

**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

National Campaign Fund

ADDRESS (number and street)

30011 Ivy Glenn Drive, Suite 223

☐Check if different
than previously
reported. (ACC)

Laguna Niguel

CA

92677

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00437822

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☒July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

01

01

2009

through

06

30

2009

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

James Lacy

Signature of Treasurer

Electronically Filed by James Lacy

Date

07

31

2009

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**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 60

Write or Type Committee Name
National Campaign Fund

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1		69371.47
(b) Cash on Hand at Beginning of Reporting Period	69371.47	
(c) Total Receipts (from Line 19)	146155.00	146155.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	215526.47	215526.47
7. Total Disbursements (from Line 31)	161443.80	161443.80
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	54082.67	54082.67
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)	9717.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name
National Campaign Fund

Report Covering the Period:

From:

M M D D Y Y W Y
0 1 0 1 2 0 0 9

To:

M M D D Y Y W Y
0 6 3 0 2 0 0 9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	7470.00	7470.00
(ii) Unitemized	138685.00	138685.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	146155.00	146155.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	146155.00	146155.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total 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))	146155.00	146155.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	146155.00	146155.00

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

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.....	161443.80	161443.80	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	161443.80	161443.80	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00	
24. Independent 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	0.00	
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))..	161443.80	161443.80	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	161443.80	161443.80	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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)	146155.00	146155.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	146155.00	146155.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	161443.80	161443.80
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	161443.80	161443.80

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

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

FOR LINE NUMBER: PAGE 6 / 60

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Campaign Fund

A.

Full Name (Last, First, Middle Initial)

Griffith Richard

Mailing Address 3417 Milam

City

Houston

State

TX

Zip Code

77002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Investor

Occupation

Richard S Griffith

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 3 / 2 0 0 9

Transaction ID: INC.A.21104

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Jackson W.R.

Mailing Address 55 Burbank Lane

City

Yarmouth

State

ME

Zip Code

4096

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 4 / 2 0 0 9

Transaction ID: INC.A.17007

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Jackson W.R.

Mailing Address 55 Burbank Lane

City

Yarmouth

State

ME

Zip Code

4096

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 8 / 2 0 0 9

Transaction ID: INC.A.17008

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

150.00

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 / 60

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Campaign Fund

A.

Full Name (Last, First, Middle Initial)

Pistorino Maria

Mailing Address 6535 Sw 123 Street

City

Pinecrest

State

FL

Zip Code

33156

FEC ID number of contributing
federal political committee.

C

Name of Employer
Volunteer

Occupation

Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 1 / 2 0 0 9

Transaction ID: INC.A.20920

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Meadows Cecil

Mailing Address P.O.Box 157

City

Aiea

State

HI

Zip Code

96701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aviation Electronics Tech-
nician

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 9 / 2 0 0 9

Transaction ID: INC.A.20402

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Griffith Richard

Mailing Address 3417 Milam

City

Houston

State

TX

Zip Code

77002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Investor

Occupation

Richard S Griffith

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 9 / 2 0 0 9

Transaction ID: INC.A.21105

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 8 / 60

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Campaign Fund

A.

Full Name (Last, First, Middle Initial)

Angle Jean

Mailing Address 70 Stratford Road

City

Eastborough

State

KS

Zip Code

67207

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ofc Mgr

Occupation

Frontier Oil Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 0 / 2 0 0 9

Transaction ID: INC.A.17633

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Griffith Richard

Mailing Address 3417 Milam

City

Houston

State

TX

Zip Code

77002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Investor

Occupation

Richard S Griffith

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 9

Transaction ID: INC.A.21106

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Griffith Richard

Mailing Address 3417 Milam

City

Houston

State

TX

Zip Code

77002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Investor

Occupation

Richard S Griffith

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 9

Transaction ID: INC.A.21107

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 9 / 60

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Campaign Fund

A.

Full Name (Last, First, Middle Initial)

Meadows Cecil

Mailing Address P.O.Box 157

City

Aiea

State

HI

Zip Code

96701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aviation Electronics Tech-
nician

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 1 / 2 0 0 9

Transaction ID: INC.A.20403

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Pistorino Maria H

Mailing Address 6535 Sw 123 Street

City

Pinecrest

State

FL

Zip Code

33156

FEC ID number of contributing
federal political committee.

C

Name of Employer
Volunteer

Occupation
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 1 / 2 0 0 9

Transaction ID: INC.A.18585

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Griffith Richard

Mailing Address 3417 Milam

City

Houston

State

TX

Zip Code

77002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Investor

Occupation
Richard S Griffith

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 1 / 2 0 0 9

Transaction ID: INC.A.21108

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 10 / 60

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Campaign Fund

A.

Full Name (Last, First, Middle Initial)
Griffith Richard

Mailing Address 3417 Milam

City State Zip Code
Houston TX 77002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Investor

Occupation
Richard S Griffith

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 0 1 / 2 0 0 9

Transaction ID: INC.A.21109

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)
Jackson W.R.

Mailing Address 55 Burbank Lane

City State Zip Code
Yarmouth ME 4096

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 0 1 / 2 0 0 9

Transaction ID: INC.A.17009

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)
McGrew Harlen

Mailing Address 19133 Golden Meadow Way

City State Zip Code
Noblesville IN 46060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Teacher

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 0 4 / 2 0 0 9

Transaction ID: INC.A.18938

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

375.00

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 / 60

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Campaign Fund

A.

Full Name (Last, First, Middle Initial)

Pistorino Maria H

Mailing Address 6535 Sw 123 Street

City

Pinecrest

State

FL

Zip Code

33156

FEC ID number of contributing
federal political committee.

C

Name of Employer
Volunteer

Occupation

Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 0 7 / 2 0 0 9

Transaction ID: INC.A.18586

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Griffith Richard

Mailing Address 3417 Milam

City

Houston

State

TX

Zip Code

77002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Investor

Occupation

Richard S Griffith

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 0 9 / 2 0 0 9

Transaction ID: INC.A.21111

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Griffith Richard

Mailing Address 3417 Milam

City

Houston

State

TX

Zip Code

77002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Investor

Occupation

Richard S Griffith

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 0 9 / 2 0 0 9

Transaction ID: INC.A.21110

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 12 / 60

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Campaign Fund

A.

Full Name (Last, First, Middle Initial)

Angle Jean

Mailing Address 70 Stratford Road

City

Eastborough

State

KS

Zip Code

67207

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ofc Mgr

Occupation

Frontier Oil Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 2 / 2 0 0 9

Transaction ID: INC.A.17634

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Griffith Richard

Mailing Address 3417 Milam

City

Houston

State

TX

Zip Code

77002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Investor

Occupation

Richard S Griffith

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 2 / 2 0 0 9

Transaction ID: INC.A.21112

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

McGrew Harlen

Mailing Address 19133 Golden Meadow Way

City

Noblesville

State

IN

Zip Code

46060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Teacher

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 3 / 2 0 0 9

Transaction ID: INC.A.18939

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 13 / 60

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Campaign Fund

A.

Full Name (Last, First, Middle Initial)

Pistorino Maria H

Mailing Address 6535 Sw 123 Street

City

Pinecrest

State

FL

Zip Code

33156

FEC ID number of contributing
federal political committee.

C

Name of Employer
Volunteer

Occupation

Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 3 / 2 0 0 9

Transaction ID: INC.A.18587

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Pistorino Maria

Mailing Address 6535 Sw 123 Street

City

Pinecrest

State

FL

Zip Code

33156

FEC ID number of contributing
federal political committee.

C

Name of Employer
Volunteer

Occupation

Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 3 / 2 0 0 9

Transaction ID: INC.A.20921

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

Jackson W.R.

Mailing Address 55 Burbank Lane

City

Yarmouth

State

ME

Zip Code

4096

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 3 / 2 0 0 9

Transaction ID: INC.A.17010

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

160.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 14 / 60

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Campaign Fund

A.

Full Name (Last, First, Middle Initial)

Meadows Cecil

Mailing Address P.O.Box 157

City

Aiea

State

HI

Zip Code

96701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aviation Electronics Tech-
nician

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 9 / 2 0 0 9

Transaction ID: INC.A.20404

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Rousselot Doris

Mailing Address 126 Edgemont Road

City

Sonora

State

TX

Zip Code

76950

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 9 / 2 0 0 9

Transaction ID: INC.A.17518

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Pistorino Maria

Mailing Address 6535 Sw 123 Street

City

Pinecrest

State

FL

Zip Code

33156

FEC ID number of contributing
federal political committee.

C

Name of Employer
Volunteer

Occupation
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 9 / 2 0 0 9

Transaction ID: INC.A.20922

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 15 / 60

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Campaign Fund

A.

Full Name (Last, First, Middle Initial)

Ritchie Dr C S

Mailing Address 3 Lagoon Drive

City

Redwood City

State

CA

Zip Code

94065

FEC ID number of contributing
federal political committee.

C

Name of Employer
Executive

Occupation

Guckenheimer Ent. Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 1 / 2 0 0 9

Transaction ID: INC.A.21360

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Richardson Brian

Mailing Address 1718 Port Barmouth Pl

City

Newport Beach

State

CA

Zip Code

92660-5313

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 4 / 2 0 0 9

Transaction ID: INC.A.20761

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Drake Joshua

Mailing Address 235 E Palmer St

City

Franklin

State

NC

Zip Code

28734

FEC ID number of contributing
federal political committee.

C

Name of Employer
Administration

Occupation

Drake Software

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 4 / 2 0 0 9

Transaction ID: INC.A.18367

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

300.00

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 16 / 60

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Campaign Fund

A.

Full Name (Last, First, Middle Initial)

Meadows Cecil

Mailing Address P.O.Box 157

City

Aiea

State

HI

Zip Code

96701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aviation Electronics Tech-
nician

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 5 / 2 0 0 9

Transaction ID: INC.A.20405

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

McGrew Harlen

Mailing Address 19133 Golden Meadow Way

City

Noblesville

State

IN

Zip Code

46060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Teacher

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 5 / 2 0 0 9

Transaction ID: INC.A.18940

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Griffith Richard

Mailing Address 3417 Milam

City

Houston

State

TX

Zip Code

77002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Investor

Occupation
Richard S Griffith

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 6 / 2 0 0 9

Transaction ID: INC.A.21113

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 17 / 60

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Campaign Fund

A.

Full Name (Last, First, Middle Initial)
Griffith Richard

Mailing Address 3417 Milam

City State Zip Code
Houston TX 77002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Investor

Occupation
Richard S Griffith

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 3 / 2 0 0 9

Transaction ID: INC.A.21114

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
Rousselot Doris

Mailing Address 126 Edgemont Road

City State Zip Code
Sonora TX 76950

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 5 / 2 0 0 9

Transaction ID: INC.A.17519

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
Jackson W.R.

Mailing Address 55 Burbank Lane

City State Zip Code
Yarmouth ME 4096

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 7 / 2 0 0 9

Transaction ID: INC.A.17011

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

225.00

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 18 / 60

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Campaign Fund

A.

Full Name (Last, First, Middle Initial)

Meadows Cecil

Mailing Address P.O.Box 157

City

Aiea

State

HI

Zip Code

96701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aviation Electronics Tech-
nician

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 8 / 2 0 0 9

Transaction ID: INC.A.20406

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Griffith Richard

Mailing Address 3417 Milam

City

Houston

State

TX

Zip Code

77002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Investor

Occupation
Richard S Griffith

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: INC.A.21115

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Griffith Richard

Mailing Address 3417 Milam

City

Houston

State

TX

Zip Code

77002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Investor

Occupation
Richard S Griffith

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 6 / 2 0 0 9

Transaction ID: INC.A.21116

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 19 / 60

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Campaign Fund

A.

Full Name (Last, First, Middle Initial)

Gray John D

Mailing Address 324 Live Oak Lane

City

Lake Jackson

State

TX

Zip Code

77566

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.S. Army

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 9 / 2 0 0 9

Transaction ID: INC.A.19649

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Richardson Brian

Mailing Address 1718 Port Barmouth Pl

City

Newport Beach

State

CA

Zip Code

92660-5313

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 1 / 2 0 0 9

Transaction ID: INC.A.20762

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Drake Joshua

Mailing Address 235 E Palmer St

City

Franklin

State

NC

Zip Code

28734

FEC ID number of contributing
federal political committee.

C

Name of Employer
Administration

Occupation
Drake Software

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 1 / 2 0 0 9

Transaction ID: INC.A.18368

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

300.00

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 20 / 60

(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)

National Campaign Fund

A.

Full Name (Last, First, Middle Initial)

Drake Joshua

Mailing Address 235 E Palmer St

City

Franklin

State

NC

Zip Code

28734

FEC ID number of contributing
federal political committee.

C

Name of Employer
Administration

Occupation

Drake Software

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 8 / 2 0 0 9

Transaction ID: INC.A.18369

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Pistorino Maria

Mailing Address 6535 Sw 123 Street

City

Pinecrest

State

FL

Zip Code

33156

FEC ID number of contributing
federal political committee.

C

Name of Employer
Volunteer

Occupation

Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 8 / 2 0 0 9

Transaction ID: INC.A.20923

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Jackson W.R.

Mailing Address 55 Burbank Lane

City

Yarmouth

State

ME

Zip Code

4096

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 9 / 2 0 0 9

Transaction ID: INC.A.17012

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 21 / 60

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Campaign Fund

A.

Full Name (Last, First, Middle Initial)

Jackson W.R.

Mailing Address 55 Burbank Lane

City

Yarmouth

State

ME

Zip Code

4096

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 0 9

Transaction ID: INC.A.17013

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Drake Joshua

Mailing Address 235 E Palmer St

City

Franklin

State

NC

Zip Code

28734

FEC ID number of contributing
federal political committee.

C

Name of Employer
Administration

Occupation
Drake Software

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 1 / 2 0 0 9

Transaction ID: INC.A.18370

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Richardson Brian

Mailing Address 1718 Port Barmouth Pl

City

Newport Beach

State

CA

Zip Code

92660-5313

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 4 / 2 0 0 9

Transaction ID: INC.A.20763

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

175.00

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 22 / 60

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Campaign Fund

A.

Full Name (Last, First, Middle Initial)

Meadows Cecil

Mailing Address P.O.Box 157

City

Aiea

State

HI

Zip Code

96701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aviation Electronics Tech-
nician

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 4 / 2 0 0 9

Transaction ID: INC.A.20407

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Rust Karen

Mailing Address 1943 The Low Rd

City

San Marcos

State

TX

Zip Code

78666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Self Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 4 / 2 0 0 9

Transaction ID: INC.A.19699

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Jackson W.R.

Mailing Address 55 Burbank Lane

City

Yarmouth

State

ME

Zip Code

4096

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 4 / 2 0 0 9

Transaction ID: INC.A.17014

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

125.00

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 23 / 60

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Campaign Fund

A.

Full Name (Last, First, Middle Initial)

Richardson Brian

Mailing Address 1718 Port Barmouth Pl

City

Newport Beach

State

CA

Zip Code

92660-5313

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 6 / 2 0 0 9

Transaction ID: INC.A.20764

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Drake Joshua

Mailing Address 235 E Palmer St

City

Franklin

State

NC

Zip Code

28734

FEC ID number of contributing
federal political committee.

C

Name of Employer
Administration

Occupation
Drake Software

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 6 / 2 0 0 9

Transaction ID: INC.A.18371

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Richardson Brian

Mailing Address 1718 Port Barmouth Pl

City

Newport Beach

State

CA

Zip Code

92660-5313

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 7 / 2 0 0 9

Transaction ID: INC.A.20765

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 60

(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)

National Campaign Fund

A.

Full Name (Last, First, Middle Initial)

Mcgrew Harlen

Mailing Address 19133 Golden Meadow Way

City

Noblesville

State

IN

Zip Code

46060

FEC ID number of contributing
federal political committee.

C

Name of Employer
TeacherOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 0 9

Transaction ID: INC.A.18941

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Winder Warren

Mailing Address 420 Spectrum Circle

City

Oxnard

State

CA

Zip Code

93030

FEC ID number of contributing
federal political committee.

C

Name of Employer
MachinistOccupation
Self

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 0 9

Transaction ID: INC.A.20239

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Drake Joshua

Mailing Address 235 E Palmer St

City

Franklin

State

NC

Zip Code

28734

FEC ID number of contributing
federal political committee.

C

Name of Employer
AdministrationOccupation
Drake Software

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 0 9

Transaction ID: INC.A.18372

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

375.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 25 / 60

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Campaign Fund

A.

Full Name (Last, First, Middle Initial)

Drake Joshua

Mailing Address 235 E Palmer St

City

Franklin

State

NC

Zip Code

28734

FEC ID number of contributing
federal political committee.

C

Name of Employer
Administration

Occupation

Drake Software

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 9 / 2 0 0 9

Transaction ID: INC.A.18373

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Jackson W.R.

Mailing Address 55 Burbank Lane

City

Yarmouth

State

ME

Zip Code

4096

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 9 / 2 0 0 9

Transaction ID: INC.A.17015

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Jackson W.R.

Mailing Address 55 Burbank Lane

City

Yarmouth

State

ME

Zip Code

4096

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 0 / 2 0 0 9

Transaction ID: INC.A.17016

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 26 / 60

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Campaign Fund

A.

Full Name (Last, First, Middle Initial)

Drake Joshua

Mailing Address 235 E Palmer St

City

Franklin

State

NC

Zip Code

28734

FEC ID number of contributing
federal political committee.

C

Name of Employer
Administration

Occupation

Drake Enterprises

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 9

Transaction ID: INC.A.20870

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Griffith Richard

Mailing Address 3417 Milam

City

Houston

State

TX

Zip Code

77002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Investor

Occupation

Richard S Griffith

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 2 / 2 0 0 9

Transaction ID: INC.A.21117

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Richardson Brian

Mailing Address 1718 Port Barmouth Pl

City

Newport Beach

State

CA

Zip Code

92660-5313

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 1 / 2 0 0 9

Transaction ID: INC.A.20766

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 27 / 60

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Campaign Fund

A.

Full Name (Last, First, Middle Initial)
Griffith Richard

Mailing Address 3417 Milam

City State Zip Code
Houston TX 77002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Investor

Occupation
Richard S Griffith

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 1 / 2 0 0 9

Transaction ID: INC.A.21118

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
Drake Joshua

Mailing Address 235 E Palmer St

City State Zip Code
Franklin NC 28734

FEC ID number of contributing
federal political committee.

C

Name of Employer
Administration

Occupation
Drake Enterprises

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 2 / 2 0 0 9

Transaction ID: INC.A.20871

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
Pistorino Maria

Mailing Address 6535 Sw 123 Street

City State Zip Code
Pinecrest FL 33156

FEC ID number of contributing
federal political committee.

C

Name of Employer
Volunteer

Occupation
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 2 / 2 0 0 9

Transaction ID: INC.A.20924

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

300.00

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 28 / 60

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Campaign Fund

A.

Full Name (Last, First, Middle Initial)

Drake Joshua

Mailing Address 235 E Palmer St

City

Franklin

State

NC

Zip Code

28734

FEC ID number of contributing
federal political committee.

C

Name of Employer
Administration

Occupation

Drake Enterprises

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: INC.A.20872

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Drake Joshua

Mailing Address 235 E Palmer St

City

Franklin

State

NC

Zip Code

28734

FEC ID number of contributing
federal political committee.

C

Name of Employer
Administration

Occupation

Drake Enterprises

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 6 / 2 0 0 9

Transaction ID: INC.A.20873

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Rust Karen

Mailing Address 1943 The Low Rd

City

San Marcos

State

TX

Zip Code

78666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Self Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 6 / 2 0 0 9

Transaction ID: INC.A.19700

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

160.00

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 29 / 60

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Campaign Fund

A.

Full Name (Last, First, Middle Initial)

Jackson W.R.

Mailing Address 55 Burbank Lane

City

Yarmouth

State

ME

Zip Code

4096

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 6 / 2 0 0 9

Transaction ID: INC.A.17017

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Richardson Brian

Mailing Address 1718 Port Barmouth Pl

City

Newport Beach

State

CA

Zip Code

92660-5313

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 8 / 2 0 0 9

Transaction ID: INC.A.20767

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Pistorino Maria H

Mailing Address 6535 Sw 123 Street

City

Pinecrest

State

FL

Zip Code

33156

FEC ID number of contributing
federal political committee.

C

Name of Employer
Volunteer

Occupation
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 8 / 2 0 0 9

Transaction ID: INC.A.18588

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 30 / 60

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Campaign Fund

A.

Full Name (Last, First, Middle Initial)

Rust Karen

Mailing Address 1943 The Low Rd

City

San Marcos

State

TX

Zip Code

78666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Self Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 9 / 2 0 0 9

Transaction ID: INC.A.19701

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Drake Joshua

Mailing Address 235 E Palmer St

City

Franklin

State

NC

Zip Code

28734

FEC ID number of contributing
federal political committee.

C

Name of Employer
Administration

Occupation

Drake Enterprises

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 2 / 2 0 0 9

Transaction ID: INC.A.20874

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Griffith Richard

Mailing Address 3417 Milam

City

Houston

State

TX

Zip Code

77002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Investor

Occupation

Richard S Griffith

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 2 / 2 0 0 9

Transaction ID: INC.A.21120

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

150.00

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 31 / 60

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Campaign Fund

A.

Full Name (Last, First, Middle Initial)
Griffith Richard

Mailing Address 3417 Milam

City State Zip Code
Houston TX 77002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Investor

Occupation
Richard S Griffith

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 2 / 2 0 0 9

Transaction ID: INC.A.21119

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
Richardson Brian

Mailing Address 1718 Port Barmouth Pl

City State Zip Code
Newport Beach CA 92660-5313

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 3 / 2 0 0 9

Transaction ID: INC.A.20768

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)
Drake Joshua

Mailing Address 235 E Palmer St

City State Zip Code
Franklin NC 28734

FEC ID number of contributing
federal political committee.

C

Name of Employer
Administration

Occupation
Drake Enterprises

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 3 / 2 0 0 9

Transaction ID: INC.A.20875

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

150.00

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 32 / 60

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Campaign Fund

A.

Full Name (Last, First, Middle Initial)
Griffith Richard

Mailing Address 3417 Milam

City State Zip Code
Houston TX 77002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Investor

Occupation
Richard S Griffith

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 3 / 2 0 0 9

Transaction ID: INC.A.21121

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
Drake Joshua

Mailing Address 235 E Palmer St

City State Zip Code
Franklin NC 28734

FEC ID number of contributing
federal political committee.

C

Name of Employer
Administration

Occupation
Drake Software

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 4 / 2 0 0 9

Transaction ID: INC.A.18374

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)
Rust Karen

Mailing Address 1943 The Low Rd

City State Zip Code
San Marcos TX 78666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Self Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 4 / 2 0 0 9

Transaction ID: INC.A.19702

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 33 / 60

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Campaign Fund

A.

Full Name (Last, First, Middle Initial)

Jackson W.R.

Mailing Address 55 Burbank Lane

City

Yarmouth

State

ME

Zip Code

4096

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 4 / 2 0 0 9

Transaction ID: INC.A.17018

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Jackson W.R.

Mailing Address 55 Burbank Lane

City

Yarmouth

State

ME

Zip Code

4096

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 6 / 2 0 0 9

Transaction ID: INC.A.17019

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

50.00

TOTAL This Period (last page this line number only)

7470.00

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 34 / 60

<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)
National Campaign Fund

A. Full Name (Last, First, Middle Initial) Excellentia Inc.	Transaction ID: EXP.B.15416 Date of Disbursement								
Mailing Address 4224 67th Ave CT W	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 5 / 2 0 0 9</div> </div>								
<table border="1"> <tr> <td>City University Place</td> <td>State WA</td> <td>Zip Code 98466</td> </tr> <tr> <td colspan="2">Purpose of Disbursement General committee management fees</td> <td rowspan="2"> <div>001</div> Category/ Type </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City University Place	State WA	Zip Code 98466	Purpose of Disbursement General committee management fees		<div>001</div> Category/ Type	Candidate Name		Amount of Each Disbursement this Period <div>5000.00</div>
City University Place	State WA	Zip Code 98466							
Purpose of Disbursement General committee management fees		<div>001</div> Category/ Type							
Candidate Name									
<table border="1"> <tr> <td>Office Sought:</td> <td>Disbursement For:</td> </tr> <tr> <td> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </td> <td> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </td> </tr> <tr> <td>State: District:</td> <td></td> </tr> </table>	Office Sought:	Disbursement For:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:				
Office Sought:	Disbursement For:								
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼								
State: District:									
B. Full Name (Last, First, Middle Initial) Landslide Communications	Transaction ID: EXP.B.15415 Date of Disbursement								
Mailing Address 30011 Ivy Glenn Dr., Ste 223	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 5 / 2 0 0 9</div> </div>								
<table border="1"> <tr> <td>City Laguna Niguel</td> <td>State CA</td> <td>Zip Code 92677</td> </tr> <tr> <td colspan="2">Purpose of Disbursement General committee management fees</td> <td rowspan="2"> <div>001</div> Category/ Type </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Laguna Niguel	State CA	Zip Code 92677	Purpose of Disbursement General committee management fees		<div>001</div> Category/ Type	Candidate Name		Amount of Each Disbursement this Period <div>3000.00</div>
City Laguna Niguel	State CA	Zip Code 92677							
Purpose of Disbursement General committee management fees		<div>001</div> Category/ Type							
Candidate Name									
<table border="1"> <tr> <td>Office Sought:</td> <td>Disbursement For:</td> </tr> <tr> <td> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </td> <td> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </td> </tr> <tr> <td>State: District:</td> <td></td> </tr> </table>	Office Sought:	Disbursement For:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:				
Office Sought:	Disbursement For:								
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼								
State: District:									
C. Full Name (Last, First, Middle Initial) C4Strategies	Transaction ID: EXP.B.15423 Date of Disbursement								
Mailing Address 8230 Catbird Circle #302	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 5 / 2 0 0 9</div> </div>								
<table border="1"> <tr> <td>City Lorton</td> <td>State VA</td> <td>Zip Code 22079</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Website services</td> <td rowspan="2"> <div>001</div> Category/ Type </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Lorton	State VA	Zip Code 22079	Purpose of Disbursement Website services		<div>001</div> Category/ Type	Candidate Name		Amount of Each Disbursement this Period <div>6851.83</div>
City Lorton	State VA	Zip Code 22079							
Purpose of Disbursement Website services		<div>001</div> Category/ Type							
Candidate Name									
<table border="1"> <tr> <td>Office Sought:</td> <td>Disbursement For:</td> </tr> <tr> <td> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </td> <td> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </td> </tr> <tr> <td>State: District:</td> <td></td> </tr> </table>	Office Sought:	Disbursement For:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:				
Office Sought:	Disbursement For:								
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼								
State: District:									

SUBTOTAL of Disbursements This Page (optional)

14851.83

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 35 / 60

<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)
National Campaign Fund

A. Full Name (Last, First, Middle Initial) Endeavor Media Group, LLC	Transaction ID: EXP.B.15419 Date of Disbursement																				
Mailing Address 2620 Sunday House Dr.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	9												
City Pearlland State TX Zip Code 77584	Amount of Each Disbursement this Period																				
Purpose of Disbursement E-mail Lists Candidate Name	<table border="1"> <tr> <td colspan="10">2010.00</td> </tr> </table>	2010.00																			
2010.00																					
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) Barrett Garcia	Transaction ID: EXP.B.15418 Date of Disbursement																				
Mailing Address 32302 Camino Capistrano #214	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	9												
City San Juan Capistran State CA Zip Code 92675	Amount of Each Disbursement this Period																				
Purpose of Disbursement Accounting services Candidate Name	<table border="1"> <tr> <td colspan="10">1017.50</td> </tr> </table>	1017.50																			
1017.50																					
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) SunTrust Merchant Services	Transaction ID: EXP.B.15421 Date of Disbursement																				
Mailing Address 1 Western Maryland Parkway	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	9												
City Hagerstown State MD Zip Code 21740	Amount of Each Disbursement this Period																				
Purpose of Disbursement merchant fees Candidate Name	<table border="1"> <tr> <td colspan="10">173.76</td> </tr> </table>	173.76																			
173.76																					
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)

3201.26

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 36 / 60

<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)
National Campaign Fund

A.	<p>Full Name (Last, First, Middle Initial) Visteva</p> <p>Mailing Address 12881 Knott Street, Ste 105</p> <p>City Garden Grove State CA Zip Code 92841</p> <p>Purpose of Disbursement Website services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: EXP.B.15424</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="595.00"/></p>
B.	<p>Full Name (Last, First, Middle Initial) Eagle Publishing</p> <p>Mailing Address One Massachusetts Ave., 6th Floor</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement E-mail broadcasts</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: EXP.B.15427</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="6554.00"/></p>
C.	<p>Full Name (Last, First, Middle Initial) Regus</p> <p>Mailing Address 1101 Pennsylvania Ave 5th Floor</p> <p>City Washington State DC Zip Code 20004</p> <p>Purpose of Disbursement Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: EXP.B.15428</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="382.83"/></p>

SUBTOTAL of Disbursements This Page (optional)

7531.83

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 37 / 60

<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)
National Campaign Fund

A. Full Name (Last, First, Middle Initial) Excellentia Inc.	Transaction ID: EXP.B.15438 Date of Disbursement																				
Mailing Address 4224 67th Ave CT W	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	3		2	0	0	9												
<table border="1"> <tr> <td>City University Place</td> <td>State WA</td> <td>Zip Code 98466</td> </tr> <tr> <td colspan="2">Purpose of Disbursement General committee management fees</td> <td rowspan="2"> <input type="text" value="001"/> Category/ Type </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City University Place	State WA	Zip Code 98466	Purpose of Disbursement General committee management fees		<input type="text" value="001"/> Category/ Type	Candidate Name		Amount of Each Disbursement this Period <table border="1"> <tr> <td>5000.00</td> </tr> </table>	5000.00											
City University Place	State WA	Zip Code 98466																			
Purpose of Disbursement General committee management fees		<input type="text" value="001"/> Category/ Type																			
Candidate Name																					
5000.00																					
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) Landslide Communications	Transaction ID: EXP.B.15439 Date of Disbursement																				
Mailing Address 30011 Ivy Glenn Dr., Ste 223	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	6		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	6		2	0	0	9												
<table border="1"> <tr> <td>City Laguna Niguel</td> <td>State CA</td> <td>Zip Code 92677</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Management services</td> <td rowspan="2"> <input type="text" value="001"/> Category/ Type </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Laguna Niguel	State CA	Zip Code 92677	Purpose of Disbursement Management services		<input type="text" value="001"/> Category/ Type	Candidate Name		Amount of Each Disbursement this Period <table border="1"> <tr> <td>5000.00</td> </tr> </table>	5000.00											
City Laguna Niguel	State CA	Zip Code 92677																			
Purpose of Disbursement Management services		<input type="text" value="001"/> Category/ Type																			
Candidate Name																					
5000.00																					
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) Eagle Publishing	Transaction ID: EXP.B.15443 Date of Disbursement																				
Mailing Address One Massachusetts Ave., 6th Floor	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	7		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	7		2	0	0	9												
<table border="1"> <tr> <td>City Washington</td> <td>State DC</td> <td>Zip Code 20001</td> </tr> <tr> <td colspan="2">Purpose of Disbursement E-mail broadcast</td> <td rowspan="2"> <input type="text" value="003"/> Category/ Type </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Washington	State DC	Zip Code 20001	Purpose of Disbursement E-mail broadcast		<input type="text" value="003"/> Category/ Type	Candidate Name		Amount of Each Disbursement this Period <table border="1"> <tr> <td>796.00</td> </tr> </table>	796.00											
City Washington	State DC	Zip Code 20001																			
Purpose of Disbursement E-mail broadcast		<input type="text" value="003"/> Category/ Type																			
Candidate Name																					
796.00																					
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)

10796.00

TOTAL This Period (last page this line number only)

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)
National Campaign Fund

FEC Schedule B (Form 3X) (Revised 02/2003)

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 39 / 60

<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)
National Campaign Fund

A.

Full Name (Last, First, Middle Initial)
C4Strategies

Mailing Address 8230 Catbird Circle #302

City Lorton State VA Zip Code 22079

Purpose of Disbursement
Website services

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: EXP.B.15448

Date of Disbursement

02 / 12 / 2009

Amount of Each Disbursement this Period

17481.67

B.

Full Name (Last, First, Middle Initial)
Endeavor Media Group, LLC

Mailing Address 2620 Sunday House Dr.

City Pearland State TX Zip Code 77584

Purpose of Disbursement
E-mail lists

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: EXP.B.15449

Date of Disbursement

02 / 12 / 2009

Amount of Each Disbursement this Period

6636.67

C.

Full Name (Last, First, Middle Initial)
SunTrust Merchant Services

Mailing Address 1 Western Maryland Parkway

City Hagerstown State MD Zip Code 21740

Purpose of Disbursement
Merchant fees

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: EXP.B.15445

Date of Disbursement

02 / 12 / 2009

Amount of Each Disbursement this Period

691.90

SUBTOTAL of Disbursements This Page (optional)

24810.24

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 40 / 60

<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)
National Campaign Fund

A. Full Name (Last, First, Middle Initial) NetFile Mailing Address 2707 Aurora Road	Transaction ID: EXP.B.15450 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	3		2	0	0	9	
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		1	3		2	0	0	9													
City Mariposa State CA Zip Code 95338 Purpose of Disbursement Website Services 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) ▼	Amount of Each Disbursement this Period <table border="1"> <tr> <td>250.00</td> </tr> </table> 001 Category/ Type	250.00																				
250.00																						
B. Full Name (Last, First, Middle Initial) Excellentia Inc. Mailing Address 4224 67th Ave CT W City University Place State WA Zip Code 98466 Purpose of Disbursement General committee manangement fees 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: EXP.B.15451 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>5000.00</td> </tr> </table> 001 Category/ Type	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	4		2	0	0	9	5000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	4		2	0	0	9													
5000.00																						
C. Full Name (Last, First, Middle Initial) Landslide Communications Mailing Address 30011 Ivy Glenn Dr., Ste 223 City Laguna Niguel State CA Zip Code 92677 Purpose of Disbursement General Committee management fees 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: EXP.B.15453 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>5000.00</td> </tr> </table> 001 Category/ Type	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	5		2	0	0	9	5000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	5		2	0	0	9													
5000.00																						

SUBTOTAL of Disbursements This Page (optional)

10250.00

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)
National Campaign Fund

A. Full Name (Last, First, Middle Initial) Las Vegas Review-Journal	Transaction ID: EXP.B.15454 Date of Disbursement
Mailing Address 1111 W. Bonanza Rd.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 5 / 2 0 0 9</div> </div>
City Las Vegas State NV Zip Code 89125 Purpose of Disbursement General advertising Candidate Name	Amount of Each Disbursement this Period <div>100.00</div>
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) Endeavor Media Group, LLC	Transaction ID: EXP.B.15457 Date of Disbursement
Mailing Address 2620 Sunday House Dr.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 0 9</div> </div>
City Pearland State TX Zip Code 77584 Purpose of Disbursement e-mail list rental Candidate Name	Amount of Each Disbursement this Period <div>345.00</div>
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) Barrett Garcia	Transaction ID: EXP.B.15470 Date of Disbursement
Mailing Address 32302 Camino Capistrano #214	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 9 / 2 0 0 9</div> </div>
City San Juan Capistran State CA Zip Code 92675 Purpose of Disbursement Accounting services Candidate Name	Amount of Each Disbursement this Period <div>1089.12</div>
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)

1534.12

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)
National Campaign Fund

A.

Full Name (Last, First, Middle Initial)
SunTrust Merchant Services

Mailing Address 1 Western Maryland Parkway

City Hagerstown State MD Zip Code 21740

Purpose of Disbursement

Merchant fees

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: EXP.B.16185

Date of Disbursement

03 / 10 / 2009

Amount of Each Disbursement this Period

2021.56

B.

Full Name (Last, First, Middle Initial)
Regus

Mailing Address 1101 Pennsylvania Ave 5th Floor

City Washington State DC Zip Code 20004

Purpose of Disbursement

Rent

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: EXP.B.16184

Date of Disbursement

03 / 11 / 2009

Amount of Each Disbursement this Period

399.79

C.

Full Name (Last, First, Middle Initial)
C4Strategies

Mailing Address 8230 Catbird Circle #302

City Lorton State VA Zip Code 22079

Purpose of Disbursement

Website Services

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: EXP.B.16187

Date of Disbursement

03 / 12 / 2009

Amount of Each Disbursement this Period

8136.07

SUBTOTAL of Disbursements This Page (optional)

10557.42

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)
National Campaign Fund

A. Full Name (Last, First, Middle Initial) Lee Troxler Companies	Transaction ID: EXP.B.16190 Date of Disbursement																				
Mailing Address 825 Las Palmas Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	8		2	0	0	9												
City Santa Barbara State CA Zip Code 93110	Amount of Each Disbursement this Period																				
Purpose of Disbursement Meeting Expense Candidate Name	<table border="1"> <tr> <td colspan="10">599.55</td> </tr> </table>	599.55																			
599.55																					
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) SunTrust Merchant Services	Transaction ID: EXP.B.16188 Date of Disbursement																				
Mailing Address 1 Western Maryland Parkway	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	8		2	0	0	9												
City Hagerstown State MD Zip Code 21740	Amount of Each Disbursement this Period																				
Purpose of Disbursement Merchant fees Candidate Name	<table border="1"> <tr> <td colspan="10">40.00</td> </tr> </table>	40.00																			
40.00																					
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) Landslide Communications	Transaction ID: EXP.B.16191 Date of Disbursement																				
Mailing Address 30011 Ivy Glenn Dr., Ste 223	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	9		2	0	0	9												
City Laguna Niguel State CA Zip Code 92677	Amount of Each Disbursement this Period																				
Purpose of Disbursement General management services Candidate Name	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
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)

5639.55

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)
National Campaign Fund

A. Full Name (Last, First, Middle Initial) Eagle Publishing	Transaction ID: EXP.B.16235 Date of Disbursement																				
Mailing Address One Massachusetts Ave., 6th Floor	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	3		2	0	0	9												
City Washington State DC Zip Code 20001	Amount of Each Disbursement this Period																				
Purpose of Disbursement E-mail broadcast Candidate Name	<table border="1"> <tr> <td colspan="10">2296.00</td> </tr> </table>	2296.00																			
2296.00																					
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) Endeavor Media Group, LLC	Transaction ID: EXP.B.16232 Date of Disbursement																				
Mailing Address 2620 Sunday House Dr.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	3		2	0	0	9												
City Pearland State TX Zip Code 77584	Amount of Each Disbursement this Period																				
Purpose of Disbursement E-mail List Candidate Name	<table border="1"> <tr> <td colspan="10">1106.67</td> </tr> </table>	1106.67																			
1106.67																					
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) Barrett Garcia	Transaction ID: EXP.B.16236 Date of Disbursement																				
Mailing Address 32302 Camino Capistrano #214	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	3		2	0	0	9												
City San Juan Capistran State CA Zip Code 92675	Amount of Each Disbursement this Period																				
Purpose of Disbursement Accounting services Candidate Name	<table border="1"> <tr> <td colspan="10">1253.91</td> </tr> </table>	1253.91																			
1253.91																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

4656.58

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)
National Campaign Fund

A. Full Name (Last, First, Middle Initial) SunTrust Merchant Services	Transaction ID: EXP.B.16234 Date of Disbursement																				
Mailing Address 1 Western Maryland Parkway	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	3		2	0	0	9												
City Hagerstown State MD Zip Code 21740	Amount of Each Disbursement this Period																				
Purpose of Disbursement Merchant fees Candidate Name	<table border="1"> <tr> <td colspan="10">99.57</td> </tr> </table>	99.57																			
99.57																					
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) SunTrust Merchant Services	Transaction ID: EXP.B.16238 Date of Disbursement																				
Mailing Address 1 Western Maryland Parkway	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	6		2	0	0	9												
City Hagerstown State MD Zip Code 21740	Amount of Each Disbursement this Period																				
Purpose of Disbursement Merchant fees Candidate Name	<table border="1"> <tr> <td colspan="10">20.00</td> </tr> </table>	20.00																			
20.00																					
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) C4Strategies	Transaction ID: EXP.B.16240 Date of Disbursement																				
Mailing Address 8230 Catbird Circle #302	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	7		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	7		2	0	0	9												
City Lorton State VA Zip Code 22079	Amount of Each Disbursement this Period																				
Purpose of Disbursement List Rental Candidate Name	<table border="1"> <tr> <td colspan="10">526.67</td> </tr> </table>	526.67																			
526.67																					
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)

646.24

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)
National Campaign Fund

A. Full Name (Last, First, Middle Initial) Excellentia Inc.	Transaction ID: EXP.B.16239 Date of Disbursement																				
Mailing Address 4224 67th Ave CT W	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	7		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	7		2	0	0	9												
City University Place State WA Zip Code 98466	Amount of Each Disbursement this Period																				
Purpose of Disbursement Committee management fees Candidate Name	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
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) C4Strategies	Transaction ID: EXP.B.16243 Date of Disbursement																				
Mailing Address 8230 Catbird Circle #302	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	5		2	0	0	9												
City Lorton State VA Zip Code 22079	Amount of Each Disbursement this Period																				
Purpose of Disbursement website expenses Candidate Name	<table border="1"> <tr> <td colspan="10">4647.00</td> </tr> </table>	4647.00																			
4647.00																					
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) Eagle Publishing	Transaction ID: EXP.B.16244 Date of Disbursement																				
Mailing Address One Massachusetts Ave., 6th Floor	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	5		2	0	0	9												
City Washington State DC Zip Code 20001	Amount of Each Disbursement this Period																				
Purpose of Disbursement E-mail broadcast Candidate Name	<table border="1"> <tr> <td colspan="10">1244.00</td> </tr> </table>	1244.00																			
1244.00																					
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)

10891.00

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

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)
National Campaign Fund

A. Full Name (Last, First, Middle Initial) Barrett Garcia	Transaction ID: EXP.B.16245 Date of Disbursement																				
Mailing Address 32302 Camino Capistrano #214	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	5		2	0	0	9												
City San Juan Capistran State CA Zip Code 92675	Amount of Each Disbursement this Period																				
Purpose of Disbursement Accounting services Candidate Name	<table border="1"> <tr> <td colspan="10">368.24</td> </tr> </table>	368.24																			
368.24																					
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) SunTrust Merchant Services	Transaction ID: EXP.B.16241 Date of Disbursement																				
Mailing Address 1 Western Maryland Parkway	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	5		2	0	0	9												
City Hagerstown State MD Zip Code 21740	Amount of Each Disbursement this Period																				
Purpose of Disbursement Merchant fees Candidate Name	<table border="1"> <tr> <td colspan="10">1473.35</td> </tr> </table>	1473.35																			
1473.35																					
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) James Lacy	Transaction ID: EXP.B.16246 Date of Disbursement																				
Mailing Address 30011 Ivy Glenn Dr #223	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	3		2	0	0	9												
City Laguna Niguel State CA Zip Code 92677	Amount of Each Disbursement this Period																				
Purpose of Disbursement Meeting Expenses Candidate Name	<table border="1"> <tr> <td colspan="10">421.34</td> </tr> </table>	421.34																			
421.34																					
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)

2262.93

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)
National Campaign Fund

A. Full Name (Last, First, Middle Initial) SunTrust Merchant Services	Transaction ID: EXP.B.16247 Date of Disbursement																				
Mailing Address 1 Western Maryland Parkway	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	7		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	7		2	0	0	9												
City Hagerstown State MD Zip Code 21740	Amount of Each Disbursement this Period																				
Purpose of Disbursement Merchant Fees Candidate Name	<table border="1"> <tr> <td colspan="10">254.78</td> </tr> </table>	254.78																			
254.78																					
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) Excellentia Inc.	Transaction ID: EXP.B.16249 Date of Disbursement																				
Mailing Address 4224 67th Ave CT W	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	8		2	0	0	9												
City University Place State WA Zip Code 98466	Amount of Each Disbursement this Period																				
Purpose of Disbursement Consulting Fees Candidate Name	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
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) Landslide Communications	Transaction ID: EXP.B.16252 Date of Disbursement																				
Mailing Address 30011 Ivy Glenn Dr., Ste 223	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	8		2	0	0	9												
City Laguna Niguel State CA Zip Code 92677	Amount of Each Disbursement this Period																				
Purpose of Disbursement General committee management fees Candidate Name	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
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)

10254.78

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Campaign Fund

A.

Full Name (Last, First, Middle Initial)
NetFile

Mailing Address 2707 Aurora Road

City Mariposa State CA Zip Code 95338

Purpose of Disbursement
Web Service Provider

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: EXP.B.16253

Date of Disbursement

05 / 06 / 2009

Amount of Each Disbursement this Period

175.00

B.

Full Name (Last, First, Middle Initial)
Barrett Garcia & Co.

Mailing Address 32302 Camino Capistrano #214

City San Juan Capistran State CA Zip Code 92675

Purpose of Disbursement
Accounting Services

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: EXP.B.16256

Date of Disbursement

05 / 07 / 2009

Amount of Each Disbursement this Period

352.87

C.

Full Name (Last, First, Middle Initial)
Eagle Publishing

Mailing Address One Massachusetts Ave., 6th Floor

City Washington State DC Zip Code 20001

Purpose of Disbursement
E-mail Broadcast

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: EXP.B.16261

Date of Disbursement

05 / 07 / 2009

Amount of Each Disbursement this Period

2172.00

SUBTOTAL of Disbursements This Page (optional)

2699.87

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)
National Campaign Fund

A.

Full Name (Last, First, Middle Initial)
SunTrust Merchant Services

Mailing Address 1 Western Maryland Parkway

City Hagerstown State MD Zip Code 21740

Purpose of Disbursement

Merchant fees

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: EXP.B.16255

Date of Disbursement

05 / 07 / 2009

Amount of Each Disbursement this Period

171.00

B.

Full Name (Last, First, Middle Initial)
Eagle Publishing

Mailing Address One Massachusetts Ave., 6th Floor

City Washington State DC Zip Code 20001

Purpose of Disbursement

E-mail fundraiser

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: EXP.B.16264

Date of Disbursement

05 / 12 / 2009

Amount of Each Disbursement this Period

3384.00

C.

Full Name (Last, First, Middle Initial)
SunTrust Merchant Services

Mailing Address 1 Western Maryland Parkway

City Hagerstown State MD Zip Code 21740

Purpose of Disbursement

merchant fees

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: EXP.B.16262

Date of Disbursement

05 / 12 / 2009

Amount of Each Disbursement this Period

436.36

SUBTOTAL of Disbursements This Page (optional)

3991.36

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)
National Campaign Fund

A. Full Name (Last, First, Middle Initial) C4Strategies	Transaction ID: EXP.B.16266 Date of Disbursement																				
Mailing Address 8230 Catbird Circle #302	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	5		2	0	0	9												
City Lorton State VA Zip Code 22079	Amount of Each Disbursement this Period																				
Purpose of Disbursement website expenses Candidate Name	<table border="1"> <tr> <td colspan="10">8155.17</td> </tr> </table>	8155.17																			
8155.17																					
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) Barrett Garcia	Transaction ID: EXP.B.16267 Date of Disbursement																				
Mailing Address 32302 Camino Capistrano #214	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	5		2	0	0	9												
City San Juan Capistran State CA Zip Code 92675	Amount of Each Disbursement this Period																				
Purpose of Disbursement Accounting services Candidate Name	<table border="1"> <tr> <td colspan="10">864.28</td> </tr> </table>	864.28																			
864.28																					
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) Eagle Publishing	Transaction ID: EXP.B.16270 Date of Disbursement																				
Mailing Address One Massachusetts Ave., 6th Floor	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		2	2		2	0	0	9												
City Washington State DC Zip Code 20001	Amount of Each Disbursement this Period																				
Purpose of Disbursement E-mail broadcasts Candidate Name	<table border="1"> <tr> <td colspan="10">2160.00</td> </tr> </table>	2160.00																			
2160.00																					
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)

11179.45

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)

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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)
National Campaign Fund

A. Full Name (Last, First, Middle Initial) SunTrust Merchant Services	Transaction ID: EXP.B.16271 Date of Disbursement																				
Mailing Address 1 Western Maryland Parkway	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		2	2		2	0	0	9												
City Hagerstown State MD Zip Code 21740	Amount of Each Disbursement this Period																				
Purpose of Disbursement merchant fees Candidate Name	<table border="1"> <tr> <td colspan="10">243.45</td> </tr> </table>	243.45																			
243.45																					
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) Regus	Transaction ID: EXP.B.16274 Date of Disbursement																				
Mailing Address 1101 Pennsylvania Ave 5th Floor	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	7		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		2	7		2	0	0	9												
City Washington State DC Zip Code 20004	Amount of Each Disbursement this Period																				
Purpose of Disbursement Rent Candidate Name	<table border="1"> <tr> <td colspan="10">111.01</td> </tr> </table>	111.01																			
111.01																					
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) Excellentia Inc.	Transaction ID: EXP.B.16277 Date of Disbursement																				
Mailing Address 4224 67th Ave CT W	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	2		2	0	0	9												
City University Place State WA Zip Code 98466	Amount of Each Disbursement this Period																				
Purpose of Disbursement General committee management Candidate Name	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
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)

5354.46

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 53 / 60

<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)
National Campaign Fund

A.

Full Name (Last, First, Middle Initial)
SunTrust Merchant Services

Mailing Address 1 Western Maryland Parkway

City Hagerstown State MD Zip Code 21740

Purpose of Disbursement

Merchant fees

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: EXP.B.16276

Date of Disbursement

06 / 02 / 2009

Amount of Each Disbursement this Period

172.80

B.

Full Name (Last, First, Middle Initial)
James Sills

Mailing Address P.O. Box 82303

City San Diego State CA Zip Code 92138

Purpose of Disbursement

Meeting Expense

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: EXP.B.16278

Date of Disbursement

06 / 03 / 2009

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)
SunTrust Merchant Services

Mailing Address 1 Western Maryland Parkway

City Hagerstown State MD Zip Code 21740

Purpose of Disbursement

Merchant fees

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: EXP.B.16280

Date of Disbursement

06 / 03 / 2009

Amount of Each Disbursement this Period

84.35

SUBTOTAL of Disbursements This Page (optional)

757.15

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

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NAME OF COMMITTEE (In Full)
National Campaign Fund

A. Full Name (Last, First, Middle Initial) Barrett Garcia	Transaction ID: EXP.B.16281 Date of Disbursement																				
Mailing Address 32302 Camino Capistrano #214	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	4		2	0	0	9												
City State Zip Code San Juan Capistran CA 92675	Amount of Each Disbursement this Period																				
Purpose of Disbursement Accounting services Candidate Name	<table border="1"> <tr> <td colspan="10">273.32</td> </tr> </table>	273.32																			
273.32																					
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) James Lacy	Transaction ID: EXP.B.16282 Date of Disbursement																				
Mailing Address 30011 Ivy Glenn Dr #223	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	8		2	0	0	9												
City State Zip Code Laguna Niguel CA 92677	Amount of Each Disbursement this Period																				
Purpose of Disbursement Meeting Expenses Candidate Name	<table border="1"> <tr> <td colspan="10">4500.00</td> </tr> </table>	4500.00																			
4500.00																					
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) C4Strategies	Transaction ID: EXP.B.16285 Date of Disbursement																				
Mailing Address 8230 Catbird Circle #302	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	2		2	0	0	9												
City State Zip Code Lorton VA 22079	Amount of Each Disbursement this Period																				
Purpose of Disbursement Website Services Candidate Name	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
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)

5773.32

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)
National Campaign Fund

A. Full Name (Last, First, Middle Initial) Eagle Publishing	Transaction ID: EXP.B.16287 Date of Disbursement																				
Mailing Address One Massachusetts Ave., 6th Floor	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	2		2	0	0	9												
City Washington State DC Zip Code 20001	Amount of Each Disbursement this Period																				
Purpose of Disbursement E-mail Broadcast Candidate Name	<table border="1"> <tr> <td colspan="10">1364.00</td> </tr> </table>	1364.00																			
1364.00																					
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) C4Strategies	Transaction ID: EXP.B.16290 Date of Disbursement																				
Mailing Address 8230 Catbird Circle #302	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		3	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		3	0		2	0	0	9												
City Lorton State VA Zip Code 22079	Amount of Each Disbursement this Period																				
Purpose of Disbursement Website expenses Candidate Name	<table border="1"> <tr> <td colspan="10">2938.33</td> </tr> </table>	2938.33																			
2938.33																					
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) Excellentia Inc.	Transaction ID: EXP.B.16291 Date of Disbursement																				
Mailing Address 4224 67th Ave CT W	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		3	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		3	0		2	0	0	9												
City University Place State WA Zip Code 98466	Amount of Each Disbursement this Period																				
Purpose of Disbursement General committee consulting Candidate Name	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
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)

9302.33

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)
National Campaign Fund

A.

Full Name (Last, First, Middle Initial)
SunTrust Merchant Services

Mailing Address 1 Western Maryland Parkway

City Hagerstown State MD Zip Code 21740

Purpose of Disbursement
Merchant fees

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: EXP.B.16288

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2009

Amount of Each Disbursement this Period

89.83

SUBTOTAL of Disbursements This Page (optional) ▶

89.83

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

161372.55

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Campaign Fund		FEC IDENTIFICATION NUMBER C C00437822	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics, Inc.		Date MM / DD / YYYY 11 / 25 / 2008	
Mailing Address 2070 Chain Bridge Rd # 520		Amount 4934.00	
City State Zip Code Vienna VA 22182		Transaction ID: PDT.E.13	
Purpose of Expenditure Mailing/printing		Office Sought: <input type="checkbox"/> House State: GA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 003		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Saxbe Chambliss		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics, Inc.		Date MM / DD / YYYY 11 / 28 / 2008	
Mailing Address 2070 Chain Bridge Rd # 520		Amount 2823.00	
City State Zip Code Vienna VA 22182		Transaction ID: PDT.E.14	
Purpose of Expenditure Mailing/printing		Office Sought: <input type="checkbox"/> House State: GA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 003		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Saxbe Chambliss		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures		0.00	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date MM / DD / YYYY 07 / 31 / 2009	

A. Form/Schedule : **SE**

Transaction ID : **PDT.E.13**

Special election

B. Form/Schedule : **SE**

Transaction ID : **PDT.E.14**

Special election

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 59 / 60

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
National Campaign Fund**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Response Dynamics, Inc.Nature of Debt (Purpose):
P.O.Box and bulk rate mail-
ing account deposit

Mailing Address 2070 Chain Bridge Rd # 520

City State ZIP Code
Vienna VA 22182

Outstanding Balance Beginning This Period

1960.00

Transaction ID: PAY:D:107

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1960.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Response Dynamics, Inc.Nature of Debt (Purpose):
Mailing/printing

Mailing Address 2070 Chain Bridge Rd # 520

City State ZIP Code
Vienna VA 22182

Outstanding Balance Beginning This Period

4934.00

Transaction ID: PAY:D:15467

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4934.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Response Dynamics, Inc.Nature of Debt (Purpose):
Mailing/printing

Mailing Address 2070 Chain Bridge Rd # 520

City State ZIP Code
Vienna VA 22182

Outstanding Balance Beginning This Period

2823.00

Transaction ID: PAY:D:15468

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2823.00

1) SUBTOTALS This Period This Page (optional).....

9717.00

2) TOTALS This Period (last page this line number only).....

9717.00

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....

0.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

9717.00

B. Form/Schedule : **SD10**
Transaction ID : **PAY:D:15467**

Special election

C. Form/Schedule : **SD10**
Transaction ID : **PAY:D:15468**

Special election