14 / 31

<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)
Rely on Your Beliefs Fund

A.	Full Name (Last, First, Middle Initial) UPS	Transaction ID: 80915.E1526
	Mailing Address PO Box 72470244	Date of Disbursement 08 / 29 / 2008
	City Philadelphia State PA Zip Code 19170-0001	Amount of Each Disbursement this Period 68.66
	Purpose of Disbursement PAC Shipping Expense	Category/ Type PAC SHIPPING EXPENSE
	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) ▼

B.	Full Name (Last, First, Middle Initial) Visa	Transaction ID: 80805.E1494
	Mailing Address PO Box 77042	Date of Disbursement 08 / 04 / 2008
	City Madison State WI Zip Code 53707-1042	Amount of Each Disbursement this Period 381.98
	Purpose of Disbursement Credit Card Charges: See Below	Category/ Type CREDIT CARD CHARGES: SEE BELOW
	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) ▼

C.	Full Name (Last, First, Middle Initial) Westin Convention Center Hotel	Transaction ID: 80805.E1495
	Mailing Address 1000 Penn Ave	Date of Disbursement 08 / 04 / 2008
	City Pittsburgh State PA Zip Code 15222-3835	Amount of Each Disbursement this Period 318.55
	Purpose of Disbursement PAC Travel Expense	Category/ Type [MEMO ITEM] MEMO: PAC TRAVEL EXPENSE
	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)	▶	450.64
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 15 / 31

<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)
Rely on Your Beliefs Fund

A.

Full Name (Last, First, Middle Initial)
Visa

Mailing Address PO Box 77042

City Madison State WI Zip Code 53707-1042

Purpose of Disbursement
Credit Card Charges: See Below
Candidate Name

Category/
Type

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

Transaction ID: 80805.E1482
Date of Disbursement

08 / 04 / 2008

Amount of Each Disbursement this Period

4411.15

CREDIT CARD CHARGES: SEE BELOW

B.

Full Name (Last, First, Middle Initial)
Johnnys Half Shell

Mailing Address 400 N Capitol St NW

City Washington State DC Zip Code 20001-1511

Purpose of Disbursement
PAC Event Catering
Candidate Name

Category/
Type

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

Transaction ID: 80805.E1485
Date of Disbursement

08 / 04 / 2008

Amount of Each Disbursement this Period

2738.30

[MEMO ITEM]
MEMO: PAC EVENT CATERING

C.

Full Name (Last, First, Middle Initial)
Charlie Palmer Steakhouse

Mailing Address 101 Constitution Ave NW

City Washington State DC Zip Code 20001-2133

Purpose of Disbursement
PAC Meeting Expense
Candidate Name

Category/
Type

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

Transaction ID: 80805.E1486
Date of Disbursement

08 / 04 / 2008

Amount of Each Disbursement this Period

108.83

[MEMO ITEM]
MEMO: PAC MEETING EXPENSE

SUBTOTAL of Disbursements This Page (optional) ▶

4411.15

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

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)
Rely on Your Beliefs Fund

A.	Full Name (Last, First, Middle Initial) Visa	Transaction ID: 80805.E1488 Date of Disbursement 08 / 04 / 2008
	Mailing Address PO Box 77042	Amount of Each Disbursement this Period 6974.19
	City Madison State WI Zip Code 53707-1042	
	Purpose of Disbursement Credit Card Charges: See Below	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	CREDIT CARD CHARGES: SEE BELOW
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Amtrak	Transaction ID: 80805.E1493 Date of Disbursement 08 / 04 / 2008
	Mailing Address 50 Massachusetts Ave NE	Amount of Each Disbursement this Period 223.00
	City Washington State DC Zip Code 20002-4214	
	Purpose of Disbursement PAC Travel Expense	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: PAC TRAVEL EXPENSE
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Johnnys Half Shell	Transaction ID: 80805.E1489 Date of Disbursement 08 / 04 / 2008
	Mailing Address 400 N Capitol St NW	Amount of Each Disbursement this Period 468.70
	City Washington State DC Zip Code 20001-1511	
	Purpose of Disbursement PAC Event Catering	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: PAC EVENT CATERING
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	6974.19
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)
Rely on Your Beliefs Fund

A. Full Name (Last, First, Middle Initial) BLT Steak Mailing Address 1625 I St NW City Washington State DC Zip Code 20006-4061 Purpose of Disbursement PAC Fundraising Catering 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) ▼	Transaction ID: 80805.E1492 Date of Disbursement 08 / 04 / 2008 Amount of Each Disbursement this Period 2406.20 [MEMO ITEM] MEMO: PAC FUNDRAISING CAT- ERING
	Category/ Type	

B. Full Name (Last, First, Middle Initial) Brasserie Beck Mailing Address 1101 K St NW City Washington State DC Zip Code 20005-4210 Purpose of Disbursement PAC Fundraising Catering 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) ▼	Transaction ID: 80805.E1490 Date of Disbursement 08 / 04 / 2008 Amount of Each Disbursement this Period 2788.45 [MEMO ITEM] MEMO: PAC FUNDRAISING CAT- ERING
	Category/ Type	

C. Full Name (Last, First, Middle Initial) Westin Convention Center Hotel Mailing Address 1000 Penn Ave City Pittsburgh State PA Zip Code 15222-3835 Purpose of Disbursement PAC Travel Expense 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) ▼	Transaction ID: 80805.E1491 Date of Disbursement 08 / 04 / 2008 Amount of Each Disbursement this Period 344.32 [MEMO ITEM] MEMO: PAC TRAVEL EXPENSE
	Category/ Type	

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)
Rely on Your Beliefs Fund

A.	Full Name (Last, First, Middle Initial) Visa	Transaction ID: 80915.E1521 Date of Disbursement 08 / 29 / 2008
	Mailing Address PO Box 77042	Amount of Each Disbursement this Period 3384.73
	City Madison State WI Zip Code 53707-1042	
	Purpose of Disbursement Credit Card Charges: See Below	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	CREDIT CARD CHARGES: SEE BELOW
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Bullfeathers Restaurant	Transaction ID: 80915.E1525 Date of Disbursement 08 / 29 / 2008
	Mailing Address 120 7th St NE	Amount of Each Disbursement this Period 61.00
	City Washington State DC Zip Code 20002-6024	
	Purpose of Disbursement PAC Meeting Expense	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: PAC MEETING EXPENSE
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) American Airlines	Transaction ID: 80915.E1522 Date of Disbursement 08 / 29 / 2008
	Mailing Address 4255 Amon Carter Blvd # 2400	Amount of Each Disbursement this Period 2113.00
	City Fort Worth State TX Zip Code 76155-2603	
	Purpose of Disbursement PAC Airfare Expense	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: PAC AIRFARE EXPENSE
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	3384.73
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)
Rely on Your Beliefs Fund

A.	Full Name (Last, First, Middle Initial) Delta Airlines	Transaction ID: 80915.E1524 Date of Disbursement 08 / 29 / 2008
	Mailing Address 1030 Delta Blvd	Amount of Each Disbursement this Period 789.50
	City Atlanta State GA Zip Code 30354-1989	
	Purpose of Disbursement PAC Airfare Expense	[MEMO ITEM] MEMO: PAC AIRFARE EXPENSE
	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) ▼	

B.	Full Name (Last, First, Middle Initial) Visa	Transaction ID: 80915.E1510 Date of Disbursement 08 / 29 / 2008
	Mailing Address PO Box 77042	Amount of Each Disbursement this Period 266.43
	City Madison State WI Zip Code 53707-1042	
	Purpose of Disbursement Credit Card Charges: See Below	CREDIT CARD CHARGES: SEE BELOW
	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) ▼	

C.	Full Name (Last, First, Middle Initial) Brasserie Beck	Transaction ID: 80915.E1512 Date of Disbursement 08 / 29 / 2008
	Mailing Address 1101 K St NW	Amount of Each Disbursement this Period 40.56
	City Washington State DC Zip Code 20005-4210	
	Purpose of Disbursement PAC Meeting Expense	[MEMO ITEM] MEMO: PAC MEETING EXPENSE
	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)	▶	266.43
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)
Rely on Your Beliefs Fund

A.	Full Name (Last, First, Middle Initial) Visa	Transaction ID: 80915.E1513 Date of Disbursement 08 / 29 / 2008
	Mailing Address PO Box 77042	Amount of Each Disbursement this Period 9560.80
	City Madison State WI Zip Code 53707-1042	
	Purpose of Disbursement Credit Card Charges: See Below	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	CREDIT CARD CHARGES: SEE BELOW
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) US Airways	Transaction ID: 80915.E1517 Date of Disbursement 08 / 29 / 2008
	Mailing Address 4000 E Sky Harbor Blvd	Amount of Each Disbursement this Period 262.00
	City Phoenix State AZ Zip Code 85034-3802	
	Purpose of Disbursement PAC Airfare Expense	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: PAC AIRFARE EXPENSE
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) United Airlines	Transaction ID: 80915.E1519 Date of Disbursement 08 / 29 / 2008
	Mailing Address 1200 E Algonquin Rd	Amount of Each Disbursement this Period 325.50
	City Arlington Heights State IL Zip Code 60005-4712	
	Purpose of Disbursement PAC Airfare Expense	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: PAC AIRFARE EXPENSE
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	9560.80
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)
Rely on Your Beliefs Fund

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Delta Airlines</p> <p>Mailing Address 1030 Delta Blvd</p> <p>City Atlanta State GA Zip Code 30354-1989</p> <p>Purpose of Disbursement PAC Airfare Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80915.E1515</p> <p>Date of Disbursement 08 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 1831.50</p> <p>[MEMO ITEM] MEMO: PAC AIRFARE EXPENSE</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) McKenna Long & Aldridge</p> <p>Mailing Address 303 Peachtree St NE Suite 5300</p> <p>City Atlanta State GA Zip Code 30308-3265</p> <p>Purpose of Disbursement PAC Legal Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80915.E1502</p> <p>Date of Disbursement 08 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 7500.00</p> <p>PAC LEGAL SERVICES</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) McKenna Long & Aldridge</p> <p>Mailing Address 303 Peachtree St NE Suite 5300</p> <p>City Atlanta State GA Zip Code 30308-3265</p> <p>Purpose of Disbursement PAC Legal Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80915.E1527</p> <p>Date of Disbursement 08 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 7500.00</p> <p>PAC LEGAL SERVICES</p>

SUBTOTAL of Disbursements This Page (optional)	15000.00
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)
Rely on Your Beliefs Fund

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Thompson Communications</p> <p>Mailing Address P.O. Box 5</p> <p>City Marshfield State MO Zip Code 65706-0005</p> <p>Purpose of Disbursement PAC Staffing Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80915.E1504</p> <p>Date of Disbursement 08 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 13452.53</p> <p>Category/Type PAC STAFFING EXPENSE</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) PRIsm</p> <p>Mailing Address 8500 Leesburg Pike Suite 208</p> <p>City Vienna State VA Zip Code 22182-2409</p> <p>Purpose of Disbursement PAC Annual Subscription</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80805.E1481</p> <p>Date of Disbursement 08 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 4500.00</p> <p>Category/Type PAC ANNUAL SUBSCRIPTION</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address PO Box 1270</p> <p>City Newark State NJ Zip Code 07101-1270</p> <p>Purpose of Disbursement PAC Renewal Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80915.E1503</p> <p>Date of Disbursement 08 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 450.00</p> <p>Category/Type PAC RENEWAL FEE</p>

SUBTOTAL of Disbursements This Page (optional) ▶

18402.53

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)
Rely on Your Beliefs Fund

A.	Full Name (Last, First, Middle Initial) Keri Ann Hayes	Transaction ID: 80915.E1506 Date of Disbursement 08 / 25 / 2008
	Mailing Address 202 11th St NE	Amount of Each Disbursement this Period 3503.57
	City Washington State DC Zip Code 20002-6218	
	Purpose of Disbursement See Below	SEE BELOW
	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:	

B.	Full Name (Last, First, Middle Initial) Ruths Chris Steakhouse	Transaction ID: 80915.E1509 Date of Disbursement 08 / 25 / 2008
	Mailing Address 1801 Connecticut Ave NW	Amount of Each Disbursement this Period 2681.89
	City Washington State DC Zip Code 20009-5700	
	Purpose of Disbursement PAC Event Catering	[MEMO ITEM] MEMO: PAC EVENT CATERING
	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:	

C.	Full Name (Last, First, Middle Initial) The Homestead	Transaction ID: 80915.E1508 Date of Disbursement 08 / 25 / 2008
	Mailing Address 1766 Homestead Drive	Amount of Each Disbursement this Period 706.24
	City Hot Springs State VA Zip Code 24445-	
	Purpose of Disbursement PAC Event Lodging	[MEMO ITEM] MEMO: PAC EVENT LODGING
	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)	3503.57
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)
Rely on Your Beliefs Fund

<p>A. Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address PO Box 19769</p> <p>City Irvine State CA Zip Code 92623-9769</p> <p>Purpose of Disbursement PAC Telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80915.E1507 Date of Disbursement 08 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 115.44</p> <p>[MEMO ITEM] MEMO: PAC TELEPHONE</p>
<p>B. Full Name (Last, First, Middle Initial) Professional Data Services, Inc.</p> <p>Mailing Address 337 S Milledge Ave Ste 101</p> <p>City Athens State GA Zip Code 30605-1083</p> <p>Purpose of Disbursement Compliance Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80915.E1497 Date of Disbursement 08 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 1521.13</p> <p>COMPLIANCE CONSULTING</p>
<p>C. Full Name (Last, First, Middle Initial) Dan Williams</p> <p>Mailing Address 209 Pennsylvania Ave SE</p> <p>City Washington State DC Zip Code 20003-1107</p> <p>Purpose of Disbursement PAC Office Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80915.E1499 Date of Disbursement 08 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 1431.88</p> <p>PAC OFFICE RENT</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2953.01

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)
Rely on Your Beliefs Fund

A.

Full Name (Last, First, Middle Initial)
Dan Williams

Mailing Address 209 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1107

Purpose of Disbursement
PAC Telephones

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80915.E1498

Date of Disbursement

08 / 25 / 2008

Amount of Each Disbursement this Period

114.98

PAC TELEPHONES

SUBTOTAL of Disbursements This Page (optional)

114.98

TOTAL This Period (last page this line number only)

65213.48

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Rely on Your Beliefs Fund

A.	Full Name (Last, First, Middle Initial) US Airways	Transaction ID: 80917.E1552
	Mailing Address 4000 E Sky Harbor Blvd	Date of Disbursement MM / DD / YYYY 08 / 29 / 2008
	City Phoenix State AZ Zip Code 85034-3802	Amount of Each Disbursement this Period 454.00
	Purpose of Disbursement AIRFARE EXPENSE-SEE VISA 8-29-08	[MEMO ITEM] MEMO: AIRFARE EXPENSE-SEE VISA 8-29-08
	Candidate Name DARREN P WHITE	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 01	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) US Airways	Transaction ID: 80917.E1549
	Mailing Address 4000 E Sky Harbor Blvd	Date of Disbursement MM / DD / YYYY 08 / 29 / 2008
	City Phoenix State AZ Zip Code 85034-3802	Amount of Each Disbursement this Period 1606.50
	Purpose of Disbursement AIRFARE EXPENSE-SEE VISA 8-29-08	[MEMO ITEM] MEMO: AIRFARE EXPENSE-SEE VISA 8-29-08
	Candidate Name MARTIN OZINGA, III	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 11	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) US Airways	Transaction ID: 80917.E1544
	Mailing Address 4000 E Sky Harbor Blvd	Date of Disbursement MM / DD / YYYY 08 / 29 / 2008
	City Phoenix State AZ Zip Code 85034-3802	Amount of Each Disbursement this Period 947.50
	Purpose of Disbursement AIRFARE EXPENSE-SEE VISA 8-29-08	[MEMO ITEM] MEMO: AIRFARE EXPENSE-SEE VISA 8-29-08
	Candidate Name DAVID CAPPIELLO	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" 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)

<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)
Rely on Your Beliefs Fund

A.	Full Name (Last, First, Middle Initial) United Airlines	Transaction ID: 80917.E1551 Date of Disbursement 08 / 29 / 2008
	Mailing Address 1200 E Algonquin Rd	Amount of Each Disbursement this Period 1203.50
	City Arlington Heights State IL Zip Code 60005-4712	
	Purpose of Disbursement AIRFARE EXPENSE-SEE VISA 8-29-08	Category/Type
	Candidate Name MARTIN OZINGA, III	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 11	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: AIRFARE EXPENSE-SEE VISA 8-29-08

B.	Full Name (Last, First, Middle Initial) United Airlines	Transaction ID: 80805.E1487 Date of Disbursement 08 / 04 / 2008
	Mailing Address 1200 E Algonquin Rd	Amount of Each Disbursement this Period 423.50
	City Arlington Heights State IL Zip Code 60005-4712	
	Purpose of Disbursement AIRFARE EXPENSE-SEE VISA 8-29-08	Category/Type
	Candidate Name TIM MURPHY	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 18	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: AIRFARE EXPENSE-SEE VISA 8-29-08

C.	Full Name (Last, First, Middle Initial) American Airlines	Transaction ID: 80915.E1514 Date of Disbursement 08 / 29 / 2008
	Mailing Address 4255 Amon Carter Blvd # 2400	Amount of Each Disbursement this Period 714.00
	City Fort Worth State TX Zip Code 76155-2603	
	Purpose of Disbursement AIRFARE EXPENSE-SEE VISA 8-29-08	Category/Type
	Candidate Name GREGG HARPER	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 03	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: AIRFARE EXPENSE-SEE VISA 8-29-08

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 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)
Rely on Your Beliefs Fund

A.	Full Name (Last, First, Middle Initial) Southwest Airlines	Transaction ID: 80915.E1518 Date of Disbursement 08 / 29 / 2008
	Mailing Address PO Box 36611	Amount of Each Disbursement this Period 258.50
	City Dallas State TX Zip Code 75235-1611	
	Purpose of Disbursement AIRFARE EXPENSE-SEE VISA 8-29-08	Category/ Type
	Candidate Name RICHARD ANTHONY KELLER	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 08	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: AIRFARE EXPENSE-SEE VISA 8-29-08

B.	Full Name (Last, First, Middle Initial) Southwest Airlines	Transaction ID: 80917.E1543 Date of Disbursement 08 / 29 / 2008
	Mailing Address PO Box 36611	Amount of Each Disbursement this Period 112.50
	City Dallas State TX Zip Code 75235-1611	
	Purpose of Disbursement AIRFARE EXPENSE-SEE VISA 8-29-08	Category/ Type
	Candidate Name DAVID CAPPIELLO	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: AIRFARE EXPENSE-SEE VISA 8-29-08

C.	Full Name (Last, First, Middle Initial) Amtrak	Transaction ID: 80917.E1545 Date of Disbursement 08 / 29 / 2008
	Mailing Address 50 Massachusetts Ave NE	Amount of Each Disbursement this Period 226.00
	City Washington State DC Zip Code 20002-4214	
	Purpose of Disbursement TRAVEL EXPENSE-SEE VISA 8-29-08	Category/ Type
	Candidate Name LEONARD LANCE	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 12	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: TRAVEL EXPENSE-SEE VISA 8-29-08

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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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)
Rely on Your Beliefs Fund

A.	Full Name (Last, First, Middle Initial) Amtrak	Transaction ID: 80917.E1546 Date of Disbursement 08 / 29 / 2008
	Mailing Address 50 Massachusetts Ave NE	Amount of Each Disbursement this Period 165.00
	City Washington State DC Zip Code 20002-4214	
	Purpose of Disbursement TRAVEL EXPENSE-SEE VISA 8-29-08	
	Candidate Name CHRIS MYERS	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: NJ District: 03	[MEMO ITEM] MEMO: TRAVEL EXPENSE-SEE VISA 8-29-08

B.	Full Name (Last, First, Middle Initial) Blaine for Congress	Transaction ID: 80915.E1528 Date of Disbursement 08 / 29 / 2008
	Mailing Address PO Box 1526	Amount of Each Disbursement this Period 5000.00
	City Columbia State MO Zip Code 65205-	
	Purpose of Disbursement DEBT RETIREMENT	
	Candidate Name BLAINE LUETKEMEYER	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: MO District: 09	DEBT RETIREMENT

C.	Full Name (Last, First, Middle Initial) Jay Love for Congress	Transaction ID: 80915.E1530 Date of Disbursement 08 / 29 / 2008
	Mailing Address 1020 Monticello Court, Ste. 205	Amount of Each Disbursement this Period 4791.70
	City Montgomery State AL Zip Code 36117-	
	Purpose of Disbursement CONTRIBUTION	
	Candidate Name JAY K LOVE	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: AL District: 02	CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional)	9791.70
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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<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)
Rely on Your Beliefs Fund

A.	Full Name (Last, First, Middle Initial) Jay Love for Congress	Transaction ID: 80915.E1529 Date of Disbursement 08 / 29 / 2008
	Mailing Address 1020 Monticello Court, Ste. 205	Amount of Each Disbursement this Period 5000.00
	City Montgomery State AL Zip Code 36117-	
	Purpose of Disbursement DEBT RETIREMENT	Category/ Type
	Candidate Name JAY K LOVE	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 02	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		DEBT RETIREMENT

B.	Full Name (Last, First, Middle Initial) Northwest Airlines	Transaction ID: 80915.E1520 Date of Disbursement 08 / 29 / 2008
	Mailing Address 5101 Northwest Drive	Amount of Each Disbursement this Period 689.50
	City Saint Paul State MN Zip Code 55121-	
	Purpose of Disbursement AIRFARE EXPENSE-SEE VISA 8-29-08	Category/ Type
	Candidate Name ROBERT EDWARD LATTA	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 05	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: AIRFARE EXPENSE-SEE VISA 8-29-08

C.	Full Name (Last, First, Middle Initial) Northwest Airlines	Transaction ID: 80805.E1483 Date of Disbursement 08 / 04 / 2008
	Mailing Address 5101 Northwest Drive	Amount of Each Disbursement this Period 963.00
	City Saint Paul State MN Zip Code 55121-	
	Purpose of Disbursement AIRFARE EXPENSE-SEE VISA 8-29-08	Category/ Type
	Candidate Name TIM MURPHY	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 18	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: AIRFARE EXPENSE-SEE VISA 8-29-08

SUBTOTAL of Disbursements This Page (optional)	5000.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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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)
Rely on Your Beliefs Fund

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Tuesday Group PAC</p> <p>Mailing Address 209 Pennsylvania Ave SE</p> <p>City Washington State DC Zip Code 20003-1107</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80915.E1531</p> <p>Date of Disbursement MM / DD / YYYY 08 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>CONTRIBUTION</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Westin Convention Center Hotel</p> <p>Mailing Address 1000 Penn Ave</p> <p>City Pittsburgh State PA Zip Code 15222-3835</p> <p>Purpose of Disbursement TRAVEL EXPENSE-SEE VISA 8-29-08</p> <p>Candidate Name TIM MURPHY</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 18</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80917.E1548</p> <p>Date of Disbursement MM / DD / YYYY 08 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 269.00</p> <p>[MEMO ITEM] MEMO: TRAVEL EXPENSE-SEE VISA 8-29-08</p>

SUBTOTAL of Disbursements This Page (optional) ►

5000.00

TOTAL This Period (last page this line number only) ►

19791.70