

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Voice for Freedom

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

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 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		352.31
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	31956.30									
(c) Total Receipts (from Line 19)	19845.00	101449.20								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	51801.30	101801.51								
7. Total Disbursements (from Line 31)	33424.61	83424.82								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	18376.69	18376.69								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Voice for Freedom

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
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)	6250.00	13900.00
(ii) Unitemized	1595.00	2685.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	7845.00	16585.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	12000.00	75000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	19845.00	91585.00
12. Transfers From Affiliated/Other Party Committees	0.00	9864.20
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))	19845.00	101449.20
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	19845.00	101449.20

DETAILED SUMMARY PAGE

of Disbursements

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.....	2424.61	11424.82
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	2424.61	11424.82
22. Transfers to Affiliated/Other Party Committees.....	0.00	8000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	30000.00	60000.00
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.....	1000.00	4000.00
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))..	33424.61	83424.82
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	33424.61	83424.82

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)	19845.00	91585.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	19845.00	91585.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	2424.61	11424.82
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2424.61	11424.82

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 20

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Voice for Freedom

A.

Full Name (Last, First, Middle Initial)
William Barrick

Mailing Address 1283 Noxon Rd

City State Zip Code
Lagrangeville NY 12540-5976

FEC ID number of contributing federal political committee. C

Name of Employer: Ortho. Assoc. of Dutchess Co.
Occupation: Orthopedic Surgeon

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 9

Transaction ID: 91216.C3150

Amount of Each Receipt this Period
500.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Anjum Bux

Mailing Address PO Box 264

City State Zip Code
Danville KY 40423-0264

FEC ID number of contributing federal political committee. C

Name of Employer: Self Employed
Occupation: Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 0 9

Transaction ID: 91216.C3137

Amount of Each Receipt this Period
250.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Michael Hilton

Mailing Address 3975 Roswell Rd

City State Zip Code
Atlanta GA 30342-4117

FEC ID number of contributing federal political committee. C

Name of Employer: Self Employed
Occupation: Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: 91216.C3163

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional) 1000.00

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 / 20
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Voice for Freedom

A.

Full Name (Last, First, Middle Initial)
Frank Reiser

Mailing Address 1054 Terra Dr

City State Zip Code
Moscow ID 83843-8750

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

Name of Employer Occupation
Action Emergency Med. Svcs Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: 91216.C3157

Amount of Each Receipt this Period
250.00

Receipt

B.

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

Mailing Address PO Box 2981

City State Zip Code
Warner Robins GA 31099-2981

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

Name of Employer Occupation
Self Employed Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
10 / 28 / 2009

Transaction ID: 91216.C3153

Amount of Each Receipt this Period
5000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **5250.00**

TOTAL This Period (last page this line number only) ► **6250.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 20
	(check only one)
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Voice for Freedom

A.	Full Name (Last, First, Middle Initial) Koch PAC	Date of Receipt MM / DD / YYYY 12 / 29 / 2009
	Mailing Address 655 15th St NW Ste 445	Transaction ID: 91230.C3167
	City State Zip Code Washington DC 20005-5727	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C C00236489	Receipt
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00

B.	Full Name (Last, First, Middle Initial) UPSPAC	Date of Receipt MM / DD / YYYY 12 / 23 / 2009
	Mailing Address 55 Glenlake Pkwy NE	Transaction ID: 91230.C3166
	City State Zip Code Atlanta GA 30328-3474	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C C00064766	Receipt
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00

C.	Full Name (Last, First, Middle Initial) Wal-Pac	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 702 SW 8th St	Transaction ID: 91216.C3162
	City State Zip Code Bentonville AR 72716-6209	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C C00093054	Receipt
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00

SUBTOTAL of Receipts This Page (optional)	12000.00
TOTAL This Period (last page this line number only)	12000.00

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 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)
Voice for Freedom

A.

Full Name (Last, First, Middle Initial)
Aristotle, Inc.

Transaction ID: 91216.E280
Date of Disbursement

Mailing Address 205 Pennsylvania Ave SE

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

City Washington State DC Zip Code 20003-1164

Amount of Each Disbursement this Period

159.90

Purpose of Disbursement
Transaction Fees
Candidate Name

Category/ Type

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

TRANSACTION FEES

B.

Full Name (Last, First, Middle Initial)
Aristotle, Inc.

Transaction ID: 91216.E281
Date of Disbursement

Mailing Address 205 Pennsylvania Ave SE

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

City Washington State DC Zip Code 20003-1164

Amount of Each Disbursement this Period

71.15

Purpose of Disbursement
Transaction Fees
Candidate Name

Category/ Type

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

TRANSACTION FEES

C.

Full Name (Last, First, Middle Initial)
Aristotle, Inc.

Transaction ID: 91216.E282
Date of Disbursement

Mailing Address 205 Pennsylvania Ave SE

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

City Washington State DC Zip Code 20003-1164

Amount of Each Disbursement this Period

58.25

Purpose of Disbursement
Transaction Fees
Candidate Name

Category/ Type

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

TRANSACTION FEES

SUBTOTAL of Disbursements This Page (optional)

289.30

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Voice for Freedom

<p>A. Full Name (Last, First, Middle Initial) Aristotle, Inc.</p> <p>Mailing Address 205 Pennsylvania Ave SE</p> <p>City Washington State DC Zip Code 20003-1164</p> <p>Purpose of Disbursement Transaction Fees Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 91216.E283 Date of Disbursement 11 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 31.25</p> <p>TRANSACTION FEES</p>
<p>B. Full Name (Last, First, Middle Initial) Aristotle, Inc.</p> <p>Mailing Address 205 Pennsylvania Ave SE</p> <p>City Washington State DC Zip Code 20003-1164</p> <p>Purpose of Disbursement Transaction Fees Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 91216.E293 Date of Disbursement 11 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 30.90</p> <p>TRANSACTION FEES</p>
<p>C. Full Name (Last, First, Middle Initial) Aristotle, Inc.</p> <p>Mailing Address 205 Pennsylvania Ave SE</p> <p>City Washington State DC Zip Code 20003-1164</p> <p>Purpose of Disbursement Transaction Fees Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00121.E307 Date of Disbursement 12 / 14 / 2009</p> <p>Amount of Each Disbursement this Period 10.75</p> <p>TRANSACTION FEES</p>

SUBTOTAL of Disbursements This Page (optional)	72.90
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

PAGE 11 / 20

<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)
Voice for Freedom

<p>A. Full Name (Last, First, Middle Initial) Aristotle, Inc.</p> <p>Mailing Address 205 Pennsylvania Ave SE</p> <p>City Washington State DC Zip Code 20003-1164</p> <p>Purpose of Disbursement Transaction Fees Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00121.E308 Date of Disbursement 12 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 2.75</p> <p>TRANSACTION FEES</p>
<p>B. Full Name (Last, First, Middle Initial) Capitol Strategy Group</p> <p>Mailing Address 2814 Spring Rd SE Ste 214A</p> <p>City Atlanta State GA Zip Code 30339-3051</p> <p>Purpose of Disbursement PAC Administration Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 91216.E277 Date of Disbursement 10 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>PAC ADMINISTRATION</p>
<p>C. Full Name (Last, First, Middle Initial) Capitol Strategy Group</p> <p>Mailing Address 2814 Spring Rd SE Ste 214A</p> <p>City Atlanta State GA Zip Code 30339-3051</p> <p>Purpose of Disbursement PAC Administration Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 91216.E295 Date of Disbursement 12 / 04 / 2009</p> <p>Amount of Each Disbursement this Period 559.66</p> <p>PAC ADMINISTRATION</p>

SUBTOTAL of Disbursements This Page (optional) ▶

812.41

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 12 / 20

<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)
Voice for Freedom

A.	Full Name (Last, First, Middle Initial) Professional Data Services, Inc.	Transaction ID: 91216.E278 Date of Disbursement
	Mailing Address 264 N Lumpkin St # 202	<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City Athens State GA Zip Code 30601-2742	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC Compliance Consulting	<input type="text" value="150.00"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAC COMPLIANCE CONSULTING

B.	Full Name (Last, First, Middle Initial) Professional Data Services, Inc.	Transaction ID: 91216.E279 Date of Disbursement
	Mailing Address 264 N Lumpkin St # 202	<input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2009"/>
	City Athens State GA Zip Code 30601-2742	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC Compliance Consulting	<input type="text" value="150.00"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAC COMPLIANCE CONSULTING

C.	Full Name (Last, First, Middle Initial) Professional Data Services, Inc.	Transaction ID: 91216.E294 Date of Disbursement
	Mailing Address 264 N Lumpkin St # 202	<input type="text" value="12"/> / <input type="text" value="04"/> / <input type="text" value="2009"/>
	City Athens State GA Zip Code 30601-2742	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC Compliance Consulting	<input type="text" value="150.00"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAC COMPLIANCE CONSULTING

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="450.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Voice for Freedom

<p>A. Full Name (Last, First, Middle Initial) Andy Harris for Congress</p> <p>Mailing Address PO Box 1527</p> <p>City Annapolis State MD Zip Code 21404-1527</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name ANDREW P HARRIS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 91230.E299</p> <p>Date of Disbursement 12 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>CONTRIBUTION</p>
<p>B. Full Name (Last, First, Middle Initial) Charles Dent for Congress</p> <p>Mailing Address PO Box 442</p> <p>City Allentown State PA Zip Code 18105-</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name CHARLES W DENT</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 15</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 91216.E285</p> <p>Date of Disbursement 10 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>CONTRIBUTION</p>
<p>C. Full Name (Last, First, Middle Initial) Friends of Dave Reichert</p> <p>Mailing Address PO Box 5332</p> <p>City Bellevue State WA Zip Code 98015-</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name DAVE REICHERT</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 08</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 91230.E297</p> <p>Date of Disbursement 12 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>CONTRIBUTION</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>3000.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Voice for Freedom

<p>A. Full Name (Last, First, Middle Initial) Friends of Erik Paulsen</p> <p>Mailing Address PO Box 44369</p> <p>City Eden Prairie State MN Zip Code 55344-1369</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name ERIK PAULSEN</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 03</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 91230.E296</p> <p>Date of Disbursement 12 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>CONTRIBUTION</p>
<p>B. Full Name (Last, First, Middle Initial) Friends of Joe Heck</p> <p>Mailing Address PO Box 750114</p> <p>City Las Vegas State NV Zip Code 89136-0114</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name JOE HECK</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 03</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 91230.E303</p> <p>Date of Disbursement 12 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>CONTRIBUTION</p>
<p>C. Full Name (Last, First, Middle Initial) Lynn Jenkins for Congress</p> <p>Mailing Address PO Box 1441</p> <p>City Topeka State KS Zip Code 66601-1441</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name LYNN JENKINS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 02</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 91216.E284</p> <p>Date of Disbursement 10 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>CONTRIBUTION</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Voice for Freedom

<p>A. Full Name (Last, First, Middle Initial) Mary Bono Mack Committee</p> <p>Mailing Address PO Box 3370</p> <p>City Palm Springs State CA Zip Code 92263-3370</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name MARY BONO</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 45</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 91216.E287</p> <p>Date of Disbursement 10 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>CONTRIBUTION</p>
<p>B. Full Name (Last, First, Middle Initial) National Republican Senatorial Committee</p> <p>Mailing Address 425 2nd St NE</p> <p>City Washington State DC Zip Code 20002-4914</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name NATIONAL REPUBLICAN SENATORIAL COMMITTEE</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 91216.E289</p> <p>Date of Disbursement 10 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 15000.00</p> <p>CONTRIBUTION</p>
<p>C. Full Name (Last, First, Middle Initial) People for Pearce</p> <p>Mailing Address PO Box 2696</p> <p>City Hobbs State NM Zip Code 88241-2696</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 91230.E301</p> <p>Date of Disbursement 12 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>CONTRIBUTION</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>17000.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Voice for Freedom

A.

Full Name (Last, First, Middle Initial)
Robert Hurt for Congress

Transaction ID: 00121.E306
Date of Disbursement

Mailing Address PO Box 2

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

City State Zip Code
Chatham VA 24531-0002

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement

Category/
Type

CONTRIBUTION
CANDIDATE NAME
ROBERT HURT

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: VA District: 05

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
Tom Rooney for Congress

Transaction ID: 91216.E286
Date of Disbursement

Mailing Address 2336 SE Ocean Blvd # 313

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

City State Zip Code
Stuart FL 34996-3319

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement

Category/
Type

CONTRIBUTION
CANDIDATE NAME
THOMAS JOSEPH ROONEY

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: FL District: 16

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
Steve Chabot for Congress

Transaction ID: 91230.E300
Date of Disbursement

Mailing Address 3339 Harrison Ave

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

City State Zip Code
Cincinnati OH 45211-5500

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement

Category/
Type

CONTRIBUTION
CANDIDATE NAME
STEVE CHABOT

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: OH District: 01

CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Voice for Freedom

A.

Full Name (Last, First, Middle Initial)
Steve Fincher for Congress

Transaction ID: 91230.E302
Date of Disbursement

Mailing Address PO Box 11153

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

City Jackson State TN Zip Code 38308-0119

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement

Category/
Type

CONTRIBUTION
CANDIDATE NAME
STEVE FINCHER

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

CONTRIBUTION

State: TN District: 08

B.

Full Name (Last, First, Middle Initial)
Lee Terry for Congress

Transaction ID: 91216.E288
Date of Disbursement

Mailing Address PO Box 540098

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

City Omaha State NE Zip Code 68154-0098

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
CONTRIBUTION

Category/
Type

CANDIDATE NAME
LEE TERRY

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

CONTRIBUTION

State: NE District: 02

C.

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

Transaction ID: 91216.E290
Date of Disbursement

Mailing Address 2931 E Dublin Granville Rd

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

City Columbus State OH Zip Code 43231-2098

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
CONTRIBUTION

Category/
Type

CANDIDATE NAME
PATRICK J TIBERI

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

CONTRIBUTION

State: OH District: 12

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Voice for Freedom

A.

Full Name (Last, First, Middle Initial)
Vaughn Ward for Congress

Transaction ID: 91230.E298

Date of Disbursement

Mailing Address 324 E Stonewater Ct

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

City Eagle State ID Zip Code 83616-3872

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
CONTRIBUTION

Category/
Type

Candidate Name
VAUGHN WARD

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: ID District: 01

CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

3000.00

**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 20 / 20

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

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NAME OF COMMITTEE (In Full)
Voice for Freedom

A.

Full Name (Last, First, Middle Initial)
Barrett for Governor

Transaction ID: 00121.E305

Date of Disbursement

Mailing Address PO Box 287

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

City State Zip Code
Columbia SC 29202-0287

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
CONTRIBUTION

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

1000.00

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

1000.00
