

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**  
**FREEDOM FOR ALL AMERICANS**

ADDRESS (number and street) **824 S. MILLEDGE AVE. STE. 101**  
Check if different than previously reported. (ACC) **ATHENS GA 30605**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00575449** 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 Year-End 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 (12S)  
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  /  /  07 01 2017 through  /  /  09 30 2017

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

Signature of Treasurer KILGORE, PAUL, , , [Electronically Filed] Date  /  /  10 13 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**FREEDOM FOR ALL AMERICANS**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2017"/>	<input type="text"/>	<input type="text" value="6492.92"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="4457.15"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="45985.15"/>	<input type="text" value="128576.57"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="50442.30"/>	<input type="text" value="135069.49"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="50325.18"/>	<input type="text" value="134942.37"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="117.12"/>	<input type="text" value="127.12"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="167275.78"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**FREEDOM FOR ALL AMERICANS**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	40.00
(ii) Unitemized .....	0.00	55.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	95.00
(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) .....	0.00	95.00
12. Transfers From Affiliated/Other Party Committees.....	30000.00	88691.55
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).....	25.14	25.14
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	15960.01	39764.88
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	45985.15	128576.57
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	45985.15	128576.57

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	50250.18	143783.31
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	50250.18	143783.31
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	1250.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 .....	75.00	- 105393.22
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	10000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	75.00	- 95393.22
29. Other Disbursements (Including Non-Federal Donations).....	0.00	85302.28
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	50325.18	134942.37
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	50325.18	134942.37

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	0.00	95.00
34. Total Contribution Refunds (from Line 28(d)) .....	75.00	- 95393.22
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	- 75.00	95488.22
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	50250.18	143783.31
37. Offsets to Operating Expenditures (from Line 15, page 3).....	25.14	25.14
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	50225.04	143758.17

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 21
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**FREEDOM FOR ALL AMERICANS**

**A. REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 72598

City NEWPORT	State KY	Zip Code 41072
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00493924

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
55000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
08	/	15	/	2017

**Transaction ID : A8C81D5BC2F1748FABDF**

Amount of Each Receipt this Period  
15000.00

Memo Item  
TRANSFER OF FUNDS

**B. REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 72598

City NEWPORT	State KY	Zip Code 41072
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00493924

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
70000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
09	/	27	/	2017

**Transaction ID : A97BF6803AF4E430AAD1**

Amount of Each Receipt this Period  
15000.00

Memo Item  
TRANSFER OF FUNDS

**C.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	30000.00
<b>TOTAL</b> This Period (last page this line number only).....	30000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 21
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM FOR ALL AMERICANS**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. CONSERVATIVE CONNECTOR**

Mailing Address PO BOX 952

City GRANDVILLE	State MI	Zip Code 49468-0952
--------------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
39764.88

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2017

**Transaction ID : ABEF121F50B5C48B895B**

Amount of Each Receipt this Period  
8628.25

Memo Item  
LRI - USUAL AND NORMAL

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. CONSERVATIVE CONNECTOR**

Mailing Address PO BOX 952

City GRANDVILLE	State MI	Zip Code 49468-0952
--------------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
39764.88

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2017

**Transaction ID : A9F44D8AFE8474812962**

Amount of Each Receipt this Period  
7331.76

Memo Item  
LRI - USUAL AND NORMAL

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C.**

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15960.01
<b>TOTAL</b> This Period (last page this line number only).....	15960.01

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)  
**FREEDOM FOR ALL AMERICANS**

Full Name (Last, First, Middle Initial) <b>A. ARISTOTLE INTERNATIONAL INC.</b>		Date of Disbursement MM / DD / YYYY 08 / 01 / 2017
Mailing Address 205 PENNSYLVANIA AVE SE		FEC Identification Number C [REDACTED] <b>Transaction ID : BABE128F5A</b> Amount of Each Disbursement this Period 600.00
City WASHINGTON	State DC	Zip Code 20003-1164
Purpose of Disbursement PAC SOFTWARE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. ARISTOTLE INTERNATIONAL INC.</b>		Date of Disbursement MM / DD / YYYY 09 / 13 / 2017
Mailing Address 205 PENNSYLVANIA AVE SE		FEC Identification Number C [REDACTED] <b>Transaction ID : BCD2B8A521</b> Amount of Each Disbursement this Period 600.00
City WASHINGTON	State DC	Zip Code 20003-1164
Purpose of Disbursement PAC SOFTWARE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. PROFESSIONAL DATA SERVICES INC.</b>		Date of Disbursement MM / DD / YYYY 09 / 05 / 2017
Mailing Address 824 S MILLEDGE AVE STE 101		FEC Identification Number C [REDACTED] <b>Transaction ID : B67959A2CC</b> Amount of Each Disbursement this Period 474.06
City ATHENS	State GA	Zip Code 30605-1332
Purpose of Disbursement PAC COMPLIANCE CONSULTING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

1674.06

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



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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)  
**FREEDOM FOR ALL AMERICANS**

Full Name (Last, First, Middle Initial) <b>A. CAPLIN &amp; DRYSDALE</b>		Date of Disbursement MM / DD / YYYY 09 / 05 / 2017	
Mailing Address 600 LEXINGTON AVE FL 21		FEC Identification Number C [REDACTED] <b>Transaction ID : BD33E623A5</b> Amount of Each Disbursement this Period 10000.00	
City NEW YORK	State NY	Zip Code 10022-7619	Category/ Type
Purpose of Disbursement PAC LEGAL FEES		Memo Item <input type="checkbox"/>	
Candidate Name			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>B. CAPLIN &amp; DRYSDALE</b>		Date of Disbursement MM / DD / YYYY 09 / 28 / 2017	
Mailing Address 600 LEXINGTON AVE FL 21		FEC Identification Number C [REDACTED] <b>Transaction ID : B8F02758FE5</b> Amount of Each Disbursement this Period 7378.60	
City NEW YORK	State NY	Zip Code 10022-7619	Category/ Type
Purpose of Disbursement PAC LEGAL FEES		Memo Item <input type="checkbox"/>	
Candidate Name			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>C. PROFESSIONAL DATA SERVICES INC.</b>		Date of Disbursement MM / DD / YYYY 09 / 05 / 2017	
Mailing Address 824 S MILLEDGE AVE STE 101		FEC Identification Number C [REDACTED] <b>Transaction ID : BD6BDE723I</b> Amount of Each Disbursement this Period 3342.48	
City ATHENS	State GA	Zip Code 30605-1332	Category/ Type
Purpose of Disbursement PAC COMPLIANCE CONSULTING		Memo Item <input type="checkbox"/>	
Candidate Name			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	20721.08
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)  
**FREEDOM FOR ALL AMERICANS**

**A. PROFESSIONAL DATA SERVICES INC.**

Full Name (Last, First, Middle Initial)

Mailing Address 824 S MILLEDGE AVE  
STE 101

City ATHENS State GA Zip Code 30605-1332

Purpose of Disbursement PAC COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 09 / 05 / 2017

FEC Identification Number: C

Transaction ID : BBE9D2DCC

Amount of Each Disbursement this Period: 1183.46

Memo Item

**B. PROFESSIONAL DATA SERVICES INC.**

Full Name (Last, First, Middle Initial)

Mailing Address 824 S MILLEDGE AVE  
STE 101

City ATHENS State GA Zip Code 30605-1332

Purpose of Disbursement PAC COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 09 / 28 / 2017

FEC Identification Number: C

Transaction ID : B391B9B0FD

Amount of Each Disbursement this Period: 112.13

Memo Item

**C. CAPLIN & DRYSDALE**

Full Name (Last, First, Middle Initial)

Mailing Address 600 LEXINGTON AVE  
FL 21

City NEW YORK State NY Zip Code 10022-7619

Purpose of Disbursement PAC LEGAL FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 09 / 28 / 2017

FEC Identification Number: C

Transaction ID : B21FBB1107

Amount of Each Disbursement this Period: 7621.40

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 8916.99

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)  
**FREEDOM FOR ALL AMERICANS**

Full Name (Last, First, Middle Initial)

**A. PROFESSIONAL DATA SERVICES INC.**

Mailing Address 824 S MILLEDGE AVE  
STE 101

City ATHENS State GA Zip Code 30605-1332

Purpose of Disbursement  
PAC COMPLIANCE CONSULTING

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 28 / 2017

FEC Identification Number

C  
Transaction ID : B71304D40F  
Amount of Each Disbursement this Period  
3887.87

Memo Item

Full Name (Last, First, Middle Initial)

**B. CAPLIN & DRYSDALE**

Mailing Address 600 LEXINGTON AVE  
FL 21

City NEW YORK State NY Zip Code 10022-7619

Purpose of Disbursement  
PAC LEGAL FEES

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 28 / 2017

FEC Identification Number

C  
Transaction ID : B0A29DF8AD  
Amount of Each Disbursement this Period  
15000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C  
Amount of Each Disbursement this Period

Memo Item

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

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

18887.87  
50200.00

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" 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)  
**FREEDOM FOR ALL AMERICANS**

Full Name (Last, First, Middle Initial) <b>A. MILTON, JOHN, , ,</b>		Date of Disbursement MM / DD / YYYY 07 / 05 / 2017	
Mailing Address 1517 ANACOSTIA AVE		FEC Identification Number C [ ]	
City MOUNT PLEASANT	State SC	Zip Code 29466-7510	Transaction ID : <b>B0A73509DF</b> Amount of Each Disbursement this Period [ ] 75.00
Purpose of Disbursement REFUND		Category/ Type [ ]	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C [ ]	
City	State	Zip Code	Amount of Each Disbursement this Period [ ]
Purpose of Disbursement		Category/ Type [ ]	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C [ ]	
City	State	Zip Code	Amount of Each Disbursement this Period [ ]
Purpose of Disbursement		Category/ Type [ ]	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 75.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ] 75.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 13 OF 21
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)  
**FREEDOM FOR ALL AMERICANS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>CAPLIN &amp; DRYSDALE</b>			Nature of Debt (Purpose): LEGAL FEES
Mailing Address 600 LEXINGTON AVE FL 21			
City NEW YORK	State NY	Zip Code 10022-7619	

Outstanding Balance Beginning This Period 17378.60	Transaction ID : D1FC5BE47CAC3446B9BE	
Amount Incurred This Period 0.00	Payment This Period 17378.60	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>FORWARD STRATEGY PARTNERS</b>			Nature of Debt (Purpose): FUNDRAISING CONSULTING
Mailing Address 6211 BURNHAM PL			
City PROSPECT	State KY	Zip Code 40059-8887	

Outstanding Balance Beginning This Period 2395.00	Transaction ID : DF23C7F8F557748F4AE8	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2395.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>I360</b>			Nature of Debt (Purpose): TELEMARKETING
Mailing Address PO BOX 37046			
City BALTIMORE	State MD	Zip Code 21297-3046	

Outstanding Balance Beginning This Period 15022.28	Transaction ID : DB83F2A7B2A3E44D58D3	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 15022.28

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	17417.28
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 14 OF 21
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)  
**FREEDOM FOR ALL AMERICANS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>RAND PAUL FOR US SENATE 2016</b>			Nature of Debt (Purpose): INTERNET DOMAIN LEASE
Mailing Address PO BOX 72928			
City NEWPORT	State KY	Zip Code 41072	

Outstanding Balance Beginning This Period 10000.00	Transaction ID : D41E0B07E7AF446F5B3E	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 10000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>PRIMARY DATA SOLUTIONS</b>			Nature of Debt (Purpose): DATA WORK
Mailing Address 6983 CONSERVATION DR			
City SPRINGFIELD	State VA	Zip Code 22153-1015	

Outstanding Balance Beginning This Period 2922.46	Transaction ID : D3FE236B3F2BD421988A	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2922.46

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>UPT STRATEGIES</b>			Nature of Debt (Purpose): CAMPAIGN STRATEGY CONSULTING
Mailing Address PO BOX 31403			
City CHARLESTON	State SC	Zip Code 29417-1403	

Outstanding Balance Beginning This Period 2500.00	Transaction ID : D5E075DE6BDE540FB8CE	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2500.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	15422.46
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 15 OF 21
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**FREEDOM FOR ALL AMERICANS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>I360</b>			Nature of Debt (Purpose): TELEMARKETING
Mailing Address PO BOX 37046			
City BALTIMORE	State MD	Zip Code 21297-3046	

Outstanding Balance Beginning This Period		Transaction ID : D9BC914C487874DDE91F	
7347.85			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	7347.85	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>VICTORY ENTERPRISES</b>			Nature of Debt (Purpose): ONLINE STORE SALES/PRINTING/COLLATERAL
Mailing Address 5200 30TH ST SW			
City DAVENPORT	State IA	Zip Code 52802-3039	

Outstanding Balance Beginning This Period		Transaction ID : DAD01D54340AA4A37AF1	
18786.89			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	18786.89	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>VICTORY PHONES</b>			Nature of Debt (Purpose): TELEMARKETING
Mailing Address 190 MONROE AVE NW STE 5			
City GRAND RAPIDS	State MI	Zip Code 49503-2628	

Outstanding Balance Beginning This Period		Transaction ID : DF1AEEF60C3DE42B89EE	
3935.78			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	3935.78	

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	30070.52
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 16 OF 21
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**FREEDOM FOR ALL AMERICANS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>HARTFORD TECHNOLOGY RENTAL</b>		Nature of Debt (Purpose): OFFICE EQUIPMENT RENTAL	
Mailing Address 105 PRAIRIE LAKE RD STE D			
City EAST DUNDEE	State IL	Zip Code 60118-9133	

Outstanding Balance Beginning This Period 3962.45		Transaction ID : D187719C8CEDA4477A21	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3962.45	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>PARAMOUNT COMMUNICATION INC</b>		Nature of Debt (Purpose): E-MARKETING	
Mailing Address 525K E MARKET ST STE 114			
City LEESBURG	State VA	Zip Code 20176-4113	

Outstanding Balance Beginning This Period 26045.68		Transaction ID : D59E3214508F24A339C3	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 26045.68	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>UPT STRATEGIES</b>		Nature of Debt (Purpose): CAMPAIGN STRATEGY CONSULTING	
Mailing Address PO BOX 31403			
City CHARLESTON	State SC	Zip Code 29417-1403	

Outstanding Balance Beginning This Period 2500.00		Transaction ID : DE9E658DB0EAA412289E	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2500.00	

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	32508.13
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	



**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 17 OF 21
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**FREEDOM FOR ALL AMERICANS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>VICTORY PHONES</b>			Nature of Debt (Purpose): TELEMARKETING
Mailing Address 190 MONROE AVE NW STE 5			
City GRAND RAPIDS	State MI	Zip Code 49503-2628	

Outstanding Balance Beginning This Period	Transaction ID : D643A0DADB4E8411CB2B	
1219.20		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	1219.20

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>CAPLIN &amp; DRYSDALE</b>			Nature of Debt (Purpose): LEGAL FEES
Mailing Address 600 LEXINGTON AVE FL 21			
City NEW YORK	State NY	Zip Code 10022-7619	

Outstanding Balance Beginning This Period	Transaction ID : DF87BE79F1B684C30A8A	
15000.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	15000.00	0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>PROFESSIONAL DATA SERVICES INC.</b>			Nature of Debt (Purpose): COMPLIANCE CONSULTING
Mailing Address 824 S MILLEDGE AVE STE 101			
City ATHENS	State GA	Zip Code 30605-1332	

Outstanding Balance Beginning This Period	Transaction ID : DB78AAA5B8B1447BAAA8	
3342.48		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	3342.48	0.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	1219.20
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 18 OF 21
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**FREEDOM FOR ALL AMERICANS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>PRIMARY DATA SOLUTIONS</b>			Nature of Debt (Purpose): DATA WORK
Mailing Address 6983 CONSERVATION DR			
City SPRINGFIELD	State VA	Zip Code 22153-1015	

Outstanding Balance Beginning This Period <input type="text" value="1058.00"/>	Transaction ID : D9411592A444D4BAA813	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1058.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>VICTORY ENTERPRISES</b>			Nature of Debt (Purpose): ONLINE STORE SALES
Mailing Address 5200 30TH ST SW			
City DAVENPORT	State IA	Zip Code 52802-3039	

Outstanding Balance Beginning This Period <input type="text" value="10268.12"/>	Transaction ID : D88B55F9DF6D542028D9	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="10268.12"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>BEDINGFIELD, ERIC, , ,</b>			Nature of Debt (Purpose): CAMPAIGN STRATEGY CONSULTING
Mailing Address 945 COOLEY BRIDGE RD			
City BELTON	State SC	Zip Code 29627-9276	

Outstanding Balance Beginning This Period <input type="text" value="2500.00"/>	Transaction ID : DAD5BC555A3EE4685A8B	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2500.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="13826.12"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 19 OF 21
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)  
**FREEDOM FOR ALL AMERICANS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>C STREET PROPERTIES LLC</b>			Nature of Debt (Purpose): OFFICE RENT
Mailing Address 190 MONROE AVE NW STE 500			
City GRAND RAPIDS	State MI	Zip Code 49503-2628	

Outstanding Balance Beginning This Period 12196.39	Transaction ID : D3E9ED17F26D541D3A25	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 12196.39

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>CAPLIN &amp; DRYSDALE</b>			Nature of Debt (Purpose): LEGAL FEES
Mailing Address 600 LEXINGTON AVE FL 21			
City NEW YORK	State NY	Zip Code 10022-7619	

Outstanding Balance Beginning This Period 15419.34	Transaction ID : D4AF1CAF04EFA45258FD	
Amount Incurred This Period 0.00	Payment This Period 7621.40	Outstanding Balance at Close of This Period 7797.94

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>CAPLIN &amp; DRYSDALE</b>			Nature of Debt (Purpose): LEGAL FEES
Mailing Address 600 LEXINGTON AVE FL 21			
City NEW YORK	State NY	Zip Code 10022-7619	

Outstanding Balance Beginning This Period 15215.00	Transaction ID : D744F1BB9625A49CB808	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 15215.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	35209.33
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 20 OF 21
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**FREEDOM FOR ALL AMERICANS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>PROFESSIONAL DATA SERVICES INC.</b>			Nature of Debt (Purpose): COMPLIANCE CONSULTING
Mailing Address 824 S MILLEDGE AVE STE 101			
City ATHENS	State GA	Zip Code 30605-1332	

Outstanding Balance Beginning This Period <input type="text" value="1295.59"/>	Transaction ID : D84BBCB1B2B5B4562B9C	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1295.59"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>PROFESSIONAL DATA SERVICES INC.</b>			Nature of Debt (Purpose): COMPLIANCE CONSULTING
Mailing Address 824 S MILLEDGE AVE STE 101			
City ATHENS	State GA	Zip Code 30605-1332	

Outstanding Balance Beginning This Period <input type="text" value="14165.84"/>	Transaction ID : D52A0564DC3F642589AB	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="3887.87"/>	Outstanding Balance at Close of This Period <input type="text" value="10277.97"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>PROFESSIONAL DATA SERVICES INC.</b>			Nature of Debt (Purpose): COMPLIANCE CONSULTING
Mailing Address 824 S MILLEDGE AVE STE 101			
City ATHENS	State GA	Zip Code 30605-1332	

Outstanding Balance Beginning This Period <input type="text" value="474.06"/>	Transaction ID : D7946535BFF1A41DBA3D	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="474.06"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="10277.97"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 21 OF 21
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**FREEDOM FOR ALL AMERICANS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>INTERNAL REVENUE SERVICE</b>			Nature of Debt (Purpose): <b>TAXES</b>
Mailing Address 1111 CONSTITUTION AVE NW			
City WASHINGTON	State DC	Zip Code 20224-0001	

Outstanding Balance Beginning This Period		Transaction ID : <b>D3524288D513347B78B5</b>	
11324.77			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	11324.77	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	11324.77
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	167275.78
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	167275.78