

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 Rely on Your Beliefs Fund

ADDRESS (number and street) 209 Pennsylvania Avenue, SE Washington DC 20003 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00344648 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Convention, Special, Runoff (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 04 01 2008 through 04 30 2008

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 Paul Kilgore

Signature of Treasurer Electronically Filed by Paul Kilgore Date 05 20 2008

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

Office Use Only table with 7 columns and 1 row, followed by FEC FORM 3X (Rev. 12/2004)

**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	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	4

D	D
3	0

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	64906.39									
(c) Total Receipts (from Line 19)	51387.40	126936.63								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	116293.79	345647.61								
7. Total Disbursements (from Line 31)	70869.07	300222.89								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	45424.72	45424.72								
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	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	4

D	D
3	0

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	4500.00	11000.00
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	4500.00	11000.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	46500.00	112500.00
(c) Other Political Committees (such as PACs)	51000.00	123500.00
(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)	387.40	3436.63
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total 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))	51387.40	126936.63
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	51387.40	126936.63

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.....	40869.07	185222.89
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	40869.07	185222.89
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	30000.00	110000.00
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	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))..	70869.07	300222.89
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	70869.07	300222.89

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	51000.00	123500.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	51000.00	123500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	40869.07	185222.89
37. Offsets to Operating Expenditures (from Line 15, page 3)	387.40	3436.63
38. Net Operating Expenditures (subtract Line 37 from Line 36)	40481.67	181786.26

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 / 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

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) Hunton & Williams		Date of Receipt MM / DD / YYYY 04 / 28 / 2008
Mailing Address 1900 K St NW		Transaction ID: 80519.C719
City Washington	State DC	Zip Code 20006-1108
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	NOTE: No Itemization Necessary

B.

Full Name (Last, First, Middle Initial) Karen Smith		Date of Receipt MM / DD / YYYY 04 / 14 / 2008
Mailing Address 1401 K St NW 12th Floor		Transaction ID: 80418.C705
City Washington	State DC	Zip Code 20005-3401
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
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 ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional)	4500.00
TOTAL This Period (last page this line number only)	4500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 27
(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)
American Bankers Association PAC

Mailing Address 1120 Connecticut Ave NW

City State Zip Code
Washington DC 20036-3905

FEC ID number of contributing federal political committee. **C** C00004275

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 Y
 0 4 / 1 4 / 2 0 0 8

Transaction ID: 80418.C704

Amount of Each Receipt this Period
2500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Associated Builders & Contractors PAC

Mailing Address 4250 Fairfax Dr FI 9
9th Floor

City State Zip Code
Arlington VA 22203-1665

FEC ID number of contributing federal political committee. **C** C00010421

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 2 1 / 2 0 0 8

Transaction ID: 80519.C712

Amount of Each Receipt this Period
5000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Association of American Railroads PAC

Mailing Address 50 F St NW

City State Zip Code
Washington DC 20001-1530

FEC ID number of contributing federal political committee. **C** C00280743

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 2 1 / 2 0 0 8

Transaction ID: 80519.C711

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 8500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 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)
Rely on Your Beliefs Fund

A.	Full Name (Last, First, Middle Initial) BNSF RailPAC		Date of Receipt
	Mailing Address 700 13th St NW Suite 220		<input type="text" value="04"/> / <input type="text" value="21"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Washington	DC	20005-5915
	FEC ID number of contributing federal political committee.		Transaction ID: 80519.C714
		Amount of Each Receipt this Period	
		<input type="text" value="2500.00"/>	
Name of Employer		Occupation	Receipt
Receipt For:		Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="5000.00"/>	
<input type="checkbox"/> Other (specify) ▼			

B.	Full Name (Last, First, Middle Initial) Boeing PAC		Date of Receipt
	Mailing Address 1200 Wilson Blvd		<input type="text" value="04"/> / <input type="text" value="28"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Arlington	VA	22209-2305
	FEC ID number of contributing federal political committee.		Transaction ID: 80519.C722
		Amount of Each Receipt this Period	
		<input type="text" value="1500.00"/>	
Name of Employer		Occupation	Receipt
Receipt For:		Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="1500.00"/>	
<input type="checkbox"/> Other (specify) ▼			

C.	Full Name (Last, First, Middle Initial) Bryan Cave LLP Political Fund		Date of Receipt
	Mailing Address 700 13th St NW Ste 700		<input type="text" value="04"/> / <input type="text" value="21"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Washington	DC	20005-6619
	FEC ID number of contributing federal political committee.		Transaction ID: 80519.C713
		Amount of Each Receipt this Period	
		<input type="text" value="1500.00"/>	
Name of Employer		Occupation	Receipt
Receipt For:		Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="1500.00"/>	
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="5500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for 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)
Rely on Your Beliefs Fund

<p>A. Full Name (Last, First, Middle Initial) CSX Corporation Good Government Fund</p> <p>Mailing Address 1331 Pennsylvania Ave NW Suite 500</p> <p>City State Zip Code Washington DC 20004-1743</p> <p>FEC ID number of contributing federal political committee. C C00163832</p> <p>Name of Employer Occupation</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 5000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 0 8</p> <p>Transaction ID: 80519.C710</p> <p>Amount of Each Receipt this Period 5000.00</p> <p>Receipt</p>
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<p>B. Full Name (Last, First, Middle Initial) Federal Express PAC</p> <p>Mailing Address 101 Constitution Ave NW Suite 801 east</p> <p>City State Zip Code Washington DC 20001-2133</p> <p>FEC ID number of contributing federal political committee. C C00068692</p> <p>Name of Employer Occupation</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 2500.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 8</p> <p>Transaction ID: 80519.C720</p> <p>Amount of Each Receipt this Period 2500.00</p> <p>Receipt</p>
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<p>C. Full Name (Last, First, Middle Initial) FMR LLC PAC</p> <p>Mailing Address 82 Devonshire St</p> <p>City State Zip Code Boston MA 02109-3605</p> <p>FEC ID number of contributing federal political committee. C C00380550</p> <p>Name of Employer Occupation</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 2500.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 0 8</p> <p>Transaction ID: 80519.C716</p> <p>Amount of Each Receipt this Period 2500.00</p> <p>Receipt</p>
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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 / 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)
Rely on Your Beliefs Fund

A.

Full Name (Last, First, Middle Initial)
Massachusetts Mutual Life Insurance PAC

Mailing Address 601 Pennsylvania Ave., NW
Suite 4205

City Washington State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. C C00118943

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 4 / 2 1 / 2 0 0 8

Transaction ID: 80519.C715

Amount of Each Receipt this Period 2500.00

Receipt

B.

Full Name (Last, First, Middle Initial)
New York Life PAC

Mailing Address 1501 K St NW
Suite 575

City Washington State DC Zip Code 20005-1413

FEC ID number of contributing federal political committee. C C00158881

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 4 / 1 4 / 2 0 0 8

Transaction ID: 80418.C706

Amount of Each Receipt this Period 2500.00

Receipt

C.

Full Name (Last, First, Middle Initial)
New York Life PAC

Mailing Address 1501 K St NW
Suite 575

City Washington State DC Zip Code 20005-1413

FEC ID number of contributing federal political committee. C C00158881

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

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

Transaction ID: 80519.C721

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 11 / 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)
Rely on Your Beliefs Fund

A.

Full Name (Last, First, Middle Initial)
Norfolk Southern Corp Good Govt Fund

Mailing Address 1500 K St NW
Suite 175

City State Zip Code
Washington DC 20005-1209

FEC ID number of contributing federal political committee. **C** C00009282

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 1 / 2 0 0 8

Transaction ID: 80519.C708

Amount of Each Receipt this Period

5000.00

Receipt

B.

Full Name (Last, First, Middle Initial)
The Travelers Companies, Inc. PAC

Mailing Address 1 Tower Sq

City State Zip Code
Hartford CT 06183-0001

FEC ID number of contributing federal political committee. **C** C00376376

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 Y
0 4 / 2 8 / 2 0 0 8

Transaction ID: 80519.C717

Amount of Each Receipt this Period

2500.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Union Pacific Corporation PAC

Mailing Address 600 13th St NW
Suite 340

City State Zip Code
Washington DC 20005-3012

FEC ID number of contributing federal political committee. **C** C00010470

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 1 / 2 0 0 8

Transaction ID: 80519.C707

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 12 / 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)
Rely on Your Beliefs Fund

A.

Full Name (Last, First, Middle Initial)
Washington Mutual PAC

Mailing Address 600 14th St NW
Suite 600

City State Zip Code
Washington DC 20005-2028

FEC ID number of contributing federal political committee. **C** C00129833

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 4 / 2 8 / 2 0 0 8

Transaction ID: 80519.C718

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)	▶	46500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 13 / 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 checked="" 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)
Friends of Roy Blunt

Mailing Address PO Box 50100

City State Zip Code
Springfield MO 65805-0100

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
387.40

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	1	/	2	0	0	8

Transaction ID: 80519.C730

Amount of Each Receipt this Period
387.40

Offsets to Operating Expenditure

SUBTOTAL of Receipts This Page (optional)	▶	387.40
TOTAL This Period (last page this line number only)	▶	387.40

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)
UPS

Transaction ID: 80418.E1328
Date of Disbursement

Mailing Address PO Box 72470244

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	0	8

City Philadelphia State PA Zip Code 19170-0001

Amount of Each Disbursement this Period

Purpose of Disbursement
PAC Shipping

Category/ Type

52.91

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

PAC SHIPPING

State: District:

B.

Full Name (Last, First, Middle Initial)
UPS

Transaction ID: 80519.E1344
Date of Disbursement

Mailing Address PO Box 72470244

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	1		2	0	0	8

City Philadelphia State PA Zip Code 19170-0001

Amount of Each Disbursement this Period

Purpose of Disbursement
PAC Shipping

Category/ Type

75.84

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

PAC SHIPPING

State: District:

C.

Full Name (Last, First, Middle Initial)
Visa

Transaction ID: 80418.E1327
Date of Disbursement

Mailing Address PO Box 77042

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	0	8

City Madison State WI Zip Code 53707-1042

Amount of Each Disbursement this Period

Purpose of Disbursement
See Below-No Itemization Necessary

Category/ Type

107.29

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

SEE BELOW-NO ITEMIZATION NECESSARY

State: District:

SUBTOTAL of Disbursements This Page (optional)

236.04

TOTAL This Period (last page this line number only)

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**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: 80418.E1331 Date of Disbursement 04 / 14 / 2008
	Mailing Address PO Box 77042	Amount of Each Disbursement this Period 5434.56
	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) Washington Post	Transaction ID: 80418.E1335 Date of Disbursement 04 / 14 / 2008
	Mailing Address 1150 15th St NW	Amount of Each Disbursement this Period 30.46
	City Washington State DC Zip Code 20071-0001	
	Purpose of Disbursement PAC Subscription	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: PAC SUBSCRIPTION
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) US Airways	Transaction ID: 80418.E1336 Date of Disbursement 04 / 14 / 2008
	Mailing Address 4000 E Sky Harbor Blvd	Amount of Each Disbursement this Period 1255.00
	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) ▼	

SUBTOTAL of Disbursements This Page (optional)	5434.56
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) Washington Courier	Transaction ID: 80418.E1333 Date of Disbursement 04 / 14 / 2008
	Mailing Address 5520 Cherokee Ave Suite 120	Amount of Each Disbursement this Period 12.33
	City Alexandria State VA Zip Code 22312-2319	
	Purpose of Disbursement PAC Courier Expense 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] MEMO: PAC COURIER EXPENSE

B.	Full Name (Last, First, Middle Initial) United Airlines	Transaction ID: 80418.E1334 Date of Disbursement 04 / 14 / 2008
	Mailing Address 1200 E Algonquin Rd	Amount of Each Disbursement this Period 2507.48
	City Arlington Heights State IL Zip Code 60005-4712	
	Purpose of Disbursement PAC Airfare Expense 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] MEMO: PAC AIRFARE EXPENSE

C.	Full Name (Last, First, Middle Initial) American Airlines	Transaction ID: 80418.E1337 Date of Disbursement 04 / 14 / 2008
	Mailing Address 4255 Amon Carter Blvd # 2400	Amount of Each Disbursement this Period 570.50
	City Fort Worth State TX Zip Code 76155-2603	
	Purpose of Disbursement PAC Airfare Expense 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] MEMO: PAC AIRFARE EXPENSE

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

<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: 80418.E1339</p> <p>Date of Disbursement 04 / 14 / 2008</p> <p>Amount of Each Disbursement this Period 853.00</p> <p>[MEMO ITEM] MEMO: PAC AIRFARE EXPENSE</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Covad Communications</p> <p>Mailing Address 110 Rio Robles</p> <p>City San Jose State CA Zip Code 95134-1813</p> <p>Purpose of Disbursement PAC Technology 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: 80418.E1338</p> <p>Date of Disbursement 04 / 14 / 2008</p> <p>Amount of Each Disbursement this Period 74.95</p> <p>[MEMO ITEM] MEMO: PAC TECHNOLOGY EXPE-NSE</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Visa</p> <p>Mailing Address PO Box 77042</p> <p>City Madison State WI Zip Code 53707-1042</p> <p>Purpose of Disbursement Credit Card Charges-See Below</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: 80519.E1366</p> <p>Date of Disbursement 04 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 2794.44</p> <p>CREDIT CARD CHARGES-SEE BELOW</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2794.44

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) United Airlines	Transaction ID: 80519.E1380 Date of Disbursement 04 / 28 / 2008
	Mailing Address 1200 E Algonquin Rd	Amount of Each Disbursement this Period -831.49
	City Arlington Heights State IL Zip Code 60005-4712	
	Purpose of Disbursement PAC Airfare Credit	[MEMO ITEM] MEMO: PAC AIRFARE CREDIT
	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) Greenbrier Hotel	Transaction ID: 80519.E1367 Date of Disbursement 04 / 28 / 2008
	Mailing Address 300 W Main St	Amount of Each Disbursement this Period 3114.12
	City White Sulphur Spri State WV Zip Code 24986-2414	
	Purpose of Disbursement PAC Lodging	[MEMO ITEM] MEMO: PAC LODGING
	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) American Airlines	Transaction ID: 80519.E1368 Date of Disbursement 04 / 28 / 2008
	Mailing Address 4255 Amon Carter Blvd # 2400	Amount of Each Disbursement this Period 292.50
	City Fort Worth State TX Zip Code 76155-2603	
	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) ▼	

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)
Covad Communications

Transaction ID: 80519.E1369
Date of Disbursement

Mailing Address 110 Rio Robles

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

City San Jose State CA Zip Code 95134-1813

Amount of Each Disbursement this Period

74.95

Purpose of Disbursement
PAC Technology Expense

Category/ Type

Candidate Name

[MEMO ITEM]

MEMO: PAC TECHNOLOGY EXPENSE

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Visa

Transaction ID: 80519.E1348
Date of Disbursement

Mailing Address PO Box 77042

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

City Madison State WI Zip Code 53707-1042

Amount of Each Disbursement this Period

7377.25

Purpose of Disbursement
Credit Card Charges: See Below

Category/ Type

Candidate Name

CREDIT CARD CHARGES: SEE BELOW

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
SCI*Stamps.com

Transaction ID: 80519.E1354
Date of Disbursement

Mailing Address 12959 Coral Tree Pl

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

City Los Angeles State CA Zip Code 90066-7020

Amount of Each Disbursement this Period

15.99

Purpose of Disbursement
PAC Postage

Category/ Type

Candidate Name

[MEMO ITEM]

MEMO: PAC POSTAGE

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

7377.25

TOTAL This Period (last page this line number only)

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**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) Sonoma	Transaction ID: 80519.E1353 Date of Disbursement 04 / 28 / 2008
	Mailing Address 223 Pennsylvania Ave SE	Amount of Each Disbursement this Period 72.00
	City Washington State DC Zip Code 20003-1107	
	Purpose of Disbursement PAC Meeting Expense 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] MEMO: PAC MEETING EXPENSE

B.	Full Name (Last, First, Middle Initial) United Airlines	Transaction ID: 80519.E1351 Date of Disbursement 04 / 28 / 2008
	Mailing Address 1200 E Algonquin Rd	Amount of Each Disbursement this Period 456.50
	City Arlington Heights State IL Zip Code 60005-4712	
	Purpose of Disbursement PAC Airfare Expense 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] MEMO: PAC AIRFARE EXPENSE

C.	Full Name (Last, First, Middle Initial) American Airlines	Transaction ID: 80519.E1352 Date of Disbursement 04 / 28 / 2008
	Mailing Address 4255 Amon Carter Blvd # 2400	Amount of Each Disbursement this Period 2576.50
	City Fort Worth State TX Zip Code 76155-2603	
	Purpose of Disbursement PAC Airfare Expense 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] MEMO: PAC AIRFARE EXPENSE

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 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) Johnnys Half Shell	Transaction ID: 80519.E1359 Date of Disbursement 04 / 28 / 2008
	Mailing Address 400 N Capitol St NW	Amount of Each Disbursement this Period 100.00
	City Washington State DC Zip Code 20001-1511	
	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) ▼	

B.	Full Name (Last, First, Middle Initial) Delta Airlines	Transaction ID: 80519.E1349 Date of Disbursement 04 / 28 / 2008
	Mailing Address 1030 Delta Blvd	Amount of Each Disbursement this Period 676.00
	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) ▼	

C.	Full Name (Last, First, Middle Initial) Brasserie Beck	Transaction ID: 80519.E1357 Date of Disbursement 04 / 28 / 2008
	Mailing Address 1101 K St NW	Amount of Each Disbursement this Period 3218.30
	City Washington State DC Zip Code 20005-4210	
	Purpose of Disbursement PAC Fundraising Expense	[MEMO ITEM] MEMO: PAC FUNDRAISING EXP- ENSE
	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)	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) Verizon Wireless	Transaction ID: 80519.E1358 Date of Disbursement 04 / 28 / 2008
	Mailing Address PO Box 19769	Amount of Each Disbursement this Period 174.43
	City Irvine State CA Zip Code 92623-9769	
	Purpose of Disbursement PAC Telephone 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] MEMO: PAC TELEPHONE

B.	Full Name (Last, First, Middle Initial) Visa	Transaction ID: 80519.E1361 Date of Disbursement 04 / 28 / 2008
	Mailing Address PO Box 77042	Amount of Each Disbursement this Period 1159.52
	City Madison State WI Zip Code 53707-1042	
	Purpose of Disbursement Credit Card Charges-See Below 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) ▼
		CREDIT CARD CHARGES-SEE BELOW

C.	Full Name (Last, First, Middle Initial) United Airlines	Transaction ID: 80519.E1365 Date of Disbursement 04 / 28 / 2008
	Mailing Address 1200 E Algonquin Rd	Amount of Each Disbursement this Period 451.50
	City Arlington Heights State IL Zip Code 60005-4712	
	Purpose of Disbursement PAC Airfare Expense 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] MEMO: PAC AIRFARE EXPENSE

SUBTOTAL of Disbursements This Page (optional)	▶	1159.52
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) American Airlines	Transaction ID: 80519.E1362 Date of Disbursement 04 / 28 / 2008
	Mailing Address 4255 Amon Carter Blvd # 2400	Amount of Each Disbursement this Period 292.50
	City Fort Worth State TX Zip Code 76155-2603	
	Purpose of Disbursement PAC Airfare Expense 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] MEMO: PAC AIRFARE EXPENSE

B.	Full Name (Last, First, Middle Initial) Northwest Airlines	Transaction ID: 80519.E1363 Date of Disbursement 04 / 28 / 2008
	Mailing Address 5101 Northwest Drive	Amount of Each Disbursement this Period 120.50
	City Saint Paul State MN Zip Code 55121-	
	Purpose of Disbursement PAC Airfare Expense 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] MEMO: PAC AIRFARE EXPENSE

C.	Full Name (Last, First, Middle Initial) McKenna Long & Aldridge	Transaction ID: 80519.E1346 Date of Disbursement 04 / 21 / 2008
	Mailing Address 303 Peachtree St NE Suite 5300	Amount of Each Disbursement this Period 20593.90
	City Atlanta State GA Zip Code 30308-3265	
	Purpose of Disbursement PAC Legal Services Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAC LEGAL SERVICES

SUBTOTAL of Disbursements This Page (optional)	▶	20593.90
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) Professional Data Services, Inc.	Transaction ID: 80519.E1345 Date of Disbursement MM / DD / YYYY 04 / 21 / 2008
	Mailing Address 337 S Milledge Ave Ste 101	Amount of Each Disbursement this Period 1611.79
	City Athens State GA Zip Code 30605-1083	
	Purpose of Disbursement Compliance Consulting 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) ▼
		COMPLIANCE CONSULTING

B.	Full Name (Last, First, Middle Initial) Dan Williams	Transaction ID: 80418.E1329 Date of Disbursement MM / DD / YYYY 04 / 14 / 2008
	Mailing Address 209 Pennsylvania Ave SE	Amount of Each Disbursement this Period 103.44
	City Washington State DC Zip Code 20003-1107	
	Purpose of Disbursement PAC Office Phones 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) ▼
		PAC OFFICE PHONES

C.	Full Name (Last, First, Middle Initial) Dan Williams	Transaction ID: 80519.E1370 Date of Disbursement MM / DD / YYYY 04 / 28 / 2008
	Mailing Address 209 Pennsylvania Ave SE	Amount of Each Disbursement this Period 1511.75
	City Washington State DC Zip Code 20003-1107	
	Purpose of Disbursement PAC Office Rent 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) ▼
		PAC OFFICE RENT

SUBTOTAL of Disbursements This Page (optional)	▶	3226.98
TOTAL This Period (last page this line number only)	▶	40822.69

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) Greg Davis	Transaction ID: 80418.E1341 Date of Disbursement 04 / 14 / 2008
	Mailing Address 5779 Getwell Rd Bldg DSTE 1	Amount of Each Disbursement this Period 5000.00
	City Southhaven State MS Zip Code 38672-6347	
	Purpose of Disbursement	Category/Type
	Candidate Name CHARLES GREGORY DAVIS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 01	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General

B.	Full Name (Last, First, Middle Initial) Woody Jenkins for Congress	Transaction ID: 80519.E1371 Date of Disbursement 04 / 30 / 2008
	Mailing Address 910 N Foster Dr	Amount of Each Disbursement this Period 5000.00
	City Baton Rouge State LA Zip Code 70806-1807	
	Purpose of Disbursement DEBT RETIREMENT	Category/Type
	Candidate Name LOUIS JENKINS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 06	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special Primary

C.	Full Name (Last, First, Middle Initial) Woody Jenkins for Congress	Transaction ID: 80418.E1343 Date of Disbursement 04 / 16 / 2008
	Mailing Address 910 N Foster Dr	Amount of Each Disbursement this Period 5000.00
	City Baton Rouge State LA Zip Code 70806-1807	
	Purpose of Disbursement	Category/Type
	Candidate Name LOUIS JENKINS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 06	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General

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)

<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)
Manion for Congress

Transaction ID: 80418.E1326
Date of Disbursement

Mailing Address PO Box 28

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

City Doylestown State PA Zip Code 18901-0028

Amount of Each Disbursement this Period

Purpose of Disbursement

5000.00

Candidate Name
TOM MANION

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: PA District: 08

B.

Full Name (Last, First, Middle Initial)
Northup for Congress

Transaction ID: 80519.E1347
Date of Disbursement

Mailing Address PO Box 7313

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	5		2	0	0	8

City Louisville State KY Zip Code 40257-0313

Amount of Each Disbursement this Period

Purpose of Disbursement

5000.00

Candidate Name
ANNE M NORTHUP

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: KY District: 03

C.

Full Name (Last, First, Middle Initial)
Olson for Congress Committee

Transaction ID: 80418.E1342
Date of Disbursement

Mailing Address PO Box 16381

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	0	8

City Sugar Land State TX Zip Code 77496-6381

Amount of Each Disbursement this Period

Purpose of Disbursement

5000.00

Candidate Name
PETER GRAHAM OLSON

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: TX District: 22

SUBTOTAL of Disbursements This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

30000.00

**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)

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<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)
Rely on Your Beliefs Fund

A.	Full Name (Last, First, Middle Initial) United Airlines	Transaction ID: 80519.E1376 Date of Disbursement 04 / 04 / 2008
	Mailing Address 1200 E Algonquin Rd	Amount of Each Disbursement this Period 742.50
	City Arlington Heights State IL Zip Code 60005-4712	
	Purpose of Disbursement IN-KIND: AIRFARE-KNOX COUNTY GOP	[MEMO ITEM] MEMO:In-Kind: Airfare-Knox County GOP
	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) Delta Airlines	Transaction ID: 80519.E1375 Date of Disbursement 04 / 04 / 2008
	Mailing Address 1030 Delta Blvd	Amount of Each Disbursement this Period 426.50
	City Atlanta State GA Zip Code 30354-1989	
	Purpose of Disbursement IN-KIND: AIRFARE- KNOX COUNTY GOP	[MEMO ITEM] MEMO:In-Kind: Airfare-Knox County GOP
	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)	0.00
TOTAL This Period (last page this line number only)	0.00