

# 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  
Faith Family Freedom Fund

ADDRESS (number and street) 801 G Street, NW  
 Check if different than previously reported. (ACC)  
Washington DC 20001

2. **FEC IDENTIFICATION NUMBER** C00489625  
**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 04 01 2011 through 04 30 2011

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Paul Tripodi  
Signature of Treasurer Electronically Filed by Paul Tripodi Date 04 19 2011

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)

A. Form/Schedule : **F3XN**  
Transaction ID :

None of the disbursements on line 21b were for coordinated or independent expenditures and none of the disbursements contained express advocacy.

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Faith Family Freedom Fund

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	X	Y	Y	Y	2	0	1	1		50413.00
X	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period .....	54430.00									
(c) Total Receipts (from Line 19) .....	7233.85	26707.71								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	61663.85	77120.71								
7. Total Disbursements (from Line 31) .....	24839.68	40296.54								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	36824.17	36824.17								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
Faith Family Freedom Fund

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	1	1

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) .....	5438.85	13815.71
(ii) Unitemized .....	1795.00	12892.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	7233.85	26707.71
(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) .....	7233.85	26707.71
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)) .....	7233.85	26707.71
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	7233.85	26707.71

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.....	24839.68	28966.54
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	24839.68	28966.54
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	11330.00
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))..	24839.68	40296.54
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	24839.68	40296.54

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) .....	7233.85	26707.71
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	7233.85	26707.71
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	24839.68	28966.54
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	24839.68	28966.54

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

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

FOR LINE NUMBER: PAGE 7 / 22  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

NAME OF COMMITTEE (In Full)  
Faith Family Freedom Fund

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Mary Alice Dunlap  
Mailing Address 12611 Vindon Dr  
City Houston State TX Zip Code 77024-4000  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Gymboree-Houston TX Occupation Asst. Manager  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 04 / 12 / 2011  
Transaction ID: SA11AI.4850  
Amount of Each Receipt this Period 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Family Research Council Action  
Mailing Address 801 G Street, NW  
City Washington State DC Zip Code 20001  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2465.71  
Date of Receipt 04 / 30 / 2011  
Transaction ID: SA11AI.4893  
Amount of Each Receipt this Period 838.85  
In-kind - admin., compliance, fundraising support, website

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Marybeth Hinds  
Mailing Address PO Box 42  
City Clarington State PA Zip Code 15828-0042  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00  
Date of Receipt 04 / 07 / 2011  
Transaction ID: SA11AI.4848  
Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2338.85  
**TOTAL** This Period (last page this line number only) ..... ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 22
	<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)  
Faith Family Freedom Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) Dr. Michael John		Date of Receipt
	Mailing Address 3416 Hickory Rdg		<input type="text" value="04"/> / <input type="text" value="12"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Edmond	OK	73013-8088
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.4845
Name of Employer Info requested per best effort		Occupation Info requested per best efforts	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="350.00"/>
		<input type="text" value="350.00"/>	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mrs. Eunice Logan		Date of Receipt
	Mailing Address 121 Shakers Landing Rd		<input type="text" value="04"/> / <input type="text" value="26"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Harrodsburg	KY	40330-9251
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.4852
Name of Employer None		Occupation Homemaker	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="2000.00"/>
		<input type="text" value="2000.00"/>	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mrs. Kathleen Weld		Date of Receipt
	Mailing Address 29 Main St		<input type="text" value="04"/> / <input type="text" value="04"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Dover	MA	02030-2026
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.4843
Name of Employer self-employed		Occupation piano teacher, homemaker	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="250.00"/>
		<input type="text" value="250.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="2600.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 9 / 22	
	(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"/> 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)  
Faith Family Freedom Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) Mrs. Kathleen Weld		Date of Receipt																					
	Mailing Address 29 Main St		<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>9</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	9		2	0	1	1
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	4		1	9		2	0	1	1														
	City	State	Zip Code		<b>Transaction ID:</b> SA11AI.4846																			
Dover	MA	02030-2026																						
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>		Amount of Each Receipt this Period																				
Name of Employer self-employed		Occupation		<input type="text" value="500.00"/>																				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="750.00"/>																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="5438.85"/>

# 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)  
Faith Family Freedom Fund

<p><b>A.</b> Full Name (Last, First, Middle Initial) Family Research Council Action</p> <p>Mailing Address 801 G Street, NW</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement In-kind - admin., compliance, fundraising support, website</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4894 <b>Date of Disbursement</b> 04 / 30 / 2011</p> <p>Amount of Each Disbursement this Period 838.85</p> <p>001 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Strategic Media Placement Inc.</p> <p>Mailing Address 7669 Stagers Loop</p> <p>City Delaware State OH Zip Code 43015</p> <p>Purpose of Disbursement Radio ad buy</p> <p>Candidate Name CHARLES W REP DENT</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 15</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4897 <b>Date of Disbursement</b> 04 / 01 / 2011</p> <p>Amount of Each Disbursement this Period 1710.00</p> <p>004 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Strategic Media Placement Inc.</p> <p>Mailing Address 7669 Stagers Loop</p> <p>City Delaware State OH Zip Code 43015</p> <p>Purpose of Disbursement Radio ad buy</p> <p>Candidate Name JUDY BIGGERT</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 13</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4898 <b>Date of Disbursement</b> 04 / 01 / 2011</p> <p>Amount of Each Disbursement this Period 980.00</p> <p>004 Category/ Type</p>

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

3528.85

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Faith Family Freedom Fund

A.

Full Name (Last, First, Middle Initial)  
Strategic Media Placement Inc.

Transaction ID: SB21B.4899  
Date of Disbursement

Mailing Address 7669 Stagers Loop

/   /

City Delaware State OH Zip Code 43015

Amount of Each Disbursement this Period

Purpose of Disbursement  
Radio ad buy

Category/  
Type

Candidate Name  
ROBERT JAMES MR JR DOLD

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: IL District: 10

B.

Full Name (Last, First, Middle Initial)  
Strategic Media Placement Inc.

Transaction ID: SB21B.4902  
Date of Disbursement

Mailing Address 7669 Stagers Loop

/   /

City Delaware State OH Zip Code 43015

Amount of Each Disbursement this Period

Purpose of Disbursement  
Radio ad buy

Category/  
Type

Candidate Name  
CHARLES F. BASS

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: NH District: 02

C.

Full Name (Last, First, Middle Initial)  
Strategic Media Placement Inc.

Transaction ID: SB21B.4903  
Date of Disbursement

Mailing Address 7669 Stagers Loop

/   /

City Delaware State OH Zip Code 43015

Amount of Each Disbursement this Period

Purpose of Disbursement  
Radio ad buy

Category/  
Type

Candidate Name  
JIM GERLACH

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: PA District: 06

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Faith Family Freedom Fund

A.	Full Name (Last, First, Middle Initial) Strategic Media Placement Inc.	Transaction ID: SB21B.4904 Date of Disbursement
	Mailing Address 7669 Stagers Loop	<input type="text" value="04"/> / <input type="text" value="01"/> / <input type="text" value="2011"/>
	City Delaware State OH Zip Code 43015	Amount of Each Disbursement this Period
	Purpose of Disbursement Radio ad buy	<input type="text" value="1050.00"/>
	Candidate Name DEAN HELLER	<input type="text" value="004"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Strategic Media Placement Inc.	Transaction ID: SB21B.4905 Date of Disbursement
	Mailing Address 7669 Stagers Loop	<input type="text" value="04"/> / <input type="text" value="01"/> / <input type="text" value="2011"/>
	City Delaware State OH Zip Code 43015	Amount of Each Disbursement this Period
	Purpose of Disbursement Radio ad buy	<input type="text" value="1369.00"/>
	Candidate Name DAVE REICHERT	<input type="text" value="004"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 08	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Strategic Media Placement Inc.	Transaction ID: SB21B.4901 Date of Disbursement
	Mailing Address 7669 Stagers Loop	<input type="text" value="04"/> / <input type="text" value="04"/> / <input type="text" value="2011"/>
	City Delaware State OH Zip Code 43015	Amount of Each Disbursement this Period
	Purpose of Disbursement Radio ad buy	<input type="text" value="1615.00"/>
	Candidate Name MARY BONO MACK	<input type="text" value="004"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 45	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="4034.00"/>
<b>TOTAL</b> 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)

PAGE 13 / 22

<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)  
Faith Family Freedom Fund

A.	Full Name (Last, First, Middle Initial) Strategy Group for Media	Transaction ID: SB21B.4918 Date of Disbursement
	Mailing Address 7669 Stagers Loop	<input type="text" value="04"/> / <input type="text" value="06"/> / <input type="text" value="2011"/>
	City Delaware State OH Zip Code 43015	Amount of Each Disbursement this Period
	Purpose of Disbursement Ad production	<input type="text" value="166.66"/>
	Candidate Name CHARLES W REP DENT	<input type="text" value="004"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 15	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Strategy Group for Media	Transaction ID: SB21B.4919 Date of Disbursement
	Mailing Address 7669 Stagers Loop	<input type="text" value="04"/> / <input type="text" value="06"/> / <input type="text" value="2011"/>
	City Delaware State OH Zip Code 43015	Amount of Each Disbursement this Period
	Purpose of Disbursement Ad production	<input type="text" value="166.66"/>
	Candidate Name JUDY BIGGERT	<input type="text" value="004"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 13	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Strategy Group for Media	Transaction ID: SB21B.4920 Date of Disbursement
	Mailing Address 7669 Stagers Loop	<input type="text" value="04"/> / <input type="text" value="06"/> / <input type="text" value="2011"/>
	City Delaware State OH Zip Code 43015	Amount of Each Disbursement this Period
	Purpose of Disbursement Ad production	<input type="text" value="166.66"/>
	Candidate Name ROBERT JAMES MR JR DOLD	<input type="text" value="004"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="499.98"/>
<b>TOTAL</b> 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 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)  
Faith Family Freedom Fund

<p><b>A.</b> Full Name (Last, First, Middle Initial) Strategy Group for Media</p> <p>Mailing Address 7669 Stagers Loop</p> <p>City Delaware State OH Zip Code 43015</p> <p>Purpose of Disbursement Ad production</p> <p>Candidate Name CHARLES F. BASS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 02</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4921</p> <p>Date of Disbursement 04 / 06 / 2011</p> <p>Amount of Each Disbursement this Period 166.67</p> <p>004 Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Strategy Group for Media</p> <p>Mailing Address 7669 Stagers Loop</p> <p>City Delaware State OH Zip Code 43015</p> <p>Purpose of Disbursement Ad production</p> <p>Candidate Name JIM GERLACH</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 06</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4922</p> <p>Date of Disbursement 04 / 06 / 2011</p> <p>Amount of Each Disbursement this Period 166.66</p> <p>004 Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Strategy Group for Media</p> <p>Mailing Address 7669 Stagers Loop</p> <p>City Delaware State OH Zip Code 43015</p> <p>Purpose of Disbursement Ad production</p> <p>Candidate Name DEAN HELLER</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 00</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4923</p> <p>Date of Disbursement 04 / 06 / 2011</p> <p>Amount of Each Disbursement this Period 166.66</p> <p>004 Category/Type</p>

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

**499.99**

**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"/> 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)  
Faith Family Freedom Fund

<p><b>A.</b> Full Name (Last, First, Middle Initial) Strategy Group for Media</p> <p>Mailing Address 7669 Stagers Loop</p> <p>City Delaware State OH Zip Code 43015</p> <p>Purpose of Disbursement Ad production</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4924</p> <p>Date of Disbursement 04 / 06 / 2011</p> <p>Amount of Each Disbursement this Period 166.66</p> <p>004 Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Strategy Group for Media</p> <p>Mailing Address 7669 Stagers Loop</p> <p>City Delaware State OH Zip Code 43015</p> <p>Purpose of Disbursement Ad production</p> <p>Candidate Name MARY BONO MACK</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4925</p> <p>Date of Disbursement 04 / 06 / 2011</p> <p>Amount of Each Disbursement this Period 166.67</p> <p>004 Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Strategy Group for Media</p> <p>Mailing Address 7669 Stagers Loop</p> <p>City Delaware State OH Zip Code 43015</p> <p>Purpose of Disbursement Ad production</p> <p>Candidate Name SHELLEY MOORE MS. CAPITO</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 02</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4926</p> <p>Date of Disbursement 04 / 06 / 2011</p> <p>Amount of Each Disbursement this Period 166.67</p> <p>004 Category/Type</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Faith Family Freedom Fund

A.	Full Name (Last, First, Middle Initial) Strategy Group for Media	Transaction ID: SB21B.4927 Date of Disbursement
	Mailing Address 7669 Stagers Loop	<input type="text" value="04"/> / <input type="text" value="06"/> / <input type="text" value="2011"/>
	City Delaware State OH Zip Code 43015	Amount of Each Disbursement this Period
	Purpose of Disbursement Ad production	<input type="text" value="166.67"/>
	Candidate Name HENRY R. CUELLAR	<input type="text" value="004"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 28	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Strategy Group for Media	Transaction ID: SB21B.4928 Date of Disbursement
	Mailing Address 7669 Stagers Loop	<input type="text" value="04"/> / <input type="text" value="06"/> / <input type="text" value="2011"/>
	City Delaware State OH Zip Code 43015	Amount of Each Disbursement this Period
	Purpose of Disbursement Ad production	<input type="text" value="166.67"/>
	Candidate Name MARCY C HON. KAPTUR	<input type="text" value="004"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 09	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Strategy Group for Media	Transaction ID: SB21B.4929 Date of Disbursement
	Mailing Address 7669 Stagers Loop	<input type="text" value="04"/> / <input type="text" value="06"/> / <input type="text" value="2011"/>
	City Delaware State OH Zip Code 43015	Amount of Each Disbursement this Period
	Purpose of Disbursement Ad production	<input type="text" value="166.67"/>
	Candidate Name JASON ALTMIRE	<input type="text" value="004"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 04	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="500.01"/>
<b>TOTAL</b> 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 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)  
Faith Family Freedom Fund

A.	Full Name (Last, First, Middle Initial) Strategy Group for Media	Transaction ID: SB21B.4930 Date of Disbursement
	Mailing Address 7669 Stagers Loop	<input type="text" value="04"/> / <input type="text" value="06"/> / <input type="text" value="2011"/>
	City Delaware State OH Zip Code 43015	Amount of Each Disbursement this Period
	Purpose of Disbursement Ad production	<input type="text" value="166.67"/>
	Candidate Name MIKE DOYLE	<input type="text" value="004"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 14	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Strategy Group for Media	Transaction ID: SB21B.4931 Date of Disbursement
	Mailing Address 7669 Stagers Loop	<input type="text" value="04"/> / <input type="text" value="06"/> / <input type="text" value="2011"/>
	City Delaware State OH Zip Code 43015	Amount of Each Disbursement this Period
	Purpose of Disbursement Ad production	<input type="text" value="166.67"/>
	Candidate Name DENNIS CARDOZA	<input type="text" value="004"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 18	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Strategy Group for Media	Transaction ID: SB21B.4932 Date of Disbursement
	Mailing Address 7669 Stagers Loop	<input type="text" value="04"/> / <input type="text" value="06"/> / <input type="text" value="2011"/>
	City Delaware State OH Zip Code 43015	Amount of Each Disbursement this Period
	Purpose of Disbursement Ad production	<input type="text" value="166.67"/>
	Candidate Name JIM MR. COSTA	<input type="text" value="004"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 20	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="500.01"/>
<b>TOTAL</b> 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 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)  
Faith Family Freedom Fund

<p><b>A.</b> Full Name (Last, First, Middle Initial) Strategy Group for Media</p> <p>Mailing Address 7669 Stagers Loop</p> <p>City Delaware State OH Zip Code 43015</p> <p>Purpose of Disbursement Ad production</p> <p>Candidate Name NAN HAYWORTH</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 19</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4933</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="166.67"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Strategy Group for Media</p> <p>Mailing Address 7669 Stagers Loop</p> <p>City Delaware State OH Zip Code 43015</p> <p>Purpose of Disbursement Ad production</p> <p>Candidate Name CHRIS P GIBSON</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4934</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="166.67"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Strategy Group for Media</p> <p>Mailing Address 7669 Stagers Loop</p> <p>City Delaware State OH Zip Code 43015</p> <p>Purpose of Disbursement Ad production</p> <p>Candidate Name RICHARD HANNA</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 24</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4936</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="166.67"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="500.01"/>
<b>TOTAL</b> 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 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)  
Faith Family Freedom Fund

<p><b>A.</b> Full Name (Last, First, Middle Initial) Strategy Group for Media</p> <p>Mailing Address 7669 Stagers Loop</p> <p>City Delaware State OH Zip Code 43015</p> <p>Purpose of Disbursement Radio ad buy</p> <p>Candidate Name RICHARD HANNA</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 24</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4900</p> <p>Date of Disbursement 04 / 28 / 2011</p> <p>Amount of Each Disbursement this Period 1168.20</p> <p>004 Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Strategy Group for Media</p> <p>Mailing Address 7669 Stagers Loop</p> <p>City Delaware State OH Zip Code 43015</p> <p>Purpose of Disbursement Radio ad buy</p> <p>Candidate Name CHARLES F. BASS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 02</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4906</p> <p>Date of Disbursement 04 / 28 / 2011</p> <p>Amount of Each Disbursement this Period 1024.10</p> <p>004 Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Strategy Group for Media</p> <p>Mailing Address 7669 Stagers Loop</p> <p>City Delaware State OH Zip Code 43015</p> <p>Purpose of Disbursement Radio ad buy</p> <p>Candidate Name SHELLEY MOORE MS. CAPITO</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 02</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4907</p> <p>Date of Disbursement 04 / 28 / 2011</p> <p>Amount of Each Disbursement this Period 1017.50</p> <p>004 Category/Type</p>

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

3209.80

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Faith Family Freedom Fund

<p><b>A.</b> Full Name (Last, First, Middle Initial) Strategy Group for Media</p> <p>Mailing Address 7669 Stagers Loop</p> <p>City Delaware State OH Zip Code 43015</p> <p>Purpose of Disbursement Radio ad buy</p> <p>Candidate Name CHRIS P GIBSON</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4908</p> <p>Date of Disbursement 04 / 28 / 2011</p> <p>Amount of Each Disbursement this Period 742.50</p> <p>004 Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Strategy Group for Media</p> <p>Mailing Address 7669 Stagers Loop</p> <p>City Delaware State OH Zip Code 43015</p> <p>Purpose of Disbursement Radio ad buy</p> <p>Candidate Name HENRY R. CUELLAR</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 28</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4909</p> <p>Date of Disbursement 04 / 28 / 2011</p> <p>Amount of Each Disbursement this Period 930.60</p> <p>004 Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Strategy Group for Media</p> <p>Mailing Address 7669 Stagers Loop</p> <p>City Delaware State OH Zip Code 43015</p> <p>Purpose of Disbursement Radio ad buy</p> <p>Candidate Name MARCY C HON. KAPTUR</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 09</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4910</p> <p>Date of Disbursement 04 / 28 / 2011</p> <p>Amount of Each Disbursement this Period 880.00</p> <p>004 Category/Type</p>

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

2553.10

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Faith Family Freedom Fund

<b>A.</b> Full Name (Last, First, Middle Initial) Strategy Group for Media <hr/> Mailing Address 7669 Stagers Loop <hr/> City Delaware State OH Zip Code 43015 <hr/> Purpose of Disbursement Radio ad buy Candidate Name JASON ALTMIRE <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 04 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.4911 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 1 1
	Amount of Each Disbursement this Period 946.00
	Category/ Type 004
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Strategy Group for Media <hr/> Mailing Address 7669 Stagers Loop <hr/> City Delaware State OH Zip Code 43015 <hr/> Purpose of Disbursement Radio ad buy Candidate Name NAN HAYWORTH <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 19 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.4912 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 1 1
	Amount of Each Disbursement this Period 445.50
	Category/ Type 004
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Strategy Group for Media <hr/> Mailing Address 7669 Stagers Loop <hr/> City Delaware State OH Zip Code 43015 <hr/> Purpose of Disbursement Radio ad buy Candidate Name MARY BONO MACK <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 45 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.4913 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 1 1
	Amount of Each Disbursement this Period 1023.00
	Category/ Type 004
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2414.50
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Faith Family Freedom Fund

<p><b>A.</b> Full Name (Last, First, Middle Initial) Strategy Group for Media</p> <p>Mailing Address 7669 Stagers Loop</p> <p>City Delaware State OH Zip Code 43015</p> <p>Purpose of Disbursement Radio ad buy</p> <p>Candidate Name MIKE DOYLE</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 14</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4914</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="759.00"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Strategy Group for Media</p> <p>Mailing Address 7669 Stagers Loop</p> <p>City Delaware State OH Zip Code 43015</p> <p>Purpose of Disbursement Radio ad buy</p> <p>Candidate Name DENNIS CARDOZA</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 18</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4915</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="842.60"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Strategy Group for Media</p> <p>Mailing Address 7669 Stagers Loop</p> <p>City Delaware State OH Zip Code 43015</p> <p>Purpose of Disbursement Radio ad buy</p> <p>Candidate Name JIM MR. COSTA</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 20</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4916</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="1221.00"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2822.60"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="24839.68"/>