

**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

AMERICA'S FOUNDATION

ADDRESS (number and street)

PO Box 434

Suite 300

☐Check if different
than previously
reported. (ACC)

Downtown

PA

19335

2. **FEC IDENTIFICATION NUMBER** ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00305797

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 (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

2010

through

09

30

2010

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

ALEX BARNA

Signature of Treasurer

Electronically Filed by ALEX BARNA

Date

10

15

2010

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

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

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name
AMERICA'S FOUNDATION

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2010	62487.14
(b) Cash on Hand at Beginning of Reporting Period	56305.41	
(c) Total Receipts (from Line 19)	506186.45	1151794.72
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	562491.86	1214281.86
7. Total Disbursements (from Line 31)	483975.46	1135765.46
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	78516.40	78516.40
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

AMERICA'S FOUNDATION

Report Covering the Period:

From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

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)	190007.00	364761.00
(ii) Unitemized	267929.19	701763.97
(iii) TOTAL (add Lines 11(a)(i) and (ii)	457936.19	1066524.97
(b) Political Party Committees	0.00	500.00
(c) Other Political Committees (such as PACs)	0.00	2100.00
(d) Total Contributions (add Lines		
11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	457936.19	1069124.97
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)	14680.77	14680.77
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	33569.49	67988.98
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))	506186.45	1151794.72
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	506186.45	1151794.72

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	473638.46	1098439.46
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	473638.46	1098439.46
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	31000.00
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	337.00	826.00
(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))	337.00	826.00
29. Other Disbursements.....	0.00	5500.00
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))..	483975.46	1135765.46
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	483975.46	1135765.46

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)	457936.19	1069124.97
34. Total Contribution Refunds (from Line 28(d))	337.00	826.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	457599.19	1068298.97
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	473638.46	1098439.46
37. Offsets to Operating Expenditures (from Line 15, page 3)	14680.77	14680.77
38. Net Operating Expenditures (subtract Line 37 from Line 36)	458957.69	1083758.69

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

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

FOR LINE NUMBER: PAGE 6 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mr Peham E Adams

Mailing Address 8225 S Bennett Dr

City

Columbia

State

MO

Zip Code

65201-9549

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11AI.41676

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Ms. Helen Ain

Mailing Address 3211 S Ocean Blvd Apt 901

City

Highland Beach

State

FL

Zip Code

33487-2594

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.38040

Amount of Each Receipt this Period

90.00

C.

Full Name (Last, First, Middle Initial)

Ms. Helen Ain

Mailing Address 3211 S Ocean Blvd Apt 901

City

Highland Beach

State

FL

Zip Code

33487-2594

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.38041

Amount of Each Receipt this Period

90.00

SUBTOTAL of Receipts This Page (optional)

680.00

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 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
 AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Mrs. Juanita L. Anderson

Mailing Address 2011 Trippe St

City State Zip Code
 Richland WA 99354-2726

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

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

Transaction ID: SA11AI.46331

Amount of Each Receipt this Period

60.00

B.

Full Name (Last, First, Middle Initial)
 Mrs. Juanita L. Anderson

Mailing Address 2011 Trippe St

City State Zip Code
 Richland WA 99354-2726

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

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

Transaction ID: SA11AI.46332

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)
 Mrs. Juanita L. Anderson

Mailing Address 2011 Trippe St

City State Zip Code
 Richland WA 99354-2726

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

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

Transaction ID: SA11AI.46333

Amount of Each Receipt this Period

60.00

SUBTOTAL of Receipts This Page (optional)

160.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 8 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Mrs. Juanita L. Anderson

Mailing Address 2011 Trippe St

City State Zip Code
 Richland WA 99354-2726

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y
 09 20 2010

Transaction ID: SA11AI.46329

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)
 Mr Kenneth H Anderson

Mailing Address 1040 N 10th St Apt M12

City State Zip Code
 Spearfish SD 57783-2253

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
 08 19 2010

Transaction ID: SA11AI.40798

Amount of Each Receipt this Period

15.00

C.

Full Name (Last, First, Middle Initial)
 Mrs. Thomas W Angerman

Mailing Address 801 15th St

City State Zip Code
 Oakmont PA 15139-1007

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 08 26 2010

Transaction ID: SA11AI.33865

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

565.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 9 / 277

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION**A.**

Full Name (Last, First, Middle Initial)

Mrs Virginia M Archer

Mailing Address 1620 Windswept Dr

City

Saint George

State

UT

Zip Code

84790-4484

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	6	/	2	0	1	0

Transaction ID: SA11AI.43538

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Mary Arimistead

Mailing Address 7113 Cypress Creek Ln

City

Charlotte

State

NC

Zip Code

28210-2468

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: SA11AI.37007

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Myra J. Asplundh

Mailing Address PO Box 11

City

Bryn Athyn

State

PA

Zip Code

19009-0011

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

ret.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: SA11AI.35434

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

650.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 10 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Ms. Erika V Asten

Mailing Address PO Box 924

City

Kimberton

State

PA

Zip Code

19442-0924

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: SA11AI.35893

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Ms. Florence P. Ayochok

Mailing Address 1828 Washington St

City

Auburndale

State

MA

Zip Code

02466-3008

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.00

Date of Receipt

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

Transaction ID: SA11AI.32201

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

Ms. Jeanne Bailey

Mailing Address PO Box 456

City

Pampa

State

TX

Zip Code

79066-0456

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.43099

Amount of Each Receipt this Period

52.00

SUBTOTAL of Receipts This Page (optional)

137.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 11 / 277

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION**A.**Full Name (Last, First, Middle Initial)
Ms. Jeanne Bailey

Mailing Address PO Box 456

City	State	Zip Code
Pampa	TX	79066-0456

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	3		2	0	1	0

Transaction ID: SA11AI.43100

Amount of Each Receipt this Period

90.00

B.Full Name (Last, First, Middle Initial)
Miss Earline H Bates

Mailing Address 415 Ruby Forest Pkwy

City	State	Zip Code
Suwanee	GA	30024-3926

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11AI.37338

Amount of Each Receipt this Period

100.00

C.Full Name (Last, First, Middle Initial)
Mr Bernard K Baumgardner

Mailing Address 4613 Fairmont Dr

City	State	Zip Code
Troy	MI	48085-5035

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	3		2	0	1	0

Transaction ID: SA11AI.39684

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

390.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 12 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mr Bernard K Baumgardner

Mailing Address 4613 Fairmont Dr

City

State

Zip Code

Troy

MI

48085-5035

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

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

Transaction ID: SA11AI.39683

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

John R. Beard

Mailing Address 7014 Madelynne Way

City

State

Zip Code

Anchorage

AK

99504-4554

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.46341

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Mrs. Helen M. Beben

Mailing Address 73 Albemarle Rd

City

State

Zip Code

Colonia

NJ

07067-1204

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

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

Transaction ID: SA11AI.32575

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Dr. Gerald G Beck

Mailing Address 545 N Catherine Ave

City

La Grange Park

State

IL

Zip Code

60526-5532

FEC ID number of contributing
federal political committee.

C

Name of Employer
H.D.A.I.

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
0 8 / 2 4 / 2 0 1 0

Transaction ID: SA11AI.41157

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

Mr. John L. Beck

Mailing Address 11748 N 80th PI

City

Scottsdale

State

AZ

Zip Code

85260-5648

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 ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.43615

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Mr. George J Beisel

Mailing Address 9205 Wesleyan Rd

City

Philadelphia

State

PA

Zip Code

19114-3814

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.35673

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

290.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 14 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mr. George J Beisel

Mailing Address 9205 Wesleyan Rd

City

Philadelphia

State

PA

Zip Code

19114-3814

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

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

Transaction ID: SA11AI.35674

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

Mr. George J Beisel

Mailing Address 9205 Wesleyan Rd

City

Philadelphia

State

PA

Zip Code

19114-3814

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

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

Transaction ID: SA11AI.35675

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

Mrs. Martha M. Berent

Mailing Address 64 Marilyn Dr

City

Buffalo

State

NY

Zip Code

14225-1925

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: SA11AI.33666

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 15 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
Mrs. Martha M. Berent

Mailing Address 64 Marilyn Dr

City State Zip Code
Buffalo NY 14225-1925

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

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

Transaction ID: SA11AI.33667

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)
Mr George Bermant

Mailing Address 2023 E 3rd Ave

City State Zip Code
Denver CO 80206-4604

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.43257

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
Mr George Bermant

Mailing Address 2023 E 3rd Ave

City State Zip Code
Denver CO 80206-4604

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.43256

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

190.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 16 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mrs. Ruth S. S Biel

Mailing Address 16562 Brigadoon Dr

City

Tampa

State

FL

Zip Code

33618-1027

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.66

Date of Receipt

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

Transaction ID: SA11AI.38095

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

Mr Thomas P Bigwood

Mailing Address 7498 Ida Way

City

Canal Winchester

State

OH

Zip Code

43110-1335

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Ret

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

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

Transaction ID: SA11AI.38983

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Mrs. June M Bills

Mailing Address 460 Lipan Way

City

Boulder

State

CO

Zip Code

80303-3639

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Ret

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.43303

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

425.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 17 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mrs Carolyn Bindon

Mailing Address 45702 Balfour Ct

City

Novi

State

MI

Zip Code

48377-3902

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.39831

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Miss Marion L Birkhimer

Mailing Address 275 NE 42nd St

City

Ocala

State

FL

Zip Code

34479-2300

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.38358

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mr Guenther Bizer

Mailing Address 1590 Mountain View Dr

City

Bayfield

State

CO

Zip Code

81122-9656

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

ret.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.43378

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

1200.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 18 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mr Guenther Bizer

Mailing Address 1590 Mountain View Dr

City

Bayfield

State

CO

Zip Code

81122-9656

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
ret.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

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

Transaction ID: SA11AI.43377

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

Ms Nadine E. Bognar

Mailing Address 742 Pinoak Rd

City

Pittsburgh

State

PA

Zip Code

15243-1153

FEC ID number of contributing
federal political committee.

C

Name of Employer
Bognar & Co.

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.34028

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Dr. Syed Raza Bokhari

Mailing Address 437 N Spring Mill Rd

City

Villanova

State

PA

Zip Code

19085-1925

FEC ID number of contributing
federal political committee.

C

Name of Employer
Parkway Clinical Laborato-
ries

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11AI.35627

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

6150.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 19 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mr. Gary D Bond

Mailing Address 1600 Two Bridge Dr

City

Oklahoma City

State

OK

Zip Code

73131-1807

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kidney Specialist Of Cent-
ral OK

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
0 8 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.42306

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

Ms. Ethel G Bonner

Mailing Address 1224 Village Creek Ln Apt P4

City

Mount Pleasant

State

SC

Zip Code

29464-3162

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: SA11AI.37202

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Mr. James R Boughton

Mailing Address 216 S Bayshore Dr

City

Columbiana

State

OH

Zip Code

44408-9343

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ses Llc

Occupation
Ceo

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11AI.39168

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

800.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Robert L Bradley

Mailing Address 2200 Willowick Rd Unit 14C

City

Houston

State

TX

Zip Code

77027-3982

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: SA11AI.42670

Amount of Each Receipt this Period

2000.00

B.

Full Name (Last, First, Middle Initial)

Mrs Anne H Bratcher

Mailing Address 4942 Normandy Ln

City

Memphis

State

TN

Zip Code

38117-2702

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.38732

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

Mr. Edward DeVeaux Breen

Mailing Address 180 Street Rd

City

New Hope

State

PA

Zip Code

18938-9207

FEC ID number of contributing
federal political committee.

C

Name of Employer

Tyco International

Occupation

CEO

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.35326

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

7075.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 21 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mr John P. Breen

Mailing Address 3112 Gracefield Rd Apt 505

City

Silver Spring

State

MD

Zip Code

20904-1897

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: SA11AI.36250

Amount of Each Receipt this Period

113.00

B.

Full Name (Last, First, Middle Initial)

Mr John P. Breen

Mailing Address 3112 Gracefield Rd Apt 505

City

Silver Spring

State

MD

Zip Code

20904-1897

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 6 / 2 0 1 0

Transaction ID: SA11AI.36251

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mrs. Mary D Breeze

Mailing Address 3022 Fairfield St

City

Philadelphia

State

PA

Zip Code

19136-1120

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

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

Transaction ID: SA11AI.35698

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

173.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 22 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Col. Darwin L Brendinger, USAF

Mailing Address 205 W Fairview Ave

City

Langhorne

State

PA

Zip Code

19047-3939

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
ret.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 19 / 2010

Transaction ID: SA11AI.35541

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

Mrs. Jane A Brennand

Mailing Address 311 W Nottingham Apt 324

City

San Antonio

State

TX

Zip Code

78209-1828

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 16 / 2010

Transaction ID: SA11AI.42898

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Dr Dean Breshears

Mailing Address 7104 County Road 108

City

Fulton

State

MO

Zip Code

65251-5537

FEC ID number of contributing
federal political committee.

C

Name of Employer
Capital Enery Phys

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 28 / 2010

Transaction ID: SA11AI.41679

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

625.00

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
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FOR LINE NUMBER: PAGE 23 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mrs Kathryn M. Brown

Mailing Address PO Box 815

City

Lake City

State

SC

Zip Code

29560-0815

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

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

Transaction ID: SA11AI.37226

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

Mr. Kenneth W Brown

Mailing Address 828 Van Buren St

City

Herndon

State

VA

Zip Code

20170-4651

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.36115

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

Ms Elizabeth D Bruce

Mailing Address 520 White Rd

City

Opelika

State

AL

Zip Code

36801-3415

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

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

Transaction ID: SA11AI.38598

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

435.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Ms Elizabeth D Bruce

Mailing Address 520 White Rd

City

Opelika

State

AL

Zip Code

36801-3415

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

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

Transaction ID: SA11AI.38599

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Ms Elizabeth Bryden

Mailing Address 1 W 67th St Apt 611

City

New York

State

NY

Zip Code

10023-6200

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.33031

Amount of Each Receipt this Period

82.00

C.

Full Name (Last, First, Middle Initial)

Ms Elizabeth Bryden

Mailing Address 1 W 67th St Apt 611

City

New York

State

NY

Zip Code

10023-6200

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

465.00

Date of Receipt

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

Transaction ID: SA11AI.33032

Amount of Each Receipt this Period

164.00

SUBTOTAL of Receipts This Page (optional)

746.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 25 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Ms. Clara Bufkin

Mailing Address 817 W Glenwood Ter

City

Fullerton

State

CA

Zip Code

92832-1021

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: SA11AI.44893

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

Mr. John Bunton

Mailing Address 780 Mountain Rd

City

Parsonsfield

State

ME

Zip Code

04047-6821

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

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

Transaction ID: SA11AI.32337

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Mr Eugene Burns

Mailing Address 4500 Foothill Rd

City

Carpinteria

State

CA

Zip Code

93013-3016

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

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

Transaction ID: SA11AI.44964

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Dr. Orlando G Cabrera, MD

Mailing Address 1865 Brickell Ave Apt 2003

City

Miami

State

FL

Zip Code

33129-1621

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

M.D.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

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

Transaction ID: SA11AI.37914

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

Dr. Orlando G Cabrera, MD

Mailing Address 1865 Brickell Ave Apt 2003

City

Miami

State

FL

Zip Code

33129-1621

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

M.D.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

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

Transaction ID: SA11AI.37916

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

Dr. Orlando G Cabrera, MD

Mailing Address 1865 Brickell Ave Apt 2003

City

Miami

State

FL

Zip Code

33129-1621

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

M.D.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

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

Transaction ID: SA11AI.37913

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

105.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 27 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mr. Walter W Callahan

Mailing Address 109 El Dr

City

Taylor

State

PA

Zip Code

18517-1003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: SA11AI.35233

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Mr. Walter W Callahan

Mailing Address 109 El Dr

City

Taylor

State

PA

Zip Code

18517-1003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

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

Transaction ID: SA11AI.35234

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

Mr. Domenick Canale

Mailing Address 125 Hillview Ave

City

Yonkers

State

NY

Zip Code

10704-3545

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.33132

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

375.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Dr. Craig G Cantrell

Mailing Address 124 Fair Oaks Cir

City

Gadsden

State

AL

Zip Code

35901-5414

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

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

Transaction ID: SA11AI.38515

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

James W Casey

Mailing Address 347 Old Shennandale Rd

City

Charles Town

State

WV

Zip Code

25414-4783

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: SA11AI.36779

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

Ms. Marian Castro

Mailing Address 4291 Arista St

City

San Diego

State

CA

Zip Code

92103-1055

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.44559

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Ms Rebecca Cates

Mailing Address PO Box 632

City State Zip Code
 Cle Elum WA 98922-0632

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Expeditors International

Occupation
 Accountant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11AI.46277

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)
 Mr. James Francis. Causley, Jr

Mailing Address 3333 Gulf Shore Blvd N # 10

City State Zip Code
 Naples FL 34103-3686

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.38238

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)
 Mrs. Rose Ann Cavanaugh

Mailing Address 13712 Crossing Way E

City State Zip Code
 Edmond OK 73013-4724

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

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

Transaction ID: SA11AI.42251

Amount of Each Receipt this Period

51.00

SUBTOTAL of Receipts This Page (optional)

1051.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 30 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Mr. Charles R Caylor

Mailing Address 1435 E Ireland Rd

City State Zip Code
 South Bend IN 46614-3453

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.39525

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
 Mr. Charles R Caylor

Mailing Address 1435 E Ireland Rd

City State Zip Code
 South Bend IN 46614-3453

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: SA11AI.39526

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
 Nirmal Chatterjee

Mailing Address 2324 Willow Drop Way

City State Zip Code
 Oviedo FL 32766-7082

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Air Products & Chemicals

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11AI.37800

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1200.00

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
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FOR LINE NUMBER: PAGE 31 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Mr. Ray R Christensen

Mailing Address 992 Oak Hills Way

City State Zip Code
 Salt Lake City UT 84108-2022

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: SA11AI.43496

Amount of Each Receipt this Period

125.00

B.

Full Name (Last, First, Middle Initial)
 Mr. Ray R Christensen

Mailing Address 992 Oak Hills Way

City State Zip Code
 Salt Lake City UT 84108-2022

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

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

Transaction ID: SA11AI.43501

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
 Mrs. Geraldine L Cleaveland

Mailing Address 12340 Linshan Dr

City State Zip Code
 North Huntingdon PA 15642-2806

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.34126

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

325.00

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mrs. Geraldine L Cleaveland

Mailing Address 12340 Linshan Dr

City

North Huntingdon

State

PA

Zip Code

15642-2806

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 21 / 2010

Transaction ID: SA11AI.34127

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Mr. James E. Cloud

Mailing Address 700 Delaney Way

City

Versailles

State

KY

Zip Code

40383-8976

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 21 / 2010

Transaction ID: SA11AI.38885

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Ms. Bertie J. Clowers

Mailing Address 510 Forsyth Ln Unit 309

City

Edmonds

State

WA

Zip Code

98020-4050

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 17 / 2010

Transaction ID: SA11AI.46043

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

235.00

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Ms. Eleanor Cobb

Mailing Address 131 S Vista St

City State Zip Code
Los Angeles CA 90036-2707

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 7 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.44051

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)
 Ms. Rhoda W. Cobb

Mailing Address 7 Stuyvesant Rd

City State Zip Code
Asheville NC 28803-3022

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 7 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.37141

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)
 Mrs. Margie Cockrill

Mailing Address 20081 Tellurium Dr

City State Zip Code
Pine Grove CA 95665-9791

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Information Requested

Occupation
 Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 7 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.45584

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Rev. John Conte

Mailing Address 1325 Prospect Ave

City

Bethlehem

State

PA

Zip Code

18018-4916

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Clergy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

601.00

Date of Receipt

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

Transaction ID: SA11AI.35077

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Rev. John Conte

Mailing Address 1325 Prospect Ave

City

Bethlehem

State

PA

Zip Code

18018-4916

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Clergy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

702.00

Date of Receipt

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

Transaction ID: SA11AI.35078

Amount of Each Receipt this Period

101.00

C.

Full Name (Last, First, Middle Initial)

Rev. John Conte

Mailing Address 1325 Prospect Ave

City

Bethlehem

State

PA

Zip Code

18018-4916

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Clergy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

803.00

Date of Receipt

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

Transaction ID: SA11AI.35076

Amount of Each Receipt this Period

101.00

SUBTOTAL of Receipts This Page (optional)

302.00

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 David John Conway

Mailing Address PO Box 173

City State Zip Code
 Georgetown DE 19947-0173

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.00

Date of Receipt

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

Transaction ID: SA11AI.36063

Amount of Each Receipt this Period

101.00

B.

Full Name (Last, First, Middle Initial)
 David John Conway

Mailing Address PO Box 173

City State Zip Code
 Georgetown DE 19947-0173

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

606.00

Date of Receipt

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

Transaction ID: SA11AI.36064

Amount of Each Receipt this Period

101.00

C.

Full Name (Last, First, Middle Initial)
 David John Conway

Mailing Address PO Box 173

City State Zip Code
 Georgetown DE 19947-0173

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

707.00

Date of Receipt

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

Transaction ID: SA11AI.36065

Amount of Each Receipt this Period

101.00

SUBTOTAL of Receipts This Page (optional)

303.00

TOTAL This Period (last page this line number only)

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mr. Thomas A Cook, Jr.

Mailing Address 4591 Sanderling Cir W

City

Boynnton Beach

State

FL

Zip Code

33436-5145

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.38005

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

Ms Margaret L. Coppinger

Mailing Address 1750 W State Highway 46 Apt 504

City

New Braunfels

State

TX

Zip Code

78132-4784

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

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

Transaction ID: SA11AI.42892

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Mr. Jack W. Coskey

Mailing Address 11685 Hazelgreen Rd NE

City

Silverton

State

OR

Zip Code

97381-9610

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.45925

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

475.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mr. Wilfred A Costa

Mailing Address 1114 Avon Ave

City

San Leandro

State

CA

Zip Code

94579-1443

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
ret.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.45391

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Mr. Robert C. Cowen

Mailing Address 2756 Indian Springs Rd

City

Marianna

State

FL

Zip Code

32446-6889

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11AI.37731

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Mr. Robert C. Cowen

Mailing Address 2756 Indian Springs Rd

City

Marianna

State

FL

Zip Code

32446-6889

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: SA11AI.37730

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

325.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mr. Robert C. Cowen

Mailing Address 2756 Indian Springs Rd

City

Marianna

State

FL

Zip Code

32446-6889

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 02 / 2010

Transaction ID: SA11AI.37728

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Mr. Robert C. Cowen

Mailing Address 2756 Indian Springs Rd

City

Marianna

State

FL

Zip Code

32446-6889

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 28 / 2010

Transaction ID: SA11AI.37729

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

Mr. George Cox

Mailing Address 6690 Maple Ridge Ln

City

Blanchard

State

OK

Zip Code

73010-2904

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 20 / 2010

Transaction ID: SA11AI.42244

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

800.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Ms. Wanda Crawley

Mailing Address 708 Joseph Ln

City

Herrin

State

IL

Zip Code

62948-4044

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

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

Transaction ID: SA11AI.41435

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

Ms. Wanda Crawley

Mailing Address 708 Joseph Ln

City

Herrin

State

IL

Zip Code

62948-4044

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

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

Transaction ID: SA11AI.41438

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

Ms. Wanda Crawley

Mailing Address 708 Joseph Ln

City

Herrin

State

IL

Zip Code

62948-4044

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

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

Transaction ID: SA11AI.41436

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

190.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
Ms. Wanda Crawley

Mailing Address 708 Joseph Ln

City State Zip Code
Herrin IL 62948-4044

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

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

Transaction ID: SA11AI.41434

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
Mr. & Mrs. William Critchfield

Mailing Address 21914 Evalyn Ave

City State Zip Code
Torrance CA 90503-6953

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.44159

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)
Ms. Eunice P. Crosby

Mailing Address PO Box 253

City State Zip Code
Lyle WA 98635-0006

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
ret.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: SA11AI.46222

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

285.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Miss Marion L Cubberley

Mailing Address 4302 Monroe Vlg

City

Monroe Township

State

NJ

Zip Code

08831-1938

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.32984

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Mr. John Curtis

Mailing Address 17 Crystal St

City

Melrose

State

MA

Zip Code

02176-2705

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11AI.32175

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

Mr. John Curtis

Mailing Address 17 Crystal St

City

Melrose

State

MA

Zip Code

02176-2705

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: SA11AI.32176

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
Carmine J Darcangelo

Mailing Address **142 Fuller Ave**

City State Zip Code
Corning NY 14830-1317

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

09 / 17 / 2010

Transaction ID: SA11AI.33731

Amount of Each Receipt this Period

600.00

B.

Full Name (Last, First, Middle Initial)
Mr. John S Davis

Mailing Address **1725 Roosevelt Ave**

City State Zip Code
Altadena CA 91001-3618

FEC ID number of contributing
federal political committee.

C

Name of Employer
Los Angeles Covent Health-care

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

08 / 17 / 2010

Transaction ID: SA11AI.44248

Amount of Each Receipt this Period

400.00

C.

Full Name (Last, First, Middle Initial)
Ms Marjorie Davis

Mailing Address **6 Huckleberry Ln**

City State Zip Code
Augusta ME 04330-6022

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

07 / 20 / 2010

Transaction ID: SA11AI.32344

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Dr. William L. Davis, M. D.

Mailing Address 3204 Saint Andrews Dr

City State Zip Code
Chambersburg PA 17202-7001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y
09 17 2010

Transaction ID: SA11AI.34681

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)
 Ruthann Demeter

Mailing Address 16838 Bollinger Dr

City State Zip Code
Pacific Palisades CA 90272-3239

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Self

Occupation
 Paralegal

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y
08 19 2010

Transaction ID: SA11AI.44106

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)
 Mrs Maleva T. DePalma

Mailing Address 937 Mackall Ave

City State Zip Code
Mc Lean VA 22101-1617

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
07 02 2010

Transaction ID: SA11AI.36469

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

525.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mrs Maleva T. DePalma

Mailing Address 937 Mackall Ave

City

Mc Lean

State

VA

Zip Code

22101-1617

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.36471

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Mrs Maleva T. DePalma

Mailing Address 937 Mackall Ave

City

Mc Lean

State

VA

Zip Code

22101-1617

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 6 / 2 0 1 0

Transaction ID: SA11AI.36472

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Mrs Maleva T. DePalma

Mailing Address 937 Mackall Ave

City

Mc Lean

State

VA

Zip Code

22101-1617

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

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

Transaction ID: SA11AI.36470

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

70.00

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 45 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mrs Maleva T. DePalma

Mailing Address 937 Mackall Ave

City

Mc Lean

State

VA

Zip Code

22101-1617

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.36473

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Mr. Frank Deverse

Mailing Address PO Box 484

City

Glenbrook

State

NV

Zip Code

89413-0484

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.43982

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Mrs Josephine B. Diaz

Mailing Address 2611 Delco Ave

City

El Monte

State

CA

Zip Code

91733-2230

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

615.00

Date of Receipt

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

Transaction ID: SA11AI.44394

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

725.00

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 46 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mrs Josephine B. Diaz

Mailing Address 2611 Delco Ave

City

El Monte

State

CA

Zip Code

91733-2230

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

865.00

Date of Receipt

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

Transaction ID: SA11AI.44393

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Ms. Martha A. Dickerson

Mailing Address 3555 NE 86th St

City

Seattle

State

WA

Zip Code

98115-3635

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11AI.46072

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

Mr. Jonathan C Dill

Mailing Address 9936 N Lamplighter Ln

City

Mequon

State

WI

Zip Code

53092-5345

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

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

Transaction ID: SA11AI.40247

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 47 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Mr. Jonathan C Dill

Mailing Address 9936 N Lamplighter Ln

City State Zip Code
 Mequon WI 53092-5345

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.38261

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)
 Mr. Jonathan C Dill

Mailing Address 9936 N Lamplighter Ln

City State Zip Code
 Mequon WI 53092-5345

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

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

Transaction ID: SA11AI.40245

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)
 Mr. Jonathan C Dill

Mailing Address 9936 N Lamplighter Ln

City State Zip Code
 Mequon WI 53092-5345

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

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

Transaction ID: SA11AI.40246

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

275.00

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 48 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
Mr. Jonathan C Dill

Mailing Address 9936 N Lamplighter Ln

City State Zip Code
Mequon WI 53092-5345

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

737.00

Date of Receipt

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

Transaction ID: SA11AI.38260

Amount of Each Receipt this Period

187.00

B.

Full Name (Last, First, Middle Initial)
Mrs. Jeanne Marie Donley

Mailing Address 518 W Frederick St

City State Zip Code
Lancaster PA 17603-2807

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

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

Transaction ID: SA11AI.34966

Amount of Each Receipt this Period

15.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Kathryn A. Donnelly

Mailing Address 2059 White Horse Rd

City State Zip Code
Berwyn PA 19312-2127

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.35748

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

452.00

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 49 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mr. Gaylord G. Dowd

Mailing Address 269 Starmount Dr

City

Tallahassee

State

FL

Zip Code

32303-4218

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.37707

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Robert T. Dry

Mailing Address 8030 Frankford Rd Apt 401

City

Dallas

State

TX

Zip Code

75252-6843

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: SA11AI.42488

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

Mr. Stephen M. Dubrul, Jr.

Mailing Address 610 5th Ave

City

New York

State

NY

Zip Code

10020-2403

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.33026

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 50 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mr Cyril D Duffy

Mailing Address 1252 Shipman Blvd

City

Birmingham

State

MI

Zip Code

48009-4139

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

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

Transaction ID: SA11AI.39651

Amount of Each Receipt this Period

400.00

B.

Full Name (Last, First, Middle Initial)

Charleen H Duke

Mailing Address 300 Hill St

City

San Francisco

State

CA

Zip Code

94114-2960

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.00

Date of Receipt

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

Transaction ID: SA11AI.45263

Amount of Each Receipt this Period

198.00

C.

Full Name (Last, First, Middle Initial)

Ms Martha Dunn, MD

Mailing Address 320 Kings Mountain Rd

City

Woodside

State

CA

Zip Code

94062-3618

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.45237

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

848.00

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 51 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION**A.**

Full Name (Last, First, Middle Initial)

Mr Richard Dunn

Mailing Address 530 Junipero Serra Blvd

City

San Francisco

State

CA

Zip Code

94127-2727

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	1	0

Transaction ID: SA11AI.45278

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Mr. Joseph M. Dwyer

Mailing Address 496 Pennsylvania Ave

City

Williston Park

State

NY

Zip Code

11596-2331

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

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

Transaction ID: SA11AI.33320

Amount of Each Receipt this Period

51.00

C.

Full Name (Last, First, Middle Initial)

Ms Sally Dyckman

Mailing Address 40 Old Lancaster Rd Apt 514

City

Merion Station

State

PA

Zip Code

19066-1767

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.35575

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

151.00

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 52 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION**A.**Full Name (Last, First, Middle Initial)
Mrs. Diane R Ebert

Mailing Address 95 Ash St

City	State	Zip Code
Cressona	PA	17929-1325

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-EmployedOccupation
General Partner Insurance Agen

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

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

Transaction ID: SA11AI.35051

Amount of Each Receipt this Period

250.00

B.Full Name (Last, First, Middle Initial)
Mr. William R. England

Mailing Address 302 Shultz Rd

City	State	Zip Code
Williamsburg	PA	16693-7212

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-EmployedOccupation
Dairy Farm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.34463

Amount of Each Receipt this Period

150.00

C.Full Name (Last, First, Middle Initial)
Mr. William R. England

Mailing Address 302 Shultz Rd

City	State	Zip Code
Williamsburg	PA	16693-7212

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-EmployedOccupation
Dairy Farm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: SA11AI.34464

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

550.00

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 53 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Mrs Marjorie Ernsland

Mailing Address 2100 NE 140th St Apt 203D

City State Zip Code
 Edmond OK 73013-5527

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: SA11AI.42252

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
 Mrs Marjorie Ernsland

Mailing Address 2100 NE 140th St Apt 203D

City State Zip Code
 Edmond OK 73013-5527

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

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

Transaction ID: SA11AI.42253

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
 Ms. Mary H. Fallon

Mailing Address 3 Ocean Dr

City State Zip Code
 Seabrook NH 03874-5102

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 2 6 / 2 0 1 0

Transaction ID: SA11AI.32333

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

325.00

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 54 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Ms Helen E Farson

Mailing Address 801 W Commonwealth Ave Apt 22

City

Alhambra

State

CA

Zip Code

91801-3657

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

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

Transaction ID: SA11AI.44429

Amount of Each Receipt this Period

52.00

B.

Full Name (Last, First, Middle Initial)

Ms Helen E Farson

Mailing Address 801 W Commonwealth Ave Apt 22

City

Alhambra

State

CA

Zip Code

91801-3657

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.00

Date of Receipt

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

Transaction ID: SA11AI.44432

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

Dr. Frank G. Fielder

Mailing Address 2384 County Road 10

City

Alpine

State

NY

Zip Code

14805-9710

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired Veterinarian

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.33727

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

337.00

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 55 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION**A.**

Full Name (Last, First, Middle Initial)

Mr. Joe B. Finley, Jr.

Mailing Address PO Box 9

City

Encinal

State

TX

Zip Code

78019-0009

FEC ID number of contributing
federal political committee.

C

Name of Employer
Callaghan Ranch LtdOccupation
Livestock Rancher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4500.00

Date of Receipt

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

Transaction ID: SA11AI.42872

Amount of Each Receipt this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

Richard E. Fister

Mailing Address 24 Eastern Ave

City

Elsmere

State

KY

Zip Code

41018-1918

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: SA11AI.38907

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

Ms Carlene Fitterer

Mailing Address 1423 N 20th St Apt 14

City

Bismarck

State

ND

Zip Code

58501-2918

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

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

Transaction ID: SA11AI.40824

Amount of Each Receipt this Period

39.00

SUBTOTAL of Receipts This Page (optional)

2739.00

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 56 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Mr Charles D Flack, Jr.

Mailing Address 280 Huntsville Rd

City State Zip Code
 Dallas PA 18612-8612

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Diamond Mfg. Co.

Occupation
 Mfg Exec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.35245

Amount of Each Receipt this Period

2000.00

B.

Full Name (Last, First, Middle Initial)
 Mr Guy Flickinger

Mailing Address 11521 23rd Ave S

City State Zip Code
 Burnsville MN 55337-1257

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Midwest Veterinary Supply

Occupation
 President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.40575

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)
 Mrs. Antoinette Forand

Mailing Address 14 Old Mill Dr

City State Zip Code
 Denville NJ 07834-9511

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: SA11AI.32733

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

3100.00

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 57 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
Mrs. Antoinette Forand

Mailing Address 14 Old Mill Dr

City State Zip Code
Denville NJ 07834-9511

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

665.00

Date of Receipt

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

Transaction ID: SA11AI.32732

Amount of Each Receipt this Period

65.00

B.

Full Name (Last, First, Middle Initial)
Mrs. Antoinette Forand

Mailing Address 14 Old Mill Dr

City State Zip Code
Denville NJ 07834-9511

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

765.00

Date of Receipt

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

Transaction ID: SA11AI.32734

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
Ms. Kathleen B. Forcey

Mailing Address 2508 Center Cir

City State Zip Code
Clearfield PA 16830-3513

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.34500

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

265.00

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 58 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
 AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mr. Patrick Franje

Mailing Address 424 College Hill Ave

City

Oskaloosa

State

IA

Zip Code

52577-1721

FEC ID number of contributing
federal political committee.

C

Name of Employer
Regional Care

Occupation
Social Work

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: SA11AI.40187

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Mr. Patrick Franje

Mailing Address 424 College Hill Ave

City

Oskaloosa

State

IA

Zip Code

52577-1721

FEC ID number of contributing
federal political committee.

C

Name of Employer
Regional Care

Occupation
Social Work

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

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

Transaction ID: SA11AI.40186

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mr. Patrick Franje

Mailing Address 424 College Hill Ave

City

Oskaloosa

State

IA

Zip Code

52577-1721

FEC ID number of contributing
federal political committee.

C

Name of Employer
Regional Care

Occupation
Social Work

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.40185

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

350.00

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 59 / 277

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION**A.**

Full Name (Last, First, Middle Initial)

Mr. Patrick Franje

Mailing Address 424 College Hill Ave

City

Oskaloosa

State

IA

Zip Code

52577-1721

FEC ID number of contributing
federal political committee.

C

Name of Employer
Regional CareOccupation
Social Work

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

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

Transaction ID: SA11AI.40188

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Mr. William P Franklin

Mailing Address 910 Cherry Springs Rd
PO Box 127

City

Coudersport

State

PA

Zip Code

16915-8323

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Oil & Gas Landman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.34511

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Josephine W Freede

Mailing Address 316 NW 39th St

City

Oklahoma City

State

OK

Zip Code

73118-8414

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	6	/	2	0	1	0

Transaction ID: SA11AI.42300

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

800.00

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 60 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
Mrs. Orval D. Friedrich

Mailing Address 217 Grove St

City State Zip Code
Elma IA 50628-8021

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

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

Transaction ID: SA11AI.40112

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
Ms. Elaine M Gadway

Mailing Address 215 Elm St Apt 7H

City State Zip Code
Malone NY 12953-1529

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: SA11AI.33555

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)
Ms. Elaine M Gadway

Mailing Address 215 Elm St Apt 7H

City State Zip Code
Malone NY 12953-1529

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

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

Transaction ID: SA11AI.33554

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 61 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mr John P. Galbraith

Mailing Address 500 Crestwood Dr

City

Charlottesville

State

VA

Zip Code

22903-4890

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1900.00

Date of Receipt

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

Transaction ID: SA11AI.36596

Amount of Each Receipt this Period

1900.00

B.

Full Name (Last, First, Middle Initial)

Rosemary P. Galbraith

Mailing Address 500 Crestwood Dr
University Village

City

Charlottesville

State

VA

Zip Code

22903-4890

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1900.00

Date of Receipt

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

Transaction ID: SA11AI.36598

Amount of Each Receipt this Period

1900.00

C.

Full Name (Last, First, Middle Initial)

Mr. Robert Garbarino

Mailing Address 200 Industrial Dr

City

Butner

State

NC

Zip Code

27509-2500

FEC ID number of contributing
federal political committee.

C

Name of Employer
BFS Industries, LLC

Occupation

Exec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.36887

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

3850.00

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 62 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mrs. Helen W. Garrett

Mailing Address 306 Old Oak Rd

City

Richmond

State

VA

Zip Code

23229-7536

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.36648

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Dr. Betty Lee Garver

Mailing Address 154 N Bellefield Ave Apt 95

City

Pittsburgh

State

PA

Zip Code

15213-2691

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.33923

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

Dr. Betty Lee Garver

Mailing Address 154 N Bellefield Ave Apt 95

City

Pittsburgh

State

PA

Zip Code

15213-2691

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

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

Transaction ID: SA11AI.33922

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

850.00

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 63 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION**A.**Full Name (Last, First, Middle Initial)
Dr. Donald H. Gaylor, M.D.

Mailing Address 3761 Devonshire Rd

City	State	Zip Code
Allentown	PA	18103-9628

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.35145

Amount of Each Receipt this Period

250.00

B.Full Name (Last, First, Middle Initial)
Dr. Donald H. Gaylor, M.D.

Mailing Address 3761 Devonshire Rd

City	State	Zip Code
Allentown	PA	18103-9628

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	3	/	2	0	1	0

Transaction ID: SA11AI.35147

Amount of Each Receipt this Period

250.00

C.Full Name (Last, First, Middle Initial)
Dr. Donald H. Gaylor, M.D.

Mailing Address 3761 Devonshire Rd

City	State	Zip Code
Allentown	PA	18103-9628

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

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

Transaction ID: SA11AI.35146

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

525.00

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 64 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
Ms. Ruth Gealy

Mailing Address 1978 690th Rd

City State Zip Code
Gordon NE 69343-4809

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.42006

Amount of Each Receipt this Period

52.00

B.

Full Name (Last, First, Middle Initial)
Ms. Ruth Gealy

Mailing Address 1978 690th Rd

City State Zip Code
Gordon NE 69343-4809

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.00

Date of Receipt

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

Transaction ID: SA11AI.42007

Amount of Each Receipt this Period

52.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Mary E. Gehr

Mailing Address 518 Fairview Way

City State Zip Code
Shawano WI 54166-2232

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.40371

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

204.00

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 65 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Ms. Teresa L Gery

Mailing Address 1307 Belasco Ave

City

Pittsburgh

State

PA

Zip Code

15216-3347

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.33932

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

Mrs. Sally E. Gidaro

Mailing Address 891 Rorke Way

City

Palo Alto

State

CA

Zip Code

94303-4410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: SA11AI.45286

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Mrs. Sally E. Gidaro

Mailing Address 891 Rorke Way

City

Palo Alto

State

CA

Zip Code

94303-4410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

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

Transaction ID: SA11AI.45287

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

350.00

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 66 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION**A.**

Full Name (Last, First, Middle Initial)

Mr Richard J. Glavin

Mailing Address 41120 Fox Run Apt T11

City

Novi

State

MI

Zip Code

48377-4827

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: SA11AI.39832

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

Mr Richard J. Glavin

Mailing Address 41120 Fox Run Apt T11

City

Novi

State

MI

Zip Code

48377-4827

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

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

Transaction ID: SA11AI.39834

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mr & Mrs Clarence H. Good

Mailing Address 355 W Route 897

City

Reinholds

State

PA

Zip Code

17569-9708

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

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

Transaction ID: SA11AI.34922

Amount of Each Receipt this Period

52.00

SUBTOTAL of Receipts This Page (optional)

142.00

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 67 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Calvin Goodrich

Mailing Address 2006 Evergreen Ridge Dr

City

Cincinnati

State

OH

Zip Code

45215-5710

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.39279

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

Calvin Goodrich

Mailing Address 2006 Evergreen Ridge Dr

City

Cincinnati

State

OH

Zip Code

45215-5710

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

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

Transaction ID: SA11AI.39280

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

Mrs. Sandra E. Goodstein

Mailing Address 1770 Melmar Rd

City

Huntingdon Valley

State

PA

Zip Code

19006-7981

FEC ID number of contributing
federal political committee.

C

Name of Employer
Goodsrin & Assoc LLC

Occupation

Financial Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: SA11AI.35427

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 68 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mr. & Mrs. Susan R Gordon

Mailing Address 1212 NW 12th St

City

Andrews

State

TX

Zip Code

79714-2708

FEC ID number of contributing
federal political committee.

C

Name of Employer
Brian Gordon, M.D.

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 27 / 2010

Transaction ID: SA11AI.43156

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Ms Sondra S. Gorius

Mailing Address E2407 Black Forest Dr

City

La Valle

State

WI

Zip Code

53941-9795

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 19 / 2010

Transaction ID: SA11AI.40346

Amount of Each Receipt this Period

37.00

C.

Full Name (Last, First, Middle Initial)

Mrs Paris E Gravitt

Mailing Address 1701 Wilkerson St

City

South Boston

State

VA

Zip Code

24592-2733

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 19 / 2010

Transaction ID: SA11AI.36765

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

337.00

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 69 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
C. Greenlaw

Mailing Address 904 E South St

City State Zip Code
Lindale TX 75771-3388

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.42540

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)
William C. Greer

Mailing Address 118 N Peters Rd Apt 294

City State Zip Code
Knoxville TN 37923-4927

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.00

Date of Receipt

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

Transaction ID: SA11AI.38714

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
William C. Greer

Mailing Address 118 N Peters Rd Apt 294

City State Zip Code
Knoxville TN 37923-4927

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

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

Transaction ID: SA11AI.38715

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

350.00

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 70 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

William C. Greer

Mailing Address 118 N Peters Rd Apt 294

City

Knoxville

State

TN

Zip Code

37923-4927

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

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

Transaction ID: SA11AI.38713

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Mrs. Elaine Grey

Mailing Address 63 Turnbury Ln

City

Irvine

State

CA

Zip Code

92620-0244

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.44767

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Mr. Richard S. Griffith

Mailing Address 3417 Milam St

City

Houston

State

TX

Zip Code

77002-9531

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: SA11AI.42656

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 71 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mr. Raymond S. Raymond Grimes

Mailing Address 3588 Red Maple Ln

City

Bloomsburg

State

PA

Zip Code

17815-3360

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 07 / 2010

Transaction ID: SA11AI.35021

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Ralph E Gritman

Mailing Address 2461 E High St Apt A-9

City

Pottstown

State

PA

Zip Code

19464-3177

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 07 / 2010

Transaction ID: SA11AI.35923

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Mrs. Ann M. Guiffre

Mailing Address 540 Second St Apt 301

City

Alexandria

State

VA

Zip Code

22314-1495

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 25 / 2010

Transaction ID: SA11AI.36544

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1750.00

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 72 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Ms. Mary Jo Gulino

Mailing Address 4200 Old Columbia Pike

City State Zip Code
Annandale VA 22003-2122

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.36423

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
 Mr Daniel J Gurta

Mailing Address 18690 Andrew Ln

City State Zip Code
New Boston MI 48164-8919

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

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

Transaction ID: SA11AI.39735

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)
 Mr. Thomas L. Gutshall

Mailing Address 24968 Okeefe Ln

City State Zip Code
Los Altos CA 94022-4612

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Cepheid

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.45215

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

285.00

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 73 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Mr. Robert Haber

Mailing Address 1998 Rustic Timbers Ln

City State Zip Code
 Prescott AZ 86303-4936

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.43767

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
 Mr Clifford N. Hall

Mailing Address 9047 Dickenson Rd

City State Zip Code
 Winnebago IL 61088-8933

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: SA11AI.41247

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)
 Mr Clifford N. Hall

Mailing Address 9047 Dickenson Rd

City State Zip Code
 Winnebago IL 61088-8933

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

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

Transaction ID: SA11AI.41245

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 74 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Al Hamilton

Mailing Address 301 Eagle Dr

City

Boerne

State

TX

Zip Code

78006-9411

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation

N/A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 12 / 2010

Transaction ID: SA11AI.42867

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Mr. J. Kern Hamilton

Mailing Address 800 Blossom Hill Rd Unit E324

City

Los Gatos

State

CA

Zip Code

95032-3568

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 07 / 2010

Transaction ID: SA11AI.45452

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Mrs Violet Hanna

Mailing Address 4123 Mary Ellen Ave

City

North Hollywood

State

CA

Zip Code

91604-2212

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 05 / 2010

Transaction ID: SA11AI.44372

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1100.00

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 75 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mrs Violet Hanna

Mailing Address 4123 Mary Ellen Ave

City

North Hollywood

State

CA

Zip Code

91604-2212

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.44374

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Mrs Violet Hanna

Mailing Address 4123 Mary Ellen Ave

City

North Hollywood

State

CA

Zip Code

91604-2212

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.44373

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Ms. Margaret L Hanson

Mailing Address 240 Walnut St

City

Bristol

State

PA

Zip Code

19007-4929

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.35428

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

2040.00

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 76 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Ms. Margaret L Hanson

Mailing Address 240 Walnut St

City State Zip Code
 Bristol PA 19007-4929

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

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

Transaction ID: SA11AI.35429

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)
 Ms. Margaret L Hanson

Mailing Address 240 Walnut St

City State Zip Code
 Bristol PA 19007-4929

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

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

Transaction ID: SA11AI.35431

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)
 Mr. William M Harlan, III

Mailing Address 118 W Maryland Ave Apt 114

City State Zip Code
 Phoenix AZ 85013-1243

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.43543

Amount of Each Receipt this Period

60.00

SUBTOTAL of Receipts This Page (optional)

140.00

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 77 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Mr. William M Harlan, III

Mailing Address 118 W Maryland Ave Apt 114

City State Zip Code
 Phoenix AZ 85013-1243

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.43542

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)
 Mr. William M Harlan, III

Mailing Address 118 W Maryland Ave Apt 114

City State Zip Code
 Phoenix AZ 85013-1243

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

511.00

Date of Receipt

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

Transaction ID: SA11AI.43540

Amount of Each Receipt this Period

201.00

C.

Full Name (Last, First, Middle Initial)
 Mr. William M Harlan, III

Mailing Address 118 W Maryland Ave Apt 114

City State Zip Code
 Phoenix AZ 85013-1243

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

561.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.43544

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

301.00

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 78 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
Mr. William M Harlan, III

Mailing Address 118 W Maryland Ave Apt 114

City State Zip Code
Phoenix AZ 85013-1243

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

662.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 27 / 2010

Transaction ID: SA11AI.43541

Amount of Each Receipt this Period

101.00

B.

Full Name (Last, First, Middle Initial)
Ms Frances Harrell

Mailing Address 2660 Magnolia Ave

City State Zip Code
Pensacola FL 32503-4945

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Oil & Gas Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 19 / 2010

Transaction ID: SA11AI.37742

Amount of Each Receipt this Period

187.00

C.

Full Name (Last, First, Middle Initial)
Ms Frances Harrell

Mailing Address 2660 Magnolia Ave

City State Zip Code
Pensacola FL 32503-4945

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Oil & Gas Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 20 / 2010

Transaction ID: SA11AI.37743

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

388.00

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 79 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Mr. Jim M Harris

Mailing Address 12243 Tapa Way

City State Zip Code
Los Altos Hills CA 94022-4515

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Self

Occupation
 Surgeon

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.45213

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)
 Mrs. Michelle M Harris

Mailing Address 9070 W 94th Ave

City State Zip Code
Broomfield CO 80021-4390

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

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

Transaction ID: SA11AI.43234

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)
 Mr. Wallace R Hartman

Mailing Address 596 Countess Dr

City State Zip Code
Yardley PA 19067-4655

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.35586

Amount of Each Receipt this Period

101.00

SUBTOTAL of Receipts This Page (optional)

226.00

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 80 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mrs. Margaret L Hassenpflug

Mailing Address 3034 Grafton Rd

City

Morgantown

State

WV

Zip Code

26508-3537

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

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

Transaction ID: SA11AI.36820

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

Miss. Mary C. Hays

Mailing Address 1202 Heartland Rd

City

Saint Joseph

State

MO

Zip Code

64506-3200

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

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

Transaction ID: SA11AI.41637

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Miss. Mary C. Hays

Mailing Address 1202 Heartland Rd

City

Saint Joseph

State

MO

Zip Code

64506-3200

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

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

Transaction ID: SA11AI.41638

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

165.00

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 81 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mr. Paul H Healey

Mailing Address 6650 Royal Palm Blvd Apt 314C

City

Margate

State

FL

Zip Code

33063-2185

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

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

Transaction ID: SA11AI.37907

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

Ms. Janet Heilmeier

Mailing Address 17612 Woods Edge Dr

City

Dallas

State

TX

Zip Code

75287-7546

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.42492

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

Ms. Jean T. T Heller

Mailing Address 1612 Blair St

City

Williamsport

State

PA

Zip Code

17701-2702

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

557.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.34978

Amount of Each Receipt this Period

228.00

SUBTOTAL of Receipts This Page (optional)

453.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Ms. Jean T. T Heller

Mailing Address 1612 Blair St

City State Zip Code
 Williamsport PA 17701-2702

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

709.00

Date of Receipt

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

Transaction ID: SA11AI.34982

Amount of Each Receipt this Period

152.00

B.

Full Name (Last, First, Middle Initial)
 Ms. Jean T. T Heller

Mailing Address 1612 Blair St

City State Zip Code
 Williamsport PA 17701-2702

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

937.00

Date of Receipt

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

Transaction ID: SA11AI.34980

Amount of Each Receipt this Period

228.00

C.

Full Name (Last, First, Middle Initial)
 Ms. Jean T. T Heller

Mailing Address 1612 Blair St

City State Zip Code
 Williamsport PA 17701-2702

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1037.00

Date of Receipt

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

Transaction ID: SA11AI.34979

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

480.00

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 83 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Ms. Jean T. T Heller

Mailing Address 1612 Blair St

City

Williamsport

State

PA

Zip Code

17701-2702

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1137.00

Date of Receipt

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

Transaction ID: SA11AI.34981

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Mr Milton H Hellman

Mailing Address 6710 Donald St

City

Saint Louis

State

MO

Zip Code

63121-3142

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.41492

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Mr Milton H Hellman

Mailing Address 6710 Donald St

City

Saint Louis

State

MO

Zip Code

63121-3142

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: SA11AI.41493

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

140.00

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 84 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mrs. Kimberly A. Henley

Mailing Address 619 Firethorn Dr

City

Douglassville

State

PA

Zip Code

19518-1240

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kevin E. Henley

Occupation

Office Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11AI.35968

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

Mrs Nancy E Hobbs

Mailing Address 1415 Catron Ave SE

City

Albuquerque

State

NM

Zip Code

87123-4215

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Housewife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: SA11AI.43816

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

Mr. David L. Hollinger

Mailing Address 755 White Oak Rd

City

Denver

State

PA

Zip Code

17517-9106

FEC ID number of contributing
federal political committee.

C

Name of Employer
Four Seasons Produce

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

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

Transaction ID: SA11AI.34838

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional)

2350.00

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 85 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Ms. Florence E Hooten

Mailing Address 7017 Saint Annes Ave

City State Zip Code
 Lanham MD 20706-3486

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

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

Transaction ID: SA11AI.36157

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)
 Ms. Martha Hoots

Mailing Address PO Box 36

City State Zip Code
 Deeth NV 89823-0036

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Rancher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

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

Transaction ID: SA11AI.44043

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
 Mr Al H Hoover

Mailing Address 904 E Enon Ave

City State Zip Code
 Fort Worth TX 76140-3530

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

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

Transaction ID: SA11AI.42607

Amount of Each Receipt this Period

51.00

SUBTOTAL of Receipts This Page (optional)

336.00

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 86 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mr Al H Hoover

Mailing Address 904 E Enon Ave

City

Fort Worth

State

TX

Zip Code

76140-3530

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.42608

Amount of Each Receipt this Period

51.00

B.

Full Name (Last, First, Middle Initial)

Ms. Hannah M. Horgan

Mailing Address 265 76th St

City

Brooklyn

State

NY

Zip Code

11209-3003

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.33192

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Mrs. Frances J. Hosler

Mailing Address 10348 W US Highway 90 Lot 44

City

Del Rio

State

TX

Zip Code

78840-3451

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: SA11AI.43080

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

96.00

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 87 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION**A.**

Full Name (Last, First, Middle Initial)

Mrs. Frances J. Hosler

Mailing Address 10348 W US Highway 90 Lot 44

City

Del Rio

State

TX

Zip Code

78840-3451

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

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

Transaction ID: SA11AI.43078

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Mrs. Frances J. Hosler

Mailing Address 10348 W US Highway 90 Lot 44

City

Del Rio

State

TX

Zip Code

78840-3451

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

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

Transaction ID: SA11AI.43079

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Mrs. Mary Anne Ann Hughes

Mailing Address 36491 Highland Pl

City

Yucaipa

State

CA

Zip Code

92399-9701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

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

Transaction ID: SA11AI.44717

Amount of Each Receipt this Period

375.00

SUBTOTAL of Receipts This Page (optional)

435.00

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 88 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mr. John P Ingiosi

Mailing Address 15517 Pleasant Ridge Rd

City

Hustontown

State

PA

Zip Code

17229-9719

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Supervisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 20 / 2010

Transaction ID: SA11AI.34690

Amount of Each Receipt this Period

110.00

B.

Full Name (Last, First, Middle Initial)

Mr. John P Ingiosi

Mailing Address 15517 Pleasant Ridge Rd

City

Hustontown

State

PA

Zip Code

17229-9719

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Supervisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 21 / 2010

Transaction ID: SA11AI.34691

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Mr Brian T. Jackson

Mailing Address 7014 Shay Ct

City

Highland

State

CA

Zip Code

92346-7700

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 20 / 2010

Transaction ID: SA11AI.44696

Amount of Each Receipt this Period

52.00

SUBTOTAL of Receipts This Page (optional)

262.00

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 89 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION**A.**Full Name (Last, First, Middle Initial)
Mr. Paul E. Jackson

Mailing Address 917 Marina Dr

City	State	Zip Code
Panama City Beach	FL	32407-5523

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

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

Transaction ID: SA11AI.37724

Amount of Each Receipt this Period

200.00

B.Full Name (Last, First, Middle Initial)
Mr. Paul E. Jackson

Mailing Address 917 Marina Dr

City	State	Zip Code
Panama City Beach	FL	32407-5523

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.00

Date of Receipt

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

Transaction ID: SA11AI.37723

Amount of Each Receipt this Period

25.00

C.Full Name (Last, First, Middle Initial)
Theodore Jagosz

Mailing Address 1924 262nd St

City	State	Zip Code
Lomita	CA	90717-3207

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	3	0	/	2	0	1	0

Transaction ID: SA11AI.44214

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

725.00

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 90 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mr J Douglas James

Mailing Address 3847 Myrtle St

City

Erie

State

PA

Zip Code

16508-3013

FEC ID number of contributing
federal political committee.

C

Name of Employer
High Pressure Equipment
Compan

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: SA11AI.34427

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Mrs. Noreen M. Janes

Mailing Address 301 Konawa Pl

City

Loudon

State

TN

Zip Code

37774-2981

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

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

Transaction ID: SA11AI.38684

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Mrs. Leah J Jeffries

Mailing Address 4805 Zakon Rd

City

Torrance

State

CA

Zip Code

90505-4355

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

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

Transaction ID: SA11AI.44161

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 91 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mrs. Leah J Jeffries

Mailing Address 4805 Zakon Rd

City

Torrance

State

CA

Zip Code

90505-4355

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

875.00

Date of Receipt

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

Transaction ID: SA11AI.44162

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Mrs Frances Johnson

Mailing Address 3345 Valencia Ave

City

San Bernardino

State

CA

Zip Code

92404-2419

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

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

Transaction ID: SA11AI.44718

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

Mrs Betty J. Jones

Mailing Address 5509 Beran St

City

Torrance

State

CA

Zip Code

90503-6206

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

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

Transaction ID: SA11AI.44156

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

485.00

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 92 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Ms. Louise Jones

Mailing Address 1100 Oak Grove Ave

City

San Marino

State

CA

Zip Code

91108-1027

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.44271

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

Mrs Mary C Jordan

Mailing Address 321 W South St

City

Grayville

State

IL

Zip Code

62844-1534

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

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

Transaction ID: SA11AI.41425

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Mr Michael J. Kapp

Mailing Address 3118 Ravenhill Dr

City

Fayetteville

State

NC

Zip Code

28303-5349

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Certified Registered Nurse Ane

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

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

Transaction ID: SA11AI.37039

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 93 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mr Michael J. Kapp

Mailing Address 3118 Ravenhill Dr

City

Fayetteville

State

NC

Zip Code

28303-5349

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Certified Registered Nurse Ane

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

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

Transaction ID: SA11AI.37040

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Mrs. Jacqueline A Keith

Mailing Address 5602 Lockwood Rd

City

Cheverly

State

MD

Zip Code

20785-1125

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.36191

Amount of Each Receipt this Period

65.00

C.

Full Name (Last, First, Middle Initial)

Mrs. Jacqueline A Keith

Mailing Address 5602 Lockwood Rd

City

Cheverly

State

MD

Zip Code

20785-1125

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

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

Transaction ID: SA11AI.36190

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

135.00

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 94 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Mrs. Jacqueline A Keith

Mailing Address 5602 Lockwood Rd

City State Zip Code
Cheverly MD 20785-1125

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

07 / 19 / 2010

Transaction ID: SA11AI.36193

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)
 Mrs. Jacqueline A Keith

Mailing Address 5602 Lockwood Rd

City State Zip Code
Cheverly MD 20785-1125

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

08 / 05 / 2010

Transaction ID: SA11AI.36194

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)
 Mrs. Jacqueline A Keith

Mailing Address 5602 Lockwood Rd

City State Zip Code
Cheverly MD 20785-1125

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

08 / 19 / 2010

Transaction ID: SA11AI.36192

Amount of Each Receipt this Period

65.00

SUBTOTAL of Receipts This Page (optional)

145.00

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 95 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
Mrs. Jacqueline A Keith

Mailing Address 5602 Lockwood Rd

City State Zip Code
Cheverly MD 20785-1125

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.36188

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)
Mrs. Jacqueline A Keith

Mailing Address 5602 Lockwood Rd

City State Zip Code
Cheverly MD 20785-1125

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

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

Transaction ID: SA11AI.36189

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)
Mr. Donald M Keller

Mailing Address 2165 Hawksridge Dr Apt 1303

City State Zip Code
Naples FL 34105-8530

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: SA11AI.38243

Amount of Each Receipt this Period

70.00

SUBTOTAL of Receipts This Page (optional)

190.00

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 96 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mr. Donald M Keller

Mailing Address 2165 Hawksridge Dr Apt 1303

City

Naples

State

FL

Zip Code

34105-8530

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

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

Transaction ID: SA11AI.38244

Amount of Each Receipt this Period

70.00

B.

Full Name (Last, First, Middle Initial)

Mr. Alex Khowaylo

Mailing Address 10 Forest Ridge Rd

City

Upper Saddle River

State

NJ

Zip Code

07458-1841

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pipeline Biomedical Holdings

Occupation

CEO

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.32632

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Mr. Gordon L. Kinley

Mailing Address 7227 Glenflora Ave

City

San Diego

State

CA

Zip Code

92119-2410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: SA11AI.44602

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

470.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mr. John F Kirk, Jr.

Mailing Address 11160 Shore Dr

City

Lake Wales

State

FL

Zip Code

33898-9139

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Ret.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.00

Date of Receipt

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

Transaction ID: SA11AI.38178

Amount of Each Receipt this Period

62.00

B.

Full Name (Last, First, Middle Initial)

Mrs. Evelyn J Kitchen

Mailing Address 9101 Park Dr

City

Shreve

State

OH

Zip Code

44676-9700

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.39202

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

Mrs. Evelyn J Kitchen

Mailing Address 9101 Park Dr

City

Shreve

State

OH

Zip Code

44676-9700

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.39201

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

212.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mr Walter K. Klaus

Mailing Address 1008 1st St W Apt 319

City

Hastings

State

MN

Zip Code

55033-1348

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

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

Transaction ID: SA11AI.40487

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

Mr Walter K. Klaus

Mailing Address 1008 1st St W Apt 319

City

Hastings

State

MN

Zip Code

55033-1348

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

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

Transaction ID: SA11AI.40486

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Miss Maxine Knerr

Mailing Address 11904 Kingston St

City

Grand Terrace

State

CA

Zip Code

92313-5151

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: SA11AI.44683

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Miss Maxine Knerr

Mailing Address 11904 Kingston St

City State Zip Code
 Grand Terrace CA 92313-5151

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

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

Transaction ID: SA11AI.44684

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)
 Miss Maxine Knerr

Mailing Address 11904 Kingston St

City State Zip Code
 Grand Terrace CA 92313-5151

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

645.00

Date of Receipt

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

Transaction ID: SA11AI.44685

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)
 Mrs Betty B Knight

Mailing Address 5201 Catalina Rd

City State Zip Code
 Knoxville TN 37918-4510

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

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

Transaction ID: SA11AI.38703

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

145.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mr. Richard L. Knoebel

Mailing Address 206 Knoebels Blvd

City

Elysburg

State

PA

Zip Code

17824-7125

FEC ID number of contributing
federal political committee.

C

Name of Employer
H.H. Knoebel & Sons

Occupation

Owner/Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

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

Transaction ID: SA11AI.35023

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

Mr Charles P. Koehler

Mailing Address 5511 Chestnut Ln

City

Mc Farland

State

WI

Zip Code

53558-8902

FEC ID number of contributing
federal political committee.

C

Name of Employer
Brady Corp

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: SA11AI.40320

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)

Ms. Agnes S. Kossler

Mailing Address 3328 Crestview Dr

City

Bethel Park

State

PA

Zip Code

15102-1102

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

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

Transaction ID: SA11AI.33820

Amount of Each Receipt this Period

26.00

SUBTOTAL of Receipts This Page (optional)

301.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mrs. Martha E. Kourbage

Mailing Address 400 Bayside

City

Breezy Point

State

NY

Zip Code

11697-1009

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kingsway Exterminating Co-
mpany

Occupation
Bookkeeper

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.33326

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

Mrs. Martha E. Kourbage

Mailing Address 400 Bayside

City

Breezy Point

State

NY

Zip Code

11697-1009

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kingsway Exterminating Co-
mpany

Occupation
Bookkeeper

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.33325

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Mr. Robert Kramer

Mailing Address 1233 N Gulfstream Ave Unit 1403

City

Sarasota

State

FL

Zip Code

34236-8958

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.38316

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mr. Dallas J. Krapf

Mailing Address 407 Jacobs Ct

City

Exton

State

PA

Zip Code

19341-2343

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 30 / 2010

Transaction ID: SA11AI.35780

Amount of Each Receipt this Period

1200.00

B.

Full Name (Last, First, Middle Initial)

Mrs. Vincetta M Krizmanich

Mailing Address 10236 Thurston Groves Blvd

City

Seminole

State

FL

Zip Code

33778-3822

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 19 / 2010

Transaction ID: SA11AI.38150

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Mr. Anthony Laino

Mailing Address 311 Megan Ct

City

Wyckoff

State

NJ

Zip Code

07481-2966

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Real Estate Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 02 / 2010

Transaction ID: SA11AI.32653

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

1425.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mrs. Jane B. Laird

Mailing Address 4031 Kennett Pike Apt 163

City

Greenville

State

DE

Zip Code

19807-2036

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

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

Transaction ID: SA11AI.36041

Amount of Each Receipt this Period

168.00

B.

Full Name (Last, First, Middle Initial)

Mr. Victor J. Lancelotta

Mailing Address 9339 Baltimore National Pike

City

Ellicott City

State

MD

Zip Code

21042-2822

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: SA11AI.36280

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Mr. Victor J. Lancelotta

Mailing Address 9339 Baltimore National Pike

City

Ellicott City

State

MD

Zip Code

21042-2822

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11AI.36281

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

368.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Miss Marcia P. Lane

Mailing Address 1449 W Lindsey Ferry Rd

City

Columbus

State

MS

Zip Code

39701-9629

FEC ID number of contributing
federal political committee.

C

Name of Employer
Not provided

Occupation

Charitable Volunteer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.38837

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Mr. James Lanier, II

Mailing Address 2024 18th St NW

City

Lanett

State

AL

Zip Code

36863-5502

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11AI.38601

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Ms Joyce A Lanzotti

Mailing Address 2000 E Hazel Dell Rd

City

Springfield

State

IL

Zip Code

62703-5278

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.41417

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

1625.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mr. John W Lapp

Mailing Address 41 Ridge View Dr

City

Leola

State

PA

Zip Code

17540-1119

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Trucker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.34866

Amount of Each Receipt this Period

111.00

B.

Full Name (Last, First, Middle Initial)

Ms. Helen C. Lauer

Mailing Address 1625 Clearwater Rd

City

Saint Cloud

State

MN

Zip Code

56301-5725

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.40723

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

Ms. Helen C. Lauer

Mailing Address 1625 Clearwater Rd

City

Saint Cloud

State

MN

Zip Code

56301-5725

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11AI.40724

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

511.00

TOTAL This Period (last page this line number only)

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

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mrs. Elaine F. Laurence

Mailing Address 68 Estates Ter N

City

Manhasset

State

NY

Zip Code

11030-4037

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

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

Transaction ID: SA11AI.33179

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

Mrs. Elaine F. Laurence

Mailing Address 68 Estates Ter N

City

Manhasset

State

NY

Zip Code

11030-4037

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

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

Transaction ID: SA11AI.33180

Amount of Each Receipt this Period

126.00

C.

Full Name (Last, First, Middle Initial)

Mr. Eugene W. Lawrence, Jr.

Mailing Address 36 Patricia Dr

City

Vernon Rockville

State

CT

Zip Code

06066-4826

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Hair Stylist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.32392

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

301.00

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 107 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Mr. Clement F Lawson

Mailing Address 811 Alvarado Pl

City State Zip Code
 Lady Lake FL 32159-5773

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.37644

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
 Mr. Clement F Lawson

Mailing Address 811 Alvarado Pl

City State Zip Code
 Lady Lake FL 32159-5773

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: SA11AI.37643

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
 Rev Ronald C. Lawson

Mailing Address 25 North Rd
 St Mary Parish

City State Zip Code
 Chelmsford MA 01824-2723

FEC ID number of contributing
federal political committee.

C

Name of Employer
 St Mary Parish

Occupation
Ret.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

452.00

Date of Receipt

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

Transaction ID: SA11AI.32102

Amount of Each Receipt this Period

226.00

SUBTOTAL of Receipts This Page (optional)

426.00

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
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FOR LINE NUMBER: PAGE 108 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Mr. Roy M. Leach

Mailing Address 73 Eagle Dr

City State Zip Code
 Elsmere KY 41018-1902

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.38904

Amount of Each Receipt this Period

125.00

B.

Full Name (Last, First, Middle Initial)
 Mr. Karl Lee

Mailing Address 1919 12th Ave SE

City State Zip Code
 Aberdeen SD 57401-7320

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11AI.40787

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)
 Mr Robert E. Lee

Mailing Address PO Box 40035

City State Zip Code
 Tucson AZ 85717-0035

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Contractor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

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

Transaction ID: SA11AI.43721

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mr Robert E. Lee

Mailing Address PO Box 40035

City

Tucson

State

AZ

Zip Code

85717-0035

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Contractor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: SA11AI.43716

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

Mr Robert E. Lee

Mailing Address PO Box 40035

City

Tucson

State

AZ

Zip Code

85717-0035

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Contractor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

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

Transaction ID: SA11AI.43720

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

Mr Robert E. Lee

Mailing Address PO Box 40035

City

Tucson

State

AZ

Zip Code

85717-0035

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Contractor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

587.00

Date of Receipt

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

Transaction ID: SA11AI.43715

Amount of Each Receipt this Period

112.00

SUBTOTAL of Receipts This Page (optional)

262.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Ms. Marie Lett

Mailing Address 3940 Lett Ln

City State Zip Code
 Burleson TX 76028-1742

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Self

Occupation
 Rancher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: SA11AI.42572

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)
 Mr. Francis J Leuver

Mailing Address 16448 Wood Valley Trl

City State Zip Code
 Jamul CA 91935-2318

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 ▼

210.00

Date of Receipt

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

Transaction ID: SA11AI.44451

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)
 Mr John Lindsay

Mailing Address 5527 N Oakdale Pl

City State Zip Code
 Parkville MO 64152-4337

FEC ID number of contributing
federal political committee.

C

Name of Employer
 retired

Occupation
 retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

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

Transaction ID: SA11AI.41454

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 111 / 277

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mr John Lindsay

Mailing Address 5527 N Oakdale Pl

City

Parkville

State

MO

Zip Code

64152-4337

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

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

Transaction ID: SA11AI.41630

Amount of Each Receipt this Period

5.00

B.

Full Name (Last, First, Middle Initial)

Mr. Thomas C Lindsay, Sr.

Mailing Address 2515 Carrollton Rd

City

Annapolis

State

MD

Zip Code

21403-4202

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.36360

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Ms. Marianne C. Long, Special

Mailing Address 1015 Wilder Way

City

Tyler

State

TX

Zip Code

75703-9383

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cabe Foundation

Occupation
V.P.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.42527

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

405.00

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
Mr. Richard M. Loomis

Mailing Address 25 Wyndwood Dr

City State Zip Code
Wilkes Barre PA 18705-3823

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.00

Date of Receipt

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

Transaction ID: SA11AI.35264

Amount of Each Receipt this Period

204.00

B.

Full Name (Last, First, Middle Initial)
Mrs. Rita M Lopes

Mailing Address 725 Tomlin Station Rd

City State Zip Code
Mullica Hill NJ 08062-4713

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.32834

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Rita M Lopes

Mailing Address 725 Tomlin Station Rd

City State Zip Code
Mullica Hill NJ 08062-4713

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

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

Transaction ID: SA11AI.32833

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

329.00

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mr. Isaias Loukos

Mailing Address 8419 Rocky Springs Rd

City

Frederick

State

MD

Zip Code

21702-2385

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ike LLC

Occupation
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11AI.36386

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Randall Lowry

Mailing Address 15914 Rathlin Ct

City

Spring

State

TX

Zip Code

77379-6887

FEC ID number of contributing
federal political committee.

C

Name of Employer
Union Gas Corp

Occupation
Oil & Gas Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.42759

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)

Mrs. Barbara C. Ludewig

Mailing Address 101 Prospect Ave

City

Plattsburgh

State

NY

Zip Code

12901-1334

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.33545

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

1175.00

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION**A.**

Full Name (Last, First, Middle Initial)

Mrs Kathleen M Lund

Mailing Address 1285 Club House Dr

City

Pasadena

State

CA

Zip Code

91105-2728

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allen Lund Co IncOccupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: SA11AI.44266

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Mrs Marilyn A Lynch

Mailing Address 7256 S Grant St

City

Centennial

State

CO

Zip Code

80122-1138

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: SA11AI.43243

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

Nancy O. Mabe

Mailing Address PO Box 229

City

Liberty

State

MO

Zip Code

64069-0229

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

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

Transaction ID: SA11AI.41599

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

245.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Mr. Richard F Madden

Mailing Address 6703 Diann St NE

City State Zip Code
 Olympia WA 98516-9323

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Ret.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.46200

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)
 Mr. Richard F Madden

Mailing Address 6703 Diann St NE

City State Zip Code
 Olympia WA 98516-9323

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Ret.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.46199

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)
 Mr. Victor Maestri

Mailing Address 702 S Main St

City State Zip Code
 Old Forge PA 18518-1410

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pride Mobility

Occupation
Worker Production

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.00

Date of Receipt

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

Transaction ID: SA11AI.35236

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

240.00

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
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mrs. Ganella L Malone

Mailing Address 1600 Westbrook Ave Apt 625

City

Richmond

State

VA

Zip Code

23227-3320

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

Name of Employer

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

279.00

Date of Receipt

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

Transaction ID: SA11AI.36643

Amount of Each Receipt this Period

51.00

B.

Full Name (Last, First, Middle Initial)

Mr. Jesus L. Manalang, M. D.

Mailing Address 1509 Lisa Ln

City

Marion

State

IL

Zip Code

62959-1571

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

Name of Employer

Occupation

Self

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: SA11AI.41439

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

Mr. Pierson G Mapes

Mailing Address 9 Sterlington Rd

City

Sloatsburg

State

NY

Zip Code

10974-2644

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

Name of Employer

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

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

Transaction ID: SA11AI.33165

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

451.00

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 117 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION**A.**

Full Name (Last, First, Middle Initial)

Mrs. Jane R. Marlatt

Mailing Address 2927 Meadow View Rd

City

Falls Church

State

VA

Zip Code

22042-1338

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

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

Transaction ID: SA11AI.36452

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

Mr Kenneth L. Marshall

Mailing Address 480 Oakcrest Dr

City

Durango

State

CO

Zip Code

81301-6904

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.43388

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Mr. Thomas R. Masino

Mailing Address 2402 Peachtree Run Rd

City

Dover

State

DE

Zip Code

19901-7707

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.36055

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

350.00

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 118 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mr John T Mason

Mailing Address 56 Little Creek Dr

City

Cherry Log

State

GA

Zip Code

30522-3122

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

970.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 1 0

Transaction ID: SA11AI.37493

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

Mr John T Mason

Mailing Address 56 Little Creek Dr

City

Cherry Log

State

GA

Zip Code

30522-3122

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.00

Date of Receipt

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

Transaction ID: SA11AI.37492

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

Mr John T Mason

Mailing Address 56 Little Creek Dr

City

Cherry Log

State

GA

Zip Code

30522-3122

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1470.00

Date of Receipt

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

Transaction ID: SA11AI.37495

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

800.00

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 119 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mr John T Mason

Mailing Address 56 Little Creek Dr

City

Cherry Log

State

GA

Zip Code

30522-3122

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1920.00

Date of Receipt

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

Transaction ID: SA11AI.37494

Amount of Each Receipt this Period

450.00

B.

Full Name (Last, First, Middle Initial)

Elsie Matthews

Mailing Address PO Box 639

City

McArthur

State

CA

Zip Code

96056-0639

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: SA11AI.45730

Amount of Each Receipt this Period

400.00

C.

Full Name (Last, First, Middle Initial)

Mrs. Clerimond H. McDaniel

Mailing Address 3 Pursuit Apt 204

City

Aliso Viejo

State

CA

Zip Code

92656-4213

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: SA11AI.44812

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

950.00

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 120 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Ms. Virginia L McEwen

Mailing Address 102 McEwen Ln

City

Slippery Rock

State

PA

Zip Code

16057-2212

FEC ID number of contributing
federal political committee.

C

Name of Employer
Community Care

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.34307

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Mrs. Peggy B. McHenry

Mailing Address 817 Brentview Dr

City

Nashville

State

TN

Zip Code

37220-1509

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: SA11AI.38641

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Mr William R. McNaughton

Mailing Address 321 Fairview St

City

Carlisle

State

PA

Zip Code

17015-4359

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.34551

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 121 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Miss Barbara Meeker

Mailing Address 9430 Via Salerno

City

Burbank

State

CA

Zip Code

91504-1222

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.44361

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Miss Barbara Meeker

Mailing Address 9430 Via Salerno

City

Burbank

State

CA

Zip Code

91504-1222

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: SA11AI.44362

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Mrs. Helen H Mehelich

Mailing Address 2889 Slater Rd

City

Oak Harbor

State

WA

Zip Code

98277-9052

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.46136

Amount of Each Receipt this Period

105.00

SUBTOTAL of Receipts This Page (optional)

155.00

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 122 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION**A.**

Full Name (Last, First, Middle Initial)

Mr. Willard C Meloy

Mailing Address 323 Meadowbrook Ave

City

Youngstown

State

OH

Zip Code

44512-3007

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

222.00

Date of Receipt

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

Transaction ID: SA11AI.39185

Amount of Each Receipt this Period

37.00

B.

Full Name (Last, First, Middle Initial)

Mr. Robert Mesaros

Mailing Address 900 Meadowood Cir

City

Lebanon

State

PA

Zip Code

17042-8925

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.34593

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)

Mrs. Ferne V. Michniewicz

Mailing Address 4455 New Jersey St

City

San Diego

State

CA

Zip Code

92116-1050

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

435.00

Date of Receipt

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

Transaction ID: SA11AI.44581

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

462.00

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 123 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION**A.**

Full Name (Last, First, Middle Initial)

Mr. Rudolph Miles

Mailing Address 3905 Flamingo Dr

City

El Paso

State

TX

Zip Code

79902-1726

FEC ID number of contributing
federal political committee.

C

Name of Employer
RM Customhouse BrokersOccupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	6	/	2	0	1	0

Transaction ID: SA11AI.43170

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Alan B. Miller

Mailing Address 57 Crosby Brown Road

City

Gladwyne

State

PA

Zip Code

19035-9035

FEC ID number of contributing
federal political committee.

C

Name of Employer
Universal Health ServicesOccupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	3	1	/	2	0	1	0

Transaction ID: SA11AI.35494

Amount of Each Receipt this Period

2000.00

C.

Full Name (Last, First, Middle Initial)

Mrs Helen Miller

Mailing Address 29 Greenhouse Ln

City

New Ringgold

State

PA

Zip Code

17960-8982

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Mount FarmsOccupation
Grower

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: SA11AI.35052

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

2150.00

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 124 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Ms. Lorraine V Miller

Mailing Address 8 Bonel Ct

City State Zip Code
 Pittsburgh PA 15227-4504

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.33946

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)
 Mr. William H. Miller

Mailing Address 877 Valleyview Rd

City State Zip Code
 Pittsburgh PA 15243-1019

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Retired

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11AI.34024

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)
 Mr. Gerrish H. Milliken

Mailing Address 350 Madison Ave Fl 24

City State Zip Code
 New York NY 10017-3715

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11AI.33022

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

2050.00

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 125 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION**A.**

Full Name (Last, First, Middle Initial)

Mr. John L. Minter

Mailing Address 116 Seascape Dr

City

Port Lavaca

State

TX

Zip Code

77979-4940

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

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

Transaction ID: SA11AI.42858

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Ms. Ann M. Miranda

Mailing Address 2735 N Diego Cir

City

Mesa

State

AZ

Zip Code

85215-1607

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	3		2	0	1	0

Transaction ID: SA11AI.43598

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Ms Antoinette C. Mire

Mailing Address 301 Wayne Dr

City

Shreveport

State

LA

Zip Code

71105-4719

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

801.00

Date of Receipt

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

Transaction ID: SA11AI.42109

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 126 / 277

(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)
AMERICA'S FOUNDATION**A.**

Full Name (Last, First, Middle Initial)

Mrs. Susanne Mita

Mailing Address 2224 E Deerfield Dr

City

State

Zip Code

Media

PA

19063-1834

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	1	0

Transaction ID: SA11AI.35563

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Marilyn Mitsch

Mailing Address 4 Charley Lake Ct

City

State

Zip Code

North Oaks

MN

55127-6219

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	6		2	0	1	0

Transaction ID: SA11AI.40551

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)

Rev. Msgr. Charles J. Monaghan

Mailing Address 1436 Lansdowne Ave

City

State

Zip Code

Darby

PA

19023-1218

FEC ID number of contributing
federal political committee.

C

Name of Employer

Villa St Joseph

Occupation

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.00

Date of Receipt

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

Transaction ID: SA11AI.35474

Amount of Each Receipt this Period

202.00

SUBTOTAL of Receipts This Page (optional)

5327.00

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 127 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION**A.**

Full Name (Last, First, Middle Initial)

Mr. Lionel Montemayor

Mailing Address 4626 Richmond Ave

City

Fremont

State

CA

Zip Code

94536-6856

FEC ID number of contributing
federal political committee.

C

Name of Employer
State Of California

Occupation

Count Clerk

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.45347

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

Mr Kenneth Moore

Mailing Address 284 Alpat Dr

City

Dillsburg

State

PA

Zip Code

17019-9503

FEC ID number of contributing
federal political committee.

C

Name of Employer
Select Medical Corp

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	8	/	2	0	1	0

Transaction ID: SA11AI.34557

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Mr. Timothy F. Moran

Mailing Address 2415 McDonald St

City

Sioux City

State

IA

Zip Code

51104-3739

FEC ID number of contributing
federal political committee.

C

Name of Employer
Moran Eye Center

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	3	1	/	2	0	1	0

Transaction ID: SA11AI.40132

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 128 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mrs. Ruth Morford

Mailing Address 301 Hartnell Ave Apt 131

City

Redding

State

CA

Zip Code

96002-1801

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.45720

Amount of Each Receipt this Period

58.00

B.

Full Name (Last, First, Middle Initial)

Mr. Mitchell L. Morgan

Mailing Address 728 Williamson Rd

City

Bryn Mawr

State

PA

Zip Code

19010-9010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Morgan Properties

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11AI.35446

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

Mr. Clifton A Morris

Mailing Address 2725 Nazareth Rd

City

Easton

State

PA

Zip Code

18045-2716

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

ret

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.35104

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

5108.00

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 129 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mr. Marty R Mosier

Mailing Address 11989 San Ysidro Ct

City

Woodbridge

State

VA

Zip Code

22192-6248

FEC ID number of contributing
federal political committee.

C

Name of Employer
X-Com System

Occupation
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.36504

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

Mr. Marty R Mosier

Mailing Address 11989 San Ysidro Ct

City

Woodbridge

State

VA

Zip Code

22192-6248

FEC ID number of contributing
federal political committee.

C

Name of Employer
X-Com System

Occupation
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11AI.36505

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

Mr. Michael Mozeika, Jr.

Mailing Address 2803 Concord Dr

City

Wall Township

State

NJ

Zip Code

07719-9574

FEC ID number of contributing
federal political committee.

C

Name of Employer
New Dimension Industries,
Inc.

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.32705

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

430.00

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 130 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mrs. Marie Kathleen Mudd

Mailing Address 5 W Glebe Rd Apt A24

City

Alexandria

State

VA

Zip Code

22305-2682

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 14 / 2010

Transaction ID: SA11AI.36527

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Mrs. Armarie Murphy

Mailing Address 205 S Woods Mill Rd Apt 3206

City

Chesterfield

State

MO

Zip Code

63017-3510

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 20 / 2010

Transaction ID: SA11AI.41444

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)

Clair J Murphy

Mailing Address 1626 Ruth St N

City

Saint Paul

State

MN

Zip Code

55119-3064

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Ret

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 23 / 2010

Transaction ID: SA11AI.40536

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

200.00

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 131 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Mr. John A Musil

Mailing Address 521 E Moneta Ave

City State Zip Code
 Peoria Heights IL 61616-6225

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Komatsa

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: SA11AI.41310

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
 Mr. John A Myers

Mailing Address 827 Garden Ave

City State Zip Code
 Lebanon PA 17046-8234

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

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

Transaction ID: SA11AI.34600

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)
 Mr. William J Myhre

Mailing Address 865 2nd Ave

City State Zip Code
 Sweet Home OR 97386-1915

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.45927

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

275.00

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 132 / 277

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION**A.**

Full Name (Last, First, Middle Initial)

Mr. John H. Nelson

Mailing Address 32110 Agoura Rd

City

Westlake Village

State

CA

Zip Code

91361-4026

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11AI.44333

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Miss Mary Louise Nesbitt

Mailing Address 807 Jennings St

City

Sioux City

State

IA

Zip Code

51105-1852

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	7	/	2	0	1	0

Transaction ID: SA11AI.40133

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

Mr Quentin Nesbitt

Mailing Address 9840 Montgomery Rd Apt 2212

City

Cincinnati

State

OH

Zip Code

45242-6258

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11AI.39310

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

10075.00

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 133 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Phyllis Nicholas

Mailing Address 40 Howard Rd

City State Zip Code
 Greenwich CT 06831-3104

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Retired

Occupation
 Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.32501

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)
 Phyllis Nicholas

Mailing Address 40 Howard Rd

City State Zip Code
 Greenwich CT 06831-3104

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Retired

Occupation
 Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: SA11AI.32500

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
 Rev. Joseph E. Nichols

Mailing Address 213 Broadway

City State Zip Code
 Norwich CT 06360-4328

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Diocese Of Norwich, Ct.

Occupation
 Catholic Priest

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

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

Transaction ID: SA11AI.32432

Amount of Each Receipt this Period

450.00

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mr. Reade B Nimick

Mailing Address 1101 Lincoln Dr

City

West Chester

State

PA

Zip Code

19380-5721

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.35813

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Ms. Sundra M Noel

Mailing Address 927 Wayne Ave

City

York

State

PA

Zip Code

17403-1130

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

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

Transaction ID: SA11AI.34803

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

Mrs. Nellie M. Noggles

Mailing Address 2609 Sunnybrook Dr

City

Nampa

State

ID

Zip Code

83686-6332

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.43454

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

165.00

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
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(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mrs. Nellie M. Noggles

Mailing Address 2609 Sunnybrook Dr

City

Nampa

State

ID

Zip Code

83686-6332

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

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

Transaction ID: SA11AI.43456

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Mrs. Nellie M. Noggles

Mailing Address 2609 Sunnybrook Dr

City

Nampa

State

ID

Zip Code

83686-6332

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.00

Date of Receipt

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

Transaction ID: SA11AI.43455

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Mrs. Nellie M. Noggles

Mailing Address 2609 Sunnybrook Dr

City

Nampa

State

ID

Zip Code

83686-6332

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

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

Transaction ID: SA11AI.43457

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

95.00

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 136 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mrs. Phebe S. B. Novakovic

Mailing Address 113 N Spring Mill Rd

City

Villanova

State

PA

Zip Code

19085-1514

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.35624

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Miss Mercedes G. O'Malley

Mailing Address 7123 Colony Pointe Dr

City

Riverview

State

FL

Zip Code

33578-8372

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.38072

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

Mrs. Winona J. Oates

Mailing Address 4899 S Homer Alto Hwy

City

Lufkin

State

TX

Zip Code

75904-6166

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.42551

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1140.00

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
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(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
Mrs. Winona J. Oates

Mailing Address 4899 S Homer Alto Hwy

City State Zip Code
Lufkin TX 75904-6166

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1025.00

Date of Receipt

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

Transaction ID: SA11AI.42552

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)
Mr. Shih Yuen Pai

Mailing Address 6414 79th St

City State Zip Code
Middle Village NY 11379-2348

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: SA11AI.33269

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)
Ms. Pauline Paino

Mailing Address 333 N Maplewood St

City State Zip Code
Orange CA 92866-1214

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.44915

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

325.00

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION**A.**Full Name (Last, First, Middle Initial)
Walter R PalmerMailing Address PO Box 70
321 Blown Timber RdCity State Zip Code
Chloe WV 25235-0070FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.36773

Amount of Each Receipt this Period

300.00

B.Full Name (Last, First, Middle Initial)
Mrs. Jane Pastelak

Mailing Address 1192 Laurelwood Rd

City State Zip Code
Pottstown PA 19465-7422FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

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

Transaction ID: SA11AI.35929

Amount of Each Receipt this Period

100.00

C.Full Name (Last, First, Middle Initial)
Mr. Davis Payne

Mailing Address PO Box 1749

City State Zip Code
Midland TX 79702-1749FEC ID number of contributing
federal political committee.**C**Name of Employer
Self EmployedOccupation
Petroleum Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	6	/	2	0	1	0

Transaction ID: SA11AI.43143

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

525.00

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 139 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Ms Carlotta Pearce

Mailing Address 6511 Yellowhammer Ave

City State Zip Code
 Tampa FL 33625-1549

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.00

Date of Receipt

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

Transaction ID: SA11AI.38098

Amount of Each Receipt this Period

67.00

B.

Full Name (Last, First, Middle Initial)
 Mr. Kenneth D Peitzmeyer

Mailing Address 14 Palmetto Ln

City State Zip Code
 Saint Marys GA 31558-2689

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Paul Clark Ford Mercury

Occupation
 Fleet Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: SA11AI.37573

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)
 Mrs. Marie Therese Pero

Mailing Address 3037 122nd PI NE

City State Zip Code
 Bellevue WA 98005-1522

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

587.00

Date of Receipt

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

Transaction ID: SA11AI.46037

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

217.00

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
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(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Anne Timothy Perri

Mailing Address 4975 SW 65th Ave

City

Portland

State

OR

Zip Code

97221-1172

FEC ID number of contributing
federal political committee.

C

Name of Employer
Best Buy In Town

Occupation

Secretary/treas.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.45871

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Anne Timothy Perri

Mailing Address 4975 SW 65th Ave

City

Portland

State

OR

Zip Code

97221-1172

FEC ID number of contributing
federal political committee.

C

Name of Employer
Best Buy In Town

Occupation

Secretary/treas.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

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

Transaction ID: SA11AI.45872

Amount of Each Receipt this Period

60.00

C.

Full Name (Last, First, Middle Initial)

Mr. Charlotte J Peterson

Mailing Address 11193 NE 8th Ct

City

Biscayne Park

State

FL

Zip Code

33161-7205

FEC ID number of contributing
federal political committee.

C

Name of Employer
H. D. Of Miami

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 1 0

Transaction ID: SA11AI.37954

Amount of Each Receipt this Period

225.00

SUBTOTAL of Receipts This Page (optional)

385.00

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
 AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mr George L. Pfaff

Mailing Address 16 Beaver Creek Ln

City

Asheville

State

NC

Zip Code

28804-2765

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 7 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.37143

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Mr George L. Pfaff

Mailing Address 16 Beaver Creek Ln

City

Asheville

State

NC

Zip Code

28804-2765

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

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

Transaction ID: SA11AI.37144

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

Mr George L. Pfaff

Mailing Address 16 Beaver Creek Ln

City

Asheville

State

NC

Zip Code

28804-2765

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

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

Transaction ID: SA11AI.37142

Amount of Each Receipt this Period

200.00

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
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FOR LINE NUMBER: PAGE 142 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mrs. Hilda J Pianta

Mailing Address 150 Ocean Dr Apt 2B

City

Baton Rouge

State

LA

Zip Code

70806-4653

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

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

Transaction ID: SA11AI.42089

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Mrs. Hilda J Pianta

Mailing Address 150 Ocean Dr Apt 2B

City

Baton Rouge

State

LA

Zip Code

70806-4653

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.42090

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)

Mrs. Mary Jane Picone

Mailing Address 69 Dorchester Dr

City

Daly City

State

CA

Zip Code

94015-3445

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.00

Date of Receipt

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

Transaction ID: SA11AI.45205

Amount of Each Receipt this Period

226.00

SUBTOTAL of Receipts This Page (optional)

451.00

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
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(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mrs Georgia Pittman

Mailing Address 403 W 48th St Apt 10

City

Odessa

State

TX

Zip Code

79764-4107

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.43169

Amount of Each Receipt this Period

52.00

B.

Full Name (Last, First, Middle Initial)

Mr. Mitchel D. Platt

Mailing Address 10420 N McKinley Dr Apt 2502

City

Tampa

State

FL

Zip Code

33612-6430

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

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

Transaction ID: SA11AI.38090

Amount of Each Receipt this Period

4000.00

C.

Full Name (Last, First, Middle Initial)

Mr. Karl W Poorbaugh

Mailing Address 690 Clover Hill Rd

City

Somerset

State

PA

Zip Code

15501-1258

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.34071

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

4102.00

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
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(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Mr. Karl W Poorbaugh

Mailing Address 690 Clover Hill Rd

City State Zip Code
Somerset PA 15501-1258

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
09 23 2010

Transaction ID: SA11AI.34069

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)
 Ms Carolyn A. Porter

Mailing Address 112 W Drewry Ln

City State Zip Code
Raleigh NC 27609-7714

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
08 20 2010

Transaction ID: SA11AI.36909

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)
 Mr Leon W Potter

Mailing Address O-508 Leonard St NW

City State Zip Code
Grand Rapids MI 49534-6850

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.81

Date of Receipt

M M / D D / Y Y Y Y
08 20 2010

Transaction ID: SA11AI.40006

Amount of Each Receipt this Period

102.00

SUBTOTAL of Receipts This Page (optional)

622.00

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
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION**A.**

Full Name (Last, First, Middle Initial)

Joseph P. Prescott

Mailing Address 3495 Dalhart Ave

City

Simi Valley

State

CA

Zip Code

93063-1411

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

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

Transaction ID: SA11AI.44972

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Miss Rita M Price

Mailing Address PO Box 8675

City

Utica

State

NY

Zip Code

13505-8675

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

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

Transaction ID: SA11AI.33584

Amount of Each Receipt this Period

60.00

C.

Full Name (Last, First, Middle Initial)

Miss Rita M Price

Mailing Address PO Box 8675

City

Utica

State

NY

Zip Code

13505-8675

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

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

Transaction ID: SA11AI.33585

Amount of Each Receipt this Period

90.00

SUBTOTAL of Receipts This Page (optional)

180.00

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
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(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Miss Rita M Price

Mailing Address PO Box 8675

City State Zip Code
Utica NY 13505-8675

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

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

Transaction ID: SA11AI.33586

Amount of Each Receipt this Period

90.00

B.

Full Name (Last, First, Middle Initial)
 Mr. Lloyd B Putman

Mailing Address PO Box 1655

City State Zip Code
Mills WY 82644-1655

FEC ID number of contributing
federal political committee.

C

Name of Employer
 L. L. Enterprises

Occupation
 Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.43426

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)
 Ms Beatrice Putnam

Mailing Address 225 Putnam Rd

City State Zip Code
Newbury VT 05051-9504

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.32354

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

190.00

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
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(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Ms Beatrice Putnam

Mailing Address 225 Putnam Rd

City State Zip Code
 Newbury VT 05051-9504

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: SA11AI.32355

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
 Mrs. Ann L Quest

Mailing Address 5609 Ursula Ln

City State Zip Code
 Dallas TX 75229-6429

FEC ID number of contributing
federal political committee.

C

Name of Employer
 not employed

Occupation
 volunteer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.42463

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
 Helen K Quinney

Mailing Address 3 Shepherds Cv Apt 118

City State Zip Code
 Little Rock AR 72205-7068

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.42182

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

375.00

TOTAL This Period (last page this line number only)

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mrs. Carolyn Randall

Mailing Address 22348 Regnart Rd

City

Cupertino

State

CA

Zip Code

95014-4825

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11AI.45445

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Mr. Dick Randall

Mailing Address 22348 Regnart Rd

City

Cupertino

State

CA

Zip Code

95014-4825

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11AI.45443

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

Mr. Anthony Rausin

Mailing Address 401 Terriwood Ave

City

Bakersfield

State

CA

Zip Code

93308-1149

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cimarron Oil Company

Occupation
Oil Producer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.45051

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

5750.00

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 149 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Mr. Joan C. Read

Mailing Address PO Box 1060

City State Zip Code
Magnolia TX 77353-1060

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
07 01 2010

Transaction ID: SA11AI.42755

Amount of Each Receipt this Period

225.00

B.

Full Name (Last, First, Middle Initial)
 Miss Nancy Reed

Mailing Address 2201 E Hickory Hill Rd

City State Zip Code
Argyle TX 76226-3136

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Self-Employed

Occupation
 Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
07 06 2010

Transaction ID: SA11AI.42621

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)
 Mr. Werner Reinartz

Mailing Address 5509 Daisy Ln

City State Zip Code
Coopersburg PA 18036-9548

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Reynolds Reynolds Electro-
 nics

Occupation
 Sales and Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y
09 23 2010

Transaction ID: SA11AI.35093

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

1325.00

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
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FOR LINE NUMBER: PAGE 150 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
 AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Mr. William B Rice

Mailing Address 6910 Hopeful Rd Apt 2112 Apt 2112

City State Zip Code
 Florence KY 41042-7940

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: SA11AI.38913

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
 Mr. William B Rice

Mailing Address 6910 Hopeful Rd Apt 2112 Apt 2112

City State Zip Code
 Florence KY 41042-7940

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 8 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.38911

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
 Mr. William B Rice

Mailing Address 6910 Hopeful Rd Apt 2112 Apt 2112

City State Zip Code
 Florence KY 41042-7940

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: SA11AI.38912

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Ms. Christine M. Richardson

Mailing Address 950 Grossmont Ave

City State Zip Code
 El Cajon CA 92020-5733

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.44478

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)
 Mr Roland Richter

Mailing Address 608 N Almond Dr

City State Zip Code
 Simpsonville SC 29681-3412

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.37279

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
 Mr Roland Richter

Mailing Address 608 N Almond Dr

City State Zip Code
 Simpsonville SC 29681-3412

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: SA11AI.37280

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

350.00

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
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Ms Lulu B. Robbins

Mailing Address RR 1 Box 185

City

Rome

State

PA

Zip Code

18837-9772

FEC ID number of contributing
federal political committee.

C

Name of Employer
Perry-Sink Nursery

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

363.00

Date of Receipt

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

Transaction ID: SA11AI.35281

Amount of Each Receipt this Period

31.00

B.

Full Name (Last, First, Middle Initial)

Ms Lulu B. Robbins

Mailing Address RR 1 Box 185

City

Rome

State

PA

Zip Code

18837-9772

FEC ID number of contributing
federal political committee.

C

Name of Employer
Perry-Sink Nursery

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.00

Date of Receipt

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

Transaction ID: SA11AI.35282

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Ms Lulu B. Robbins

Mailing Address RR 1 Box 185

City

Rome

State

PA

Zip Code

18837-9772

FEC ID number of contributing
federal political committee.

C

Name of Employer
Perry-Sink Nursery

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

438.00

Date of Receipt

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

Transaction ID: SA11AI.35283

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

106.00

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
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Ms Lulu B. Robbins

Mailing Address RR 1 Box 185

City State Zip Code
 Rome PA 18837-9772

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Perry-Sink Nursery

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

488.00

Date of Receipt

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

Transaction ID: SA11AI.35284

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)
 Mr. Hall M Roberts

Mailing Address PO Box 10

City State Zip Code
 Postville IA 52162-0010

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Hall Roberts' Son, Inc.

Occupation
 President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

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

Transaction ID: SA11AI.40161

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)
 Dr. Richard Roberts, M.D.

Mailing Address 120 Arbutus Dr

City State Zip Code
 Lakewood NJ 08701-1614

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Mutual Pharmaceutical Co.

Occupation
 Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 8 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.32926

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

5200.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mr. Martin M Rockers

Mailing Address 32045 NE 2200th Rd

City

Greeley

State

KS

Zip Code

66033-9107

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 20 / 2010

Transaction ID: SA11AI.41730

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

Mr. Robert W Roddy

Mailing Address 6150 Kim Rd

City

Canyon

State

TX

Zip Code

79015-6096

FEC ID number of contributing
federal political committee.

C

Name of Employer
US Navy

Occupation

Retired Military

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 19 / 2010

Transaction ID: SA11AI.43091

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mr. Edward B. Rogers, Jr.

Mailing Address 511 1st St

City

Coronado

State

CA

Zip Code

92118-1105

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 17 / 2010

Transaction ID: SA11AI.44589

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Mr & Mrs Kenneth W. Rogers

Mailing Address 4840 Carole Ct

City State Zip Code
Bartlesville OK 74006-2811

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: SA11AI.42341

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)
 Jack C Rosenau

Mailing Address 1177 Old Fort Dr

City State Zip Code
Tallahassee FL 32301-4663

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.37701

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)
 Mrs. William L. Rosenberger

Mailing Address 753 Spring Ln

City State Zip Code
Lansdale PA 19446-6231

FEC ID number of contributing
federal political committee.

C

Name of Employer
 retired

Occupation
 retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.35903

Amount of Each Receipt this Period

400.00

SUBTOTAL of Receipts This Page (optional)

500.00

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
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(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Mr Joel Rothman

Mailing Address 27 Carmel Bay Dr

City State Zip Code
 Corona Del Mar CA 92625-1006

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Self Employed

Occupation
 Jazz Producer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.44770

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)
 Mr Burton W Rounds

Mailing Address 122 96th Ave W

City State Zip Code
 Duluth MN 55808-2105

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

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

Transaction ID: SA11AI.40671

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
 Mr Burton W Rounds

Mailing Address 122 96th Ave W

City State Zip Code
 Duluth MN 55808-2105

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

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

Transaction ID: SA11AI.40672

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION**A.**

Full Name (Last, First, Middle Initial)

Ms Julia R. Russell

Mailing Address 1314 Pennington Rd

City

Grenville

State

NM

Zip Code

88424-7513

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self EmployedOccupation
Rancher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

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

Transaction ID: SA11AI.43881

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Mr. Jerome D. Ryan

Mailing Address 806 Buchanan Blvd # 115324

City

Boulder City

State

NV

Zip Code

89005-2130

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

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

Transaction ID: SA11AI.43886

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Nicholas Ryan

Mailing Address 400 Locust St Ste 330

City

Des Moines

State

IA

Zip Code

50309-2450

FEC ID number of contributing
federal political committee.

C

Name of Employer
Concordia GroupOccupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11AI.40065

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1200.00

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 158 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION**A.**

Full Name (Last, First, Middle Initial)

Dr. Wayne L Ryan

Mailing Address 1606 S 187th Cir

City

Omaha

State

NE

Zip Code

68130-2809

FEC ID number of contributing
federal political committee.

C

Name of Employer
Streck LaboratoriesOccupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11AI.41935

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Mrs. Carolyn A. Saeman

Mailing Address 270 Saint Paul St Ste 300

City

Denver

State

CO

Zip Code

80206-5133

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	3	1	/	2	0	1	0

Transaction ID: SA11AI.43261

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

Mr. John V. Saeman

Mailing Address 270 Saint Paul St Ste 300

City

Denver

State

CO

Zip Code

80206-5133

FEC ID number of contributing
federal political committee.

C

Name of Employer
Medallion Enterprises, L.
L. C.Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	3	1	/	2	0	1	0

Transaction ID: SA11AI.43259

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

10500.00

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 159 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Mr. Burford Salmon

Mailing Address 1525 Lake Site Dr

City State Zip Code
Birmingham AL 35235-2713

FEC ID number of contributing
federal political committee.

C

Name of Employer
 ATS Inc

Occupation
 CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

07 / 08 / 2010

Transaction ID: SA11AI.38478

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)
 Mr. Edwin C. Sandham

Mailing Address 1964 SW Saint Andrews Dr

City State Zip Code
Palm City FL 34990-2210

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2799.00

Date of Receipt

07 / 07 / 2010

Transaction ID: SA11AI.38443

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)
 Mr. Edwin C. Sandham

Mailing Address 1964 SW Saint Andrews Dr

City State Zip Code
Palm City FL 34990-2210

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3049.00

Date of Receipt

07 / 19 / 2010

Transaction ID: SA11AI.38440

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

825.00

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 160 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
Mr. Edwin C. Sandham

Mailing Address 1964 SW Saint Andrews Dr

City State Zip Code
Palm City FL 34990-2210

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3249.00

Date of Receipt

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

Transaction ID: SA11AI.38442

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)
Mr. Edwin C. Sandham

Mailing Address 1964 SW Saint Andrews Dr

City State Zip Code
Palm City FL 34990-2210

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3486.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.38437

Amount of Each Receipt this Period

237.00

C.

Full Name (Last, First, Middle Initial)
Mr. Edwin C. Sandham

Mailing Address 1964 SW Saint Andrews Dr

City State Zip Code
Palm City FL 34990-2210

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3861.00

Date of Receipt

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

Transaction ID: SA11AI.38439

Amount of Each Receipt this Period

375.00

SUBTOTAL of Receipts This Page (optional)

812.00

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 161 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Mr. Edwin C. Sandham

Mailing Address 1964 SW Saint Andrews Dr

City State Zip Code
 Palm City FL 34990-2210

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4061.00

Date of Receipt

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

Transaction ID: SA11AI.38438

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)
 Mr. Edwin C. Sandham

Mailing Address 1964 SW Saint Andrews Dr

City State Zip Code
 Palm City FL 34990-2210

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4311.00

Date of Receipt

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

Transaction ID: SA11AI.38441

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
 Mr. Edwin C. Sandham

Mailing Address 1964 SW Saint Andrews Dr

City State Zip Code
 Palm City FL 34990-2210

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4611.00

Date of Receipt

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

Transaction ID: SA11AI.38436

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 162 / 277

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION**A.**Full Name (Last, First, Middle Initial)
Mr. John Sasso

Mailing Address PO Box 577

City	State	Zip Code
Gwynedd Valley	PA	19437-0577

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	6		2	0	1	0

Transaction ID: SA11AI.35887

Amount of Each Receipt this Period

250.00

B.Full Name (Last, First, Middle Initial)
Mr Gerald E Schmidt

Mailing Address 1715 Oswego St NW

City	State	Zip Code
Grand Rapids	MI	49504-4957

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

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

Transaction ID: SA11AI.39992

Amount of Each Receipt this Period

100.00

C.Full Name (Last, First, Middle Initial)
Beverly Schneider

Mailing Address 1841 Highway N

City	State	Zip Code
Pacific	MO	63069-3617

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.41466

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 163 / 277

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION**A.**Full Name (Last, First, Middle Initial)
Ms. Agnes Schoenfeld

Mailing Address 391 Common St Apt 207

City	State	Zip Code
Dedham	MA	02026-4057

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

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

Transaction ID: SA11AI.32137

Amount of Each Receipt this Period

115.00

B.Full Name (Last, First, Middle Initial)
Ms. Margaret A. Schuhmann

Mailing Address 1622 Dauphin Ave

City	State	Zip Code
Wyomissing	PA	19610-2314

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.00

Date of Receipt

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

Transaction ID: SA11AI.36021

Amount of Each Receipt this Period

301.00

C.Full Name (Last, First, Middle Initial)
Mrs. Carolyn A. Scifres

Mailing Address 26700 Palo Hills Dr

City	State	Zip Code
Los Altos	CA	94022-1927

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	3	/	2	0	1	0

Transaction ID: SA11AI.45210

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

2916.00

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 164 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION**A.**Full Name (Last, First, Middle Initial)
Mr. Donald R Scifres

Mailing Address 26700 Palo Hills Dr

City	State	Zip Code
Los Altos	CA	94022-1927

FEC ID number of contributing
federal political committee.

C

Name of Employer
SDL IncOccupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	0

Transaction ID: SA11AI.45208

Amount of Each Receipt this Period

2500.00

B.Full Name (Last, First, Middle Initial)
Mrs. Eva Scott

Mailing Address PO Box 650

City	State	Zip Code
Amelia Court House	VA	23002-0650

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self EmployedOccupation
Office Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	6		2	0	1	0

Transaction ID: SA11AI.36609

Amount of Each Receipt this Period

150.00

C.Full Name (Last, First, Middle Initial)
Mr John E Seber

Mailing Address 632 Birch St

City	State	Zip Code
Jeannette	PA	15644-2807

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

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

Transaction ID: SA11AI.34132

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

2900.00

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 165 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Mrs Myrtle M Servat

Mailing Address 601 Wiltz St
 D1 927831

City State Zip Code
 Rayne LA 70578-5733

FEC ID number of contributing
 federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.42062

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
 Mr. Robert E Shanahan

Mailing Address 3028 Duncan Ln

City State Zip Code
 Pittsburgh PA 15236-1570

FEC ID number of contributing
 federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: SA11AI.33970

Amount of Each Receipt this Period

400.00

C.

Full Name (Last, First, Middle Initial)
 Mr Ned R. Shanaman

Mailing Address PO Box 163

City State Zip Code
 Richland PA 17087-0163

FEC ID number of contributing
 federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.34660

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 166 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION**A.**

Full Name (Last, First, Middle Initial)

Mr Ned R. Shanaman

Mailing Address PO Box 163

City

Richland

State

PA

Zip Code

17087-0163

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

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

Transaction ID: SA11AI.34659

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

Ms. Diana M Sharbaugh

Mailing Address 521 W Crawford St

City

Ebensburg

State

PA

Zip Code

15931-1310

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

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

Transaction ID: SA11AI.34244

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

Ms. Diana M Sharbaugh

Mailing Address 521 W Crawford St

City

Ebensburg

State

PA

Zip Code

15931-1310

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

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

Transaction ID: SA11AI.34243

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

500.00

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 167 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Ms. Diana M Sharbaugh

Mailing Address 521 W Crawford St

City State Zip Code
Ebensburg PA 15931-1310

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

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

Transaction ID: SA11AI.34242

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)
 Ms. Diana M Sharbaugh

Mailing Address 521 W Crawford St

City State Zip Code
Ebensburg PA 15931-1310

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

710.00

Date of Receipt

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

Transaction ID: SA11AI.34245

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)
 Ms Florence E. Sheehan

Mailing Address 308 N Elm St

City State Zip Code
Lititz PA 17543-1308

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

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

Transaction ID: SA11AI.34872

Amount of Each Receipt this Period

52.00

SUBTOTAL of Receipts This Page (optional)

372.00

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Ms Florence E. Sheehan

Mailing Address 308 N Elm St

City

Lititz

State

PA

Zip Code

17543-1308

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.00

Date of Receipt

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

Transaction ID: SA11AI.34870

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

Ms Florence E. Sheehan

Mailing Address 308 N Elm St

City

Lititz

State

PA

Zip Code

17543-1308

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

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

Transaction ID: SA11AI.34871

Amount of Each Receipt this Period

52.00

C.

Full Name (Last, First, Middle Initial)

Ms. Chloe C. Shelby

Mailing Address 4317 Starr Jordan Dr

City

Annandale

State

VA

Zip Code

22003-3821

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kaiser Permanente

Occupation

Medical Technologist

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.00

Date of Receipt

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

Transaction ID: SA11AI.36431

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

122.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Mr. James Sherman

Mailing Address 4 Tahoe Ln

City State Zip Code
Sea Ranch Lks FL 33308-2328

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

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

Transaction ID: SA11AI.37966

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)
 Sylvia Janet Shiller

Mailing Address 6 Canterbury Ct

City State Zip Code
Easton PA 18040-8325

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

620.00

Date of Receipt

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

Transaction ID: SA11AI.35097

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)
 Sylvia Janet Shiller

Mailing Address 6 Canterbury Ct

City State Zip Code
Easton PA 18040-8325

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

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

Transaction ID: SA11AI.35094

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

380.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Sylvia Janet Shiller

Mailing Address 6 Canterbury Ct

City State Zip Code
 Easton PA 18040-8325

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

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

Transaction ID: SA11AI.35096

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)
 Sylvia Janet Shiller

Mailing Address 6 Canterbury Ct

City State Zip Code
 Easton PA 18040-8325

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.00

Date of Receipt

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

Transaction ID: SA11AI.35095

Amount of Each Receipt this Period

60.00

C.

Full Name (Last, First, Middle Initial)
 Mr. John F. Shock

Mailing Address 585 Harrogate Rd

City State Zip Code
 Pittsburgh PA 15241-2028

FEC ID number of contributing
federal political committee.

C

Name of Employer
Bayer Corp

Occupation
Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.34009

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Mr. Ronald G Sidovar

Mailing Address PO Box 190
 9 Whitebirch Ridge

City State Zip Code
 Hamlin PA 18427-0190

FEC ID number of contributing
 federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.35205

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)
 Mr. Ronald G Sidovar

Mailing Address PO Box 190
 9 Whitebirch Ridge

City State Zip Code
 Hamlin PA 18427-0190

FEC ID number of contributing
 federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

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

Transaction ID: SA11AI.35204

Amount of Each Receipt this Period

500.00

C.

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

Mailing Address 327 W Main St

City State Zip Code
 Clarion PA 16214-1054

FEC ID number of contributing
 federal political committee.

C

Name of Employer
 Siegel Insurance

Occupation
 Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.00

Date of Receipt

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

Transaction ID: SA11AI.34366

Amount of Each Receipt this Period

287.00

SUBTOTAL of Receipts This Page (optional)

1087.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Mitchell Simons

Mailing Address 81 Sweetbriar Ave

City State Zip Code
 Fort Thomas KY 41075-1620

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 ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.38914

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)
 Mr Glenn Simpson

Mailing Address 905 Ute Pass

City State Zip Code
 San Angelo TX 76901-5521

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

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

Transaction ID: SA11AI.42654

Amount of Each Receipt this Period

74.00

C.

Full Name (Last, First, Middle Initial)
 Ms Agnes T Smith

Mailing Address PO Box 537

City State Zip Code
 Northwood ND 58267-0537

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

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

Transaction ID: SA11AI.40813

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

324.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mr. Arthur O. Smith

Mailing Address 740 E Bay Point Rd

City

Milwaukee

State

WI

Zip Code

53217-1350

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

Name of Employer

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11AI.40280

Amount of Each Receipt this Period

400.00

B.

Full Name (Last, First, Middle Initial)

Mr. James Smith

Mailing Address 421 Vincent Ave

City

Metairie

State

LA

Zip Code

70005-4421

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

Name of Employer

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

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

Transaction ID: SA11AI.42021

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

Mr William H. Spencer

Mailing Address 195 Surfson Dr

City

Smith River

State

CA

Zip Code

95567-9467

FEC ID number of contributing
federal political committee.**C**Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

227.00

Date of Receipt

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

Transaction ID: SA11AI.45541

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

585.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
Ms. Charlene Sprankel

Mailing Address 120 Fenway Dr

City State Zip Code
Decatur IL 62521-5610

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3309.00

Date of Receipt

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

Transaction ID: SA11AI.41396

Amount of Each Receipt this Period

700.00

B.

Full Name (Last, First, Middle Initial)
Mrs. Arlana St. Clair

Mailing Address 3401 Wible Rd

City State Zip Code
Bakersfield CA 93309-6509

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self - St Clair Investmen-
ts

Occupation
Property Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

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

Transaction ID: SA11AI.45059

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Arlana St. Clair

Mailing Address 3401 Wible Rd

City State Zip Code
Bakersfield CA 93309-6509

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self - St Clair Investmen-
ts

Occupation
Property Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.45060

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1450.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
Mr. Franklin A Stauffer

Mailing Address 620 E Arch St

City State Zip Code
Palmyra PA 17078-1805

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

784.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 6 / 2 0 1 0

Transaction ID: SA11AI.34638

Amount of Each Receipt this Period

114.00

B.

Full Name (Last, First, Middle Initial)
Mr. Franklin A Stauffer

Mailing Address 620 E Arch St

City State Zip Code
Palmyra PA 17078-1805

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

898.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.34639

Amount of Each Receipt this Period

114.00

C.

Full Name (Last, First, Middle Initial)
Mr. Franklin A Stauffer

Mailing Address 620 E Arch St

City State Zip Code
Palmyra PA 17078-1805

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1012.00

Date of Receipt

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

Transaction ID: SA11AI.34640

Amount of Each Receipt this Period

114.00

SUBTOTAL of Receipts This Page (optional)

342.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Mrs. Nell Steele

Mailing Address 1034 Arkansas

City State Zip Code
 Helena AR 72342-3609

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.42190

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)
 Mrs Terry A Straight

Mailing Address 6262 Saints Hill Ln

City State Zip Code
 Broad Run VA 20137-2319

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: SA11AI.36095

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
 Ms. Yolande H Strawinski

Mailing Address 1130 Sylvan Pl

City State Zip Code
 Monterey CA 93940-4903

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

931.00

Date of Receipt

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

Transaction ID: SA11AI.45184

Amount of Each Receipt this Period

303.00

SUBTOTAL of Receipts This Page (optional)

653.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Ms Kathryn E. Streigle

Mailing Address 8408 Wildrock Ct

City

Arlington

State

TX

Zip Code

76001-2946

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

203.00

Date of Receipt

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

Transaction ID: SA11AI.42561

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Ms Kathryn E. Streigle

Mailing Address 8408 Wildrock Ct

City

Arlington

State

TX

Zip Code

76001-2946

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

228.00

Date of Receipt

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

Transaction ID: SA11AI.42559

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Rev. Gary S. Sumpter

Mailing Address PO Box 98
418 Church St

City

Scotia

State

CA

Zip Code

95565-0098

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Clergy

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.45537

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Mr. Robert Sunderland

Mailing Address 953 Pyrite Ave

City State Zip Code
 Henderson NV 89011-3059

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

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

Transaction ID: SA11AI.43891

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)
 Mr. Robert Sunderland

Mailing Address 953 Pyrite Ave

City State Zip Code
 Henderson NV 89011-3059

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

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

Transaction ID: SA11AI.43892

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)
 Mr. George B. Suter

Mailing Address 2580 Greenwood Acres Dr

City State Zip Code
 Dekalb IL 60115-4913

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 2 6 / 2 0 1 0

Transaction ID: SA11AI.41008

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1500.00

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 179 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION**A.**

Full Name (Last, First, Middle Initial)

Mr Robert L Swain

Mailing Address 188 W Caney Creek Rd

City

Rogersville

State

TN

Zip Code

37857-3839

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	0		2	0	1	0

Transaction ID: SA11AI.38690

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Miss Ethel Takacs

Mailing Address 7025 Yellowstone Blvd Apt 20G

City

Forest Hills

State

NY

Zip Code

11375-3179

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

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

Transaction ID: SA11AI.33258

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

Mr Hortencio Ignacio Tampe

Mailing Address 12 Lily Pond Ct

City

Rockville

State

MD

Zip Code

20852-4230

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	1	0

Transaction ID: SA11AI.36225

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

5245.00

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 180 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mr Hortencio Ignacio Tampe

Mailing Address 12 Lily Pond Ct

City

Rockville

State

MD

Zip Code

20852-4230

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: SA11AI.36224

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Mr. Charles Phillip Tholen

Mailing Address 7626 S Marion Ave

City

Tulsa

State

OK

Zip Code

74136-8005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Samson Investment Company

Occupation

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11AI.42375

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

Mr. Nancy Tholen

Mailing Address 7626 S Marion Ave

City

Tulsa

State

OK

Zip Code

74136-8005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11AI.42377

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

10100.00

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 181 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mr Robert L. Toner

Mailing Address 222 Foxhound Dr

City

Lafayette Hill

State

PA

Zip Code

19444-1033

FEC ID number of contributing
federal political committee.

C

Name of Employer
Tower Cable Equipment

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4250.00

Date of Receipt

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

Transaction ID: SA11AI.35894

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Mr. Robert S. Troth

Mailing Address 3003 Gulf Shore Blvd N Apt 301

City

Naples

State

FL

Zip Code

34103-3912

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

402.00

Date of Receipt

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

Transaction ID: SA11AI.38507

Amount of Each Receipt this Period

152.00

C.

Full Name (Last, First, Middle Initial)

Mrs. Martha H Turney

Mailing Address 1361 E Boot Rd # 265

City

West Chester

State

PA

Zip Code

19380-5988

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

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

Transaction ID: SA11AI.35815

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

752.00

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 182 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION**A.**

Full Name (Last, First, Middle Initial)

Mrs. Martha H Turney

Mailing Address 1361 E Boot Rd # 265

City

West Chester

State

PA

Zip Code

19380-5988

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

490.00

Date of Receipt

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

Transaction ID: SA11AI.35816

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Mrs Catherine C. Uebersetzg

Mailing Address 1005 Bristol Dr

City

Waunakee

State

WI

Zip Code

53597-1805

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	3	0	/	2	0	1	0

Transaction ID: SA11AI.40330

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mrs. Juliet Vincent

Mailing Address 3107 Woodland Ridge Dr

City

West Bloomfield

State

MI

Zip Code

48323-3568

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired Actress

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.39808

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 183 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
Mr Don W. Wade

Mailing Address 6 Linda Vis

City State Zip Code
Orinda CA 94563-2311

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

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

Transaction ID: SA11AI.45381

Amount of Each Receipt this Period

280.00

B.

Full Name (Last, First, Middle Initial)
Mr Don W. Wade

Mailing Address 6 Linda Vis

City State Zip Code
Orinda CA 94563-2311

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Date of Receipt

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

Transaction ID: SA11AI.45383

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
Mr. Roger B. Walcott, Jr.

Mailing Address 32 Countryside Ln

City State Zip Code
Saint Louis MO 63131-3310

FEC ID number of contributing
federal political committee.

C

Name of Employer
Peabody Energy Co.

Occupation
Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

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

Transaction ID: SA11AI.41533

Amount of Each Receipt this Period

2100.00

SUBTOTAL of Receipts This Page (optional)

2480.00

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 184 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mr David Waldrip

Mailing Address 14613 Fm 1761

City

Raymondville

State

TX

Zip Code

78580-4499

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Date of Receipt

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

Transaction ID: SA11AI.43009

Amount of Each Receipt this Period

187.00

B.

Full Name (Last, First, Middle Initial)

Mr. Jearl D Walker

Mailing Address 6917 Bal Lake Dr

City

Fort Worth

State

TX

Zip Code

76116-8017

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: SA11AI.42600

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mrs. Mary E. Weaver

Mailing Address 317 Balmer Rd

City

Lititz

State

PA

Zip Code

17543-1331

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Housewife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.34873

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

337.00

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 185 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Dorothy M. Weickert

Mailing Address 795 W Monrovia Ave

City

Milwaukee

State

WI

Zip Code

53217-4432

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.40281

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Dorothy M. Weickert

Mailing Address 795 W Monrovia Ave

City

Milwaukee

State

WI

Zip Code

53217-4432

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.40282

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

Mr. Arthur Weigard

Mailing Address 11 N Beaver St Apt 403

City

York

State

PA

Zip Code

17401-1349

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.34797

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 186 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION**A.**

Full Name (Last, First, Middle Initial)

Mr. Rogers Wells

Mailing Address 6884 Windlass Ln

City

Gig Harbor

State

WA

Zip Code

98335-5103

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: SA11AI.46146

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Mrs. Margaret C Welsh

Mailing Address 643 Montezuma Dr

City

Pacifica

State

CA

Zip Code

94044-4028

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

228.00

Date of Receipt

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

Transaction ID: SA11AI.45230

Amount of Each Receipt this Period

56.00

C.

Full Name (Last, First, Middle Initial)

Ms Janetta F West

Mailing Address 102 County Road 1702

City

Saltillo

State

MS

Zip Code

38866-9342

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

375.00

Date of Receipt

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

Transaction ID: SA11AI.38780

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

706.00

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 187 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Ms Janetta F West

Mailing Address 102 County Road 1702

City

Saltillo

State

MS

Zip Code

38866-9342

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

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

Transaction ID: SA11AI.38779

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

Mr. Frank Wetherbee

Mailing Address PO Box 3650

City

Albany

State

GA

Zip Code

31706-3650

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.37579

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Mr. Frank Wetherbee

Mailing Address PO Box 3650

City

Albany

State

GA

Zip Code

31706-3650

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: SA11AI.37578

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

350.00

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 188 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION**A.**

Full Name (Last, First, Middle Initial)

Mr. Dean V. White

Mailing Address 1000 E 80th PI Ste 209N

City

Merrillville

State

IN

Zip Code

46410-5673

FEC ID number of contributing
federal political committee.

C

Name of Employer
Whiteco Industries, Inc.Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	6		2	0	1	0

Transaction ID: SA11AI.39497

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Mrs Rosemary A White

Mailing Address 18 Wm Holland Ln

City

Sisseton

State

SD

Zip Code

57262-2332

FEC ID number of contributing
federal political committee.

C

Name of Employer
NoneOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	3		2	0	1	0

Transaction ID: SA11AI.40775

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

Ms Geneva Whitlow

Mailing Address 507 W Oak Dr

City

Round Rock

State

TX

Zip Code

78664-3028

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: SA11AI.43050

Amount of Each Receipt this Period

70.00

SUBTOTAL of Receipts This Page (optional)

5105.00

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 189 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mrs. Georgia S Wiester

Mailing Address 7760 Santa Rosa Rd

City

Buellton

State

CA

Zip Code

93427-9421

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Housewife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 6 / 2 0 1 0

Transaction ID: SA11AI.45077

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Mrs. Cecil T Wiggins

Mailing Address 2605 Walton Ave

City

Mobile

State

AL

Zip Code

36606-2380

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.38582

Amount of Each Receipt this Period

70.00

C.

Full Name (Last, First, Middle Initial)

Mrs. Cecil T Wiggins

Mailing Address 2605 Walton Ave

City

Mobile

State

AL

Zip Code

36606-2380

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

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

Transaction ID: SA11AI.38583

Amount of Each Receipt this Period

80.00

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 190 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Mr Elmer D Wilcox

Mailing Address 919 109th Ave NE Apt 1201

City State Zip Code
 Bellevue WA 98004-4496

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.46034

Amount of Each Receipt this Period

101.00

B.

Full Name (Last, First, Middle Initial)
 Mr Loran F Wilkens

Mailing Address 625 S Main St

City State Zip Code
 Hesston KS 67062-8964

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.41818

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)
 Mr Loran F Wilkens

Mailing Address 625 S Main St

City State Zip Code
 Hesston KS 67062-8964

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.41819

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

251.00

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 191 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Mr. Roland F Wilkinson

Mailing Address 150 Mariner Rd Apt 249

City State Zip Code
Saint Augustine FL 32086-7209

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

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

Transaction ID: SA11AI.37620

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
 Mr. John A. Williams

Mailing Address 1006 Wilson Dr

City State Zip Code
Gulfport MS 39507-2739

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.00

Date of Receipt

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

Transaction ID: SA11AI.38816

Amount of Each Receipt this Period

2.00

C.

Full Name (Last, First, Middle Initial)
 Mr. John A. Williams

Mailing Address 1006 Wilson Dr

City State Zip Code
Gulfport MS 39507-2739

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

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

Transaction ID: SA11AI.38817

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

152.00

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
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(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Mrs. Barbara H. Wilson

Mailing Address 2540 Green St

City State Zip Code
 San Francisco CA 94123-4629

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.45274

Amount of Each Receipt this Period

125.00

B.

Full Name (Last, First, Middle Initial)
 Carol R Wilson

Mailing Address 2197 Sutter View Ln

City State Zip Code
 Lincoln CA 95648-7718

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1225.00

Date of Receipt

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

Transaction ID: SA11AI.45579

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)
 Ms. Evelyn K Wilson

Mailing Address 86 Hennig Dr

City State Zip Code
 Pittsburgh PA 15236-1569

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: SA11AI.33966

Amount of Each Receipt this Period

70.00

SUBTOTAL of Receipts This Page (optional)

345.00

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
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mrs Florence M. Windhorst

Mailing Address 409 Willows Ln

City

Aldan

State

PA

Zip Code

19018-3135

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 10 / 2010

Transaction ID: SA11AI.35462

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Mrs Florence M. Windhorst

Mailing Address 409 Willows Ln

City

Aldan

State

PA

Zip Code

19018-3135

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

09 / 17 / 2010

Transaction ID: SA11AI.35461

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Susan Wingate

Mailing Address 4685 Elk Valley Ct

City

Winston Salem

State

NC

Zip Code

27103-9718

FEC ID number of contributing
federal political committee.

C

Name of Employer
All Foot Care

Occupation

Nursing Home Coord

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 21 / 2010

Transaction ID: SA11AI.36829

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Miss Marjorie Wood

Mailing Address 12600 Marion Ln W Apt 618

City

Minnetonka

State

MN

Zip Code

55305-1351

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11AI.40561

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Mrs. Nancy Upjohn Woodworth

Mailing Address 3482 Oakdale

City

Hickory Corners

State

MI

Zip Code

49060-9314

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.39934

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Mr. Darrell Wotta

Mailing Address 10942 N Pusch Ridge Vistas Dr

City

Tucson

State

AZ

Zip Code

85737-7312

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

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

Transaction ID: SA11AI.43730

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1600.00

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
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(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Mr. Rufus Wysor

Mailing Address 9350 Babcock Blvd Apt 206

City State Zip Code
 Pittsburgh PA 15237-5085

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

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

Transaction ID: SA11AI.33987

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)
 Mr. Rufus Wysor

Mailing Address 9350 Babcock Blvd Apt 206

City State Zip Code
 Pittsburgh PA 15237-5085

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.00

Date of Receipt

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

Transaction ID: SA11AI.33989

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)
 Mr. Rufus Wysor

Mailing Address 9350 Babcock Blvd Apt 206

City State Zip Code
 Pittsburgh PA 15237-5085

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.33988

Amount of Each Receipt this Period

101.00

SUBTOTAL of Receipts This Page (optional)

201.00

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
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(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Ms. Marion S Yerkes

Mailing Address 3679 Blackfoot Ct SW

City

Grandville

State

MI

Zip Code

49418-1721

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

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

Transaction ID: SA11AI.39977

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

Mr John I Ykema

Mailing Address 1343 W Baltimore Pike Apt E41

City

Media

State

PA

Zip Code

19063-5519

FEC ID number of contributing
federal political committee.

C

Name of Employer
S.P.D. Technologies

Occupation

Engineer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.35567

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

David G Young

Mailing Address 2023 Salt Myrtle Ln

City

Orange Park

State

FL

Zip Code

32003-7073

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Real Estate

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11AI.37588

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1175.00

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

David G Young

Mailing Address 2023 Salt Myrtle Ln

City

Orange Park

State

FL

Zip Code

32003-7073

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: SA11AI.37589

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Mr. Arthur K Zellmer

Mailing Address PO Box 325

City

Davenport

State

WA

Zip Code

99122-0325

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

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

Transaction ID: SA11AI.46288

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mr. Frank W. Zielinski

Mailing Address 126 E Wing St Apt 211

City

Arlington Heights

State

IL

Zip Code

60004-6064

FEC ID number of contributing
federal political committee.

C

Name of Employer
Barnaby's of Northbrook

Occupation

Restaurant Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.40909

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

1150.00

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 198 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Mr. Frank W. Zielinski

Mailing Address 126 E Wing St Apt 211

City

Arlington Heights

State

IL

Zip Code

60004-6064

FEC ID number of contributing
federal political committee.

C

Name of Employer
Barnaby's of Northbrook

Occupation

Restaurant Owner

Receipt For:

☐ Primary
 ☐ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

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

Transaction ID: SA11AI.40910

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

25.00

TOTAL This Period (last page this line number only)

190007.00

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Sisk Mailing Service, Inc.

Mailing Address 203 Log Canoe Circle

City

Stevensville

State

MD

Zip Code

21666

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐
☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

14680.77

Date of Receipt

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

Transaction ID: SA15.32026

Amount of Each Receipt this Period

14680.77

Postage Refund

SUBTOTAL of Receipts This Page (optional)

14680.77

TOTAL This Period (last page this line number only)

14680.77

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

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

FOR LINE NUMBER: PAGE 200 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
Conrad Direct, Inc.

Mailing Address 300 Knickerbocker Road

City State Zip Code
Cresskill NJ 07626-7626

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

39745.34

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 3 / 2 0 1 0

Transaction ID: SA17.32675

Amount of Each Receipt this Period

12754.91

List Rental Income

B.

Full Name (Last, First, Middle Initial)
Conrad Direct, Inc.

Mailing Address 300 Knickerbocker Road

City State Zip Code
Cresskill NJ 07626-7626

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50659.66

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 3 / 2 0 1 0

Transaction ID: SA17.32676

Amount of Each Receipt this Period

10914.32

List Rental Income

C.

Full Name (Last, First, Middle Initial)
Conrad Direct, Inc.

Mailing Address 300 Knickerbocker Road

City State Zip Code
Cresskill NJ 07626-7626

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

58967.45

Date of Receipt

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

Transaction ID: SA17.32677

Amount of Each Receipt this Period

8307.79

List Rental Income

SUBTOTAL of Receipts This Page (optional)

31977.02

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 201 / 277

(check only one)

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

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NAME OF COMMITTEE (In Full)
 AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 Nova List Company

Mailing Address 13755 Sunrise Valley Drive
 Suite 450

City State Zip Code
 Herndon VA 20171-0171

FEC ID number of contributing
 federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8574.00

Date of Receipt

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

Transaction ID: SA17.36116

Amount of Each Receipt this Period

1144.94

List Rental Income

B.

Full Name (Last, First, Middle Initial)
 Nova List Company

Mailing Address 13755 Sunrise Valley Drive
 Suite 450

City State Zip Code
 Herndon VA 20171-0171

FEC ID number of contributing
 federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9019.00

Date of Receipt

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

Transaction ID: SA17.36117

Amount of Each Receipt this Period

445.00

List Rental Income

SUBTOTAL of Receipts This Page (optional)

1589.94

TOTAL This Period (last page this line number only)

33566.96

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 202 / 277

<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)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
American Express

Mailing Address P.O. Box 53852

City Phoenix State AZ Zip Code 85072-3852

Purpose of Disbursement
Merchant Credit Card Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46634

Date of Disbursement

07 / 01 / 2010

Amount of Each Disbursement this Period

4.95

B.

Full Name (Last, First, Middle Initial)
American Express

Mailing Address P.O. Box 53852

City Phoenix State AZ Zip Code 85072-3852

Purpose of Disbursement
Merchant Credit Card Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46635

Date of Disbursement

07 / 06 / 2010

Amount of Each Disbursement this Period

91.40

C.

Full Name (Last, First, Middle Initial)
American Express

Mailing Address P.O. Box 53852

City Phoenix State AZ Zip Code 85072-3852

Purpose of Disbursement
Merchant Credit Card Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46636

Date of Disbursement

08 / 02 / 2010

Amount of Each Disbursement this Period

4.95

SUBTOTAL of Disbursements This Page (optional)

101.30

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 203 / 277

<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)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address P.O. Box 53852

City
Phoenix

State
AZ

Zip Code
85072-3852

Purpose of Disbursement
Merchant Credit Card Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46637

Date of Disbursement

/ /

Amount of Each Disbursement this Period

112.04

B.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address P.O. Box 53852

City
Phoenix

State
AZ

Zip Code
85072-3852

Purpose of Disbursement
Merchant Credit Card Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46638

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4.95

C.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address P.O. Box 53852

City
Phoenix

State
AZ

Zip Code
85072-3852

Purpose of Disbursement
Merchant Credit Card Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46639

Date of Disbursement

/ /

Amount of Each Disbursement this Period

154.95

SUBTOTAL of Disbursements This Page (optional)

271.94

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 204 / 277

<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)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
American Express

Mailing Address Suite 0002

City Chicago State IL Zip Code 60679-0002

Purpose of Disbursement
Credit Card Payment

Candidate Name

Category/
Type

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

State: District:

Transaction ID: SB21B.46633

Date of Disbursement

09 / 17 / 2010

Amount of Each Disbursement this Period

1461.15

B.

Full Name (Last, First, Middle Initial)
Amtrak

Mailing Address 30th and Market St, Fl. 5

City Philadelphia State PA Zip Code 19102

Purpose of Disbursement
Travel Expense

Candidate Name

Category/
Type

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

State: District:

Transaction ID: SB21B.46633.2

Date of Disbursement

09 / 17 / 2010

Amount of Each Disbursement this Period

220.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Amtrak

Mailing Address 30th and Market St, Fl. 5

City Philadelphia State PA Zip Code 19102

Purpose of Disbursement
Travel Expenses

Candidate Name

Category/
Type

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

State: District:

Transaction ID: SB21B.46633.3

Date of Disbursement

09 / 17 / 2010

Amount of Each Disbursement this Period

150.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

1461.15

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 205 / 277

<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)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Amtrak

Mailing Address 30th and Market St, Fl. 5

City Philadelphia State PA Zip Code 19102

Purpose of Disbursement

Travel Expenses

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.46633.4

Date of Disbursement

09 / 17 / 2010

Amount of Each Disbursement this Period

21.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Staples Office

Mailing Address

City State Zip Code

Purpose of Disbursement

Printing & Reproduction

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.46633.5

Date of Disbursement

09 / 17 / 2010

Amount of Each Disbursement this Period

503.91

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Amtrak

Mailing Address 30th and Market St, Fl. 5

City Philadelphia State PA Zip Code 19102

Purpose of Disbursement

Travel Expenses

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.46633.6

Date of Disbursement

09 / 17 / 2010

Amount of Each Disbursement this Period

220.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 206 / 277

<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)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
American Heritage Credit Union

Mailing Address P.O. Box 67001

City Harrisburg State PA Zip Code 17106-7001

Purpose of Disbursement
Credit Card Payment

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB21B.46596

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2432.53

B.

Full Name (Last, First, Middle Initial)
Travelocity.com

Mailing Address 11603 Crosswinds Way, Suite 125

City San Antonio State TX Zip Code 78233

Purpose of Disbursement
Travel Expenses

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB21B.46596.0

Date of Disbursement

/ /

Amount of Each Disbursement this Period

189.10

[MEMO ITEM]

C.

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

Mailing Address 7930 Jones Branch Drive
Suite 1100

City McLean State VA Zip Code 22102

Purpose of Disbursement
Travel Expenses

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB21B.46596.1

Date of Disbursement

/ /

Amount of Each Disbursement this Period

198.93

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

2432.53

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 207 / 277

<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)
AMERICA'S FOUNDATION

A. Full Name (Last, First, Middle Initial) Travelocity.com	Transaction ID: SB21B.46596.4 Date of Disbursement
Mailing Address 11603 Crosswinds Way, Suite 125	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 2 / 2 0 1 0</div> </div>
City San Antonio State TX Zip Code 78233	Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expenses	<div>19.95</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Hertz Rent-A-Car	Transaction ID: SB21B.46596.8 Date of Disbursement
Mailing Address 225 Brae Boulevard	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 2 / 2 0 1 0</div> </div>
City Park Ridge State NJ Zip Code 07656	Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expenses	<div>166.83</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) United Airlines	Transaction ID: SB21B.46596.9 Date of Disbursement
Mailing Address 77 West Wacker Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 2 / 2 0 1 0</div> </div>
City Chicago State IL Zip Code 60601	Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expenses	<div>255.70</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
SUBTOTAL of Disbursements This Page (optional) ▶	<div>0.00</div>
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 208 / 277

<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)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Hertz Rent-A-Car

Mailing Address 225 Brae Boulevard

City Park Ridge State NJ Zip Code 07656

Purpose of Disbursement

Travel Expenses

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46596.10

Date of Disbursement

/ /

Amount of Each Disbursement this Period

60.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

United Airlines

Mailing Address 77 West Wacker Drive

City Chicago State IL Zip Code 60601

Purpose of Disbursement

Travel Expenses

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46596.11

Date of Disbursement

/ /

Amount of Each Disbursement this Period

398.70

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

United Airlines

Mailing Address 77 West Wacker Drive

City Chicago State IL Zip Code 60601

Purpose of Disbursement

Travel Expenses

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46596.13

Date of Disbursement

/ /

Amount of Each Disbursement this Period

553.70

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 209 / 277

<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)
AMERICA'S FOUNDATION

A. Full Name (Last, First, Middle Initial) Travelocity.com	Transaction ID: SB21B.46596.14 Date of Disbursement
Mailing Address 11603 Crosswinds Way, Suite 125	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 2 / 2 0 1 0</div> </div>
City San Antonio State TX Zip Code 78233	Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expenses	<div>19.95</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
B. Full Name (Last, First, Middle Initial) Travelocity.com	Transaction ID: SB21B.46596.15 Date of Disbursement
Mailing Address 11603 Crosswinds Way, Suite 125	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 2 / 2 0 1 0</div> </div>
City San Antonio State TX Zip Code 78233	Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expenses	<div>19.95</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
C. Full Name (Last, First, Middle Initial) American Heritage Credit Union	Transaction ID: SB21B.46597 Date of Disbursement
Mailing Address P.O. Box 67001	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 4 / 2 0 1 0</div> </div>
City Harrisburg State PA Zip Code 17106-7001	Amount of Each Disbursement this Period
Purpose of Disbursement Credit Card Payment	<div>2422.21</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	

SUBTOTAL of Disbursements This Page (optional)

2422.21

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 210 / 277

<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)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
US Airways

Mailing Address 3311 Airport Rd

City Allentown State PA Zip Code 18109

Purpose of Disbursement
Travel Expenses

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46597.0

Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
United Airlines

Mailing Address 77 West Wacker Drive

City Chicago State IL Zip Code 60601

Purpose of Disbursement
Travel Expenses

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46597.4

Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Amtrak

Mailing Address 30th and Market St, Fl. 5

City Philadelphia State PA Zip Code 19102

Purpose of Disbursement
Travel Expenses

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46597.5

Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 211 / 277

<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)
AMERICA'S FOUNDATION

A. Full Name (Last, First, Middle Initial) US Airways	Transaction ID: SB21B.46597.6 Date of Disbursement																				
Mailing Address 3311 Airport Rd	<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>8</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	4		2	0	1	0												
City Allentown State PA Zip Code 18109	Amount of Each Disbursement this Period																				
Purpose of Disbursement Travel Expenses Candidate Name <div style="float: right; border: 1px solid black; padding: 2px;">Category/ Type</div>	<table border="1"> <tr> <td colspan="10">30.00</td> </tr> </table>	30.00																			
30.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]																				
B. Full Name (Last, First, Middle Initial) Amtrak	Transaction ID: SB21B.46597.7 Date of Disbursement																				
Mailing Address 30th and Market St, Fl. 5	<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>8</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	4		2	0	1	0												
City Philadelphia State PA Zip Code 19102	Amount of Each Disbursement this Period																				
Purpose of Disbursement Travel Expenses Candidate Name <div style="float: right; border: 1px solid black; padding: 2px;">Category/ Type</div>	<table border="1"> <tr> <td colspan="10">180.00</td> </tr> </table>	180.00																			
180.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]																				
C. Full Name (Last, First, Middle Initial) United Airlines	Transaction ID: SB21B.46597.8 Date of Disbursement																				
Mailing Address 77 West Wacker Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	4		2	0	1	0												
City Chicago State IL Zip Code 60601	Amount of Each Disbursement this Period																				
Purpose of Disbursement Travel Expenses Candidate Name <div style="float: right; border: 1px solid black; padding: 2px;">Category/ Type</div>	<table border="1"> <tr> <td colspan="10">25.00</td> </tr> </table>	25.00																			
25.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]																				

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A. Full Name (Last, First, Middle Initial) United Airlines	Transaction ID: SB21B.46597.9 Date of Disbursement																				
Mailing Address 77 West Wacker Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	4		2	0	1	0												
City Chicago State IL Zip Code 60601	Amount of Each Disbursement this Period																				
Purpose of Disbursement Travel Expenses	<table border="1"> <tr> <td>29.00</td> </tr> </table>	29.00																			
29.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]																				
B. Full Name (Last, First, Middle Initial) American Heritage Credit Union	Transaction ID: SB21B.46598 Date of Disbursement																				
Mailing Address P.O. Box 67001	<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>8</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	5		2	0	1	0												
City Harrisburg State PA Zip Code 17106-7001	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Payment	<table border="1"> <tr> <td>4552.49</td> </tr> </table>	4552.49																			
4552.49																					
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) ▼																				
C. Full Name (Last, First, Middle Initial) United Airlines	Transaction ID: SB21B.46598.0 Date of Disbursement																				
Mailing Address 77 West Wacker Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	5		2	0	1	0												
City Chicago State IL Zip Code 60601	Amount of Each Disbursement this Period																				
Purpose of Disbursement Travel Expenses	<table border="1"> <tr> <td>242.70</td> </tr> </table>	242.70																			
242.70																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]																				

SUBTOTAL of Disbursements This Page (optional)

4552.49

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
United Airlines

Mailing Address 77 West Wacker Drive

City Chicago State IL Zip Code 60601

Purpose of Disbursement
Travel Expenses

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46598.1
Date of Disbursement

/ /

Amount of Each Disbursement this Period

603.70

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
United Airlines

Mailing Address 77 West Wacker Drive

City Chicago State IL Zip Code 60601

Purpose of Disbursement
Travel Expenses

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46598.2
Date of Disbursement

/ /

Amount of Each Disbursement this Period

29.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
United Airlines

Mailing Address 77 West Wacker Drive

City Chicago State IL Zip Code 60601

Purpose of Disbursement
Travel Expenses

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46598.3
Date of Disbursement

/ /

Amount of Each Disbursement this Period

448.40

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A. Full Name (Last, First, Middle Initial) United Airlines	Transaction ID: SB21B.46598.4 Date of Disbursement
Mailing Address 77 West Wacker Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 5 / 2 0 1 0</div> </div>
City Chicago State IL Zip Code 60601	Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expenses	<div>448.40</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
B. Full Name (Last, First, Middle Initial) United Airlines	Transaction ID: SB21B.46598.9 Date of Disbursement
Mailing Address 77 West Wacker Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 5 / 2 0 1 0</div> </div>
City Chicago State IL Zip Code 60601	Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expenses	<div>457.40</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
C. Full Name (Last, First, Middle Initial) United Airlines	Transaction ID: SB21B.46598.10 Date of Disbursement
Mailing Address 77 West Wacker Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 5 / 2 0 1 0</div> </div>
City Chicago State IL Zip Code 60601	Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expenses	<div>457.40</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 215 / 277

<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)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
United Airlines

Mailing Address 77 West Wacker Drive

City Chicago State IL Zip Code 60601

Purpose of Disbursement
Travel Expenses

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46598.11

Date of Disbursement

/ /

Amount of Each Disbursement this Period

195.40

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
United Airlines

Mailing Address 77 West Wacker Drive

City Chicago State IL Zip Code 60601

Purpose of Disbursement
Travel Expenses

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46598.12

Date of Disbursement

/ /

Amount of Each Disbursement this Period

195.40

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
United Airlines

Mailing Address 77 West Wacker Drive

City Chicago State IL Zip Code 60601

Purpose of Disbursement
Travel Expenses

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46598.18

Date of Disbursement

/ /

Amount of Each Disbursement this Period

389.50

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A. Full Name (Last, First, Middle Initial) Delta Airlines Mailing Address P.O. Box 20706	Transaction ID: SB21B.46598.19 Date of Disbursement <div> <div>08</div> <div>25</div> <div>2010</div> </div>
City Atlanta State GA Zip Code 30320 Purpose of Disbursement Travel Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>468.70</div> [MEMO ITEM]
B. Full Name (Last, First, Middle Initial) Amtrak Mailing Address 30th and Market St, Fl. 5 City Philadelphia State PA Zip Code 19102 Purpose of Disbursement Travel Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.46598.20 Date of Disbursement <div> <div>08</div> <div>25</div> <div>2010</div> </div> Amount of Each Disbursement this Period <div>360.00</div> [MEMO ITEM]
C. Full Name (Last, First, Middle Initial) American Heritage Credit Union Mailing Address P.O. Box 67001 City Harrisburg State PA Zip Code 17106-7001 Purpose of Disbursement Credit Card Payment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.46599 Date of Disbursement <div> <div>08</div> <div>25</div> <div>2010</div> </div> Amount of Each Disbursement this Period <div>154.82</div>

SUBTOTAL of Disbursements This Page (optional)

154.82

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A. Full Name (Last, First, Middle Initial) Federal Express	Transaction ID: SB21B.46599.0 Date of Disbursement
Mailing Address 942 South Shady Grove Road	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 5 / 2 0 1 0</div> </div>
City Memphis State TN Zip Code 38120	Amount of Each Disbursement this Period
Purpose of Disbursement Postage & Delivery	<div>154.82</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) American Heritage Credit Union	Transaction ID: SB21B.46600 Date of Disbursement
Mailing Address P.O. Box 67001	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 6 / 2 0 1 0</div> </div>
City Harrisburg State PA Zip Code 17106-7001	Amount of Each Disbursement this Period
Purpose of Disbursement Credit Card Payment	<div>7050.80</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Hotels.com	Transaction ID: SB21B.46600.0 Date of Disbursement
Mailing Address 10440 North Central Epwy Suite 400	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 6 / 2 0 1 0</div> </div>
City Dallas State TX Zip Code 75231	Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expenses	<div>99.24</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

7050.80

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)

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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)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
Hotels.com

Mailing Address 10440 North Central Epwy Suite 400

City State Zip Code
Dallas TX 75231

Purpose of Disbursement
Travel Expenses

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB21B.46600.1
Date of Disbursement

/ /

Amount of Each Disbursement this Period

121.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Verizon Wireless

Mailing Address P.O. Box 41556

City State Zip Code
Philadelphia PA 19101-1464

Purpose of Disbursement
Telephone

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB21B.46600.4
Date of Disbursement

/ /

Amount of Each Disbursement this Period

372.44

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
US Airways

Mailing Address 3311 Airport Rd

City State Zip Code
Allentown PA 18109

Purpose of Disbursement
Travel Expenses

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB21B.46600.5
Date of Disbursement

/ /

Amount of Each Disbursement this Period

569.70

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 219 / 277

<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)
AMERICA'S FOUNDATION

A. Full Name (Last, First, Middle Initial) United Airlines	Transaction ID: SB21B.46600.6 Date of Disbursement
Mailing Address 77 West Wacker Drive	<div> <div>MM / DD / YY</div> <div>09 / 16 / 2010</div> </div>
City Chicago State IL Zip Code 60601	Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expenses	<div> <div>Amount</div> <div>619.40</div> </div>
Candidate Name	<div> <div>Category/Type</div> <div></div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> <div>Disbursement For:</div> <div> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </div> </div>
B. Full Name (Last, First, Middle Initial) US Airways	Transaction ID: SB21B.46600.7 Date of Disbursement
Mailing Address 3311 Airport Rd	<div> <div>MM / DD / YY</div> <div>09 / 16 / 2010</div> </div>
City Allentown State PA Zip Code 18109	Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expenses	<div> <div>Amount</div> <div>386.70</div> </div>
Candidate Name	<div> <div>Category/Type</div> <div></div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> <div>Disbursement For:</div> <div> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </div> </div>
C. Full Name (Last, First, Middle Initial) Continental Airlines	Transaction ID: SB21B.46600.8 Date of Disbursement
Mailing Address 1600 Smith Street	<div> <div>MM / DD / YY</div> <div>09 / 16 / 2010</div> </div>
City Houston State TX Zip Code 77002	Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expenses	<div> <div>Amount</div> <div>1117.90</div> </div>
Candidate Name	<div> <div>Category/Type</div> <div></div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> <div>Disbursement For:</div> <div> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </div> </div>

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A. Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address P.O. Box 41556	Transaction ID: SB21B.46600.17 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 6 / 2 0 1 0</div> </div>
City Philadelphia State PA Zip Code 19101-1464 Purpose of Disbursement Telephone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>241.48</div> [MEMO ITEM]
B. Full Name (Last, First, Middle Initial) Hertz Rent-A-Car Mailing Address 225 Brae Boulevard City Park Ridge State NJ Zip Code 07656 Purpose of Disbursement Travel Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.46600.19 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 6 / 2 0 1 0</div> </div> Amount of Each Disbursement this Period <div>376.34</div> [MEMO ITEM]
C. Full Name (Last, First, Middle Initial) United Airlines Mailing Address 77 West Wacker Drive City Chicago State IL Zip Code 60601 Purpose of Disbursement Travel Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.46600.20 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 6 / 2 0 1 0</div> </div> Amount of Each Disbursement this Period <div>601.70</div> [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ►

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A. Full Name (Last, First, Middle Initial) United Airlines	Transaction ID: SB21B.46600.21 Date of Disbursement																				
Mailing Address 77 West Wacker Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	6		2	0	1	0												
City Chicago State IL Zip Code 60601	Amount of Each Disbursement this Period																				
Purpose of Disbursement Travel Expenses	<table border="1"> <tr> <td>3</td><td>1</td><td>2</td><td>.</td><td>2</td><td>0</td> </tr> </table>	3	1	2	.	2	0														
3	1	2	.	2	0																
Candidate Name	[MEMO ITEM]																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Family Research Council Action	Transaction ID: SB21B.46600.22 Date of Disbursement																				
Mailing Address 801 G Street, NW	<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>9</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	6		2	0	1	0												
City Washington State DC Zip Code 20001	Amount of Each Disbursement this Period																				
Purpose of Disbursement Conference Fee	<table border="1"> <tr> <td>1</td><td>0</td><td>0</td><td>.</td><td>0</td><td>0</td> </tr> </table>	1	0	0	.	0	0														
1	0	0	.	0	0																
Candidate Name	[MEMO ITEM]																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) United Airlines	Transaction ID: SB21B.46600.23 Date of Disbursement																				
Mailing Address 77 West Wacker Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	6		2	0	1	0												
City Chicago State IL Zip Code 60601	Amount of Each Disbursement this Period																				
Purpose of Disbursement Travel Expenses	<table border="1"> <tr> <td>6</td><td>0</td><td>1</td><td>.</td><td>7</td><td>0</td> </tr> </table>	6	0	1	.	7	0														
6	0	1	.	7	0																
Candidate Name	[MEMO ITEM]																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
American Heritage Credit Union

Mailing Address P.O. Box 67001

City Harrisburg State PA Zip Code 17106-7001

Purpose of Disbursement
Credit Card Payment

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46601

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3164.33

B.

Full Name (Last, First, Middle Initial)
Amtrak

Mailing Address 30th and Market St, Fl. 5

City Philadelphia State PA Zip Code 19102

Purpose of Disbursement
Travel Expenses

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46601.1

Date of Disbursement

/ /

Amount of Each Disbursement this Period

16.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
United Airlines

Mailing Address 77 West Wacker Drive

City Chicago State IL Zip Code 60601

Purpose of Disbursement
Travel Expenses

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46601.8

Date of Disbursement

/ /

Amount of Each Disbursement this Period

564.40

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

3164.33

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A. Full Name (Last, First, Middle Initial) Southwest Airlines	Transaction ID: SB21B.46601.10 Date of Disbursement
Mailing Address P.O. Box 36647-1CR	<div> <div>MM / DD / YY</div> <div>09 / 17 / 2010</div> </div>
City Dallas State TX Zip Code 75235	Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expenses	<div> <div>Amount</div> <div>213.40</div> </div>
Candidate Name	<div> <div>Category/Type</div> <div></div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> <div>Disbursement For:</div> <div> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </div> </div>
B. Full Name (Last, First, Middle Initial) Hilton Hotels	Transaction ID: SB21B.46601.11 Date of Disbursement
Mailing Address 7930 Jones Branch Drive Suite 1100	<div> <div>MM / DD / YY</div> <div>09 / 17 / 2010</div> </div>
City McLean State VA Zip Code 22102	Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expenses	<div> <div>Amount</div> <div>128.58</div> </div>
Candidate Name	<div> <div>Category/Type</div> <div></div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> <div>Disbursement For:</div> <div> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </div> </div>
C. Full Name (Last, First, Middle Initial) Emory Conference Center	Transaction ID: SB21B.46601.12 Date of Disbursement
Mailing Address 15 Clifton Road	<div> <div>MM / DD / YY</div> <div>09 / 17 / 2010</div> </div>
City Atlanta State GA Zip Code 30329	Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense	<div> <div>Amount</div> <div>203.57</div> </div>
Candidate Name	<div> <div>Category/Type</div> <div></div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> <div>Disbursement For:</div> <div> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </div> </div>

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.	<div>Full Name (Last, First, Middle Initial) Hilton Hotels</div> <div>Mailing Address 7930 Jones Branch Drive Suite 1100</div> <div>City State Zip Code McLean VA 22102</div> <div>Purpose of Disbursement Travel Expenses</div> <div>Candidate Name</div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>State: District:</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div>	<div>Transaction ID: SB21B.46601.13 Date of Disbursement M M / D D / Y Y Y Y 09 17 2010</div> <div>Amount of Each Disbursement this Period <div>178.32</div></div> <div>[MEMO ITEM]</div>	
B.	<div>Full Name (Last, First, Middle Initial) Federal Express</div> <div>Mailing Address 942 South Shady Grove Road</div> <div>City State Zip Code Memphis TN 38120</div> <div>Purpose of Disbursement Postage & Delivery</div> <div>Candidate Name</div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>State: District:</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div>	<div>Transaction ID: SB21B.46601.15 Date of Disbursement M M / D D / Y Y Y Y 09 17 2010</div> <div>Amount of Each Disbursement this Period <div>121.28</div></div> <div>[MEMO ITEM]</div>	
C.	<div>Full Name (Last, First, Middle Initial) Hertz Rent-A-Car</div> <div>Mailing Address 225 Brae Boulevard</div> <div>City State Zip Code Park Ridge NJ 07656</div> <div>Purpose of Disbursement Travel Expenses</div> <div>Candidate Name</div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>State: District:</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div>	<div>Transaction ID: SB21B.46601.17 Date of Disbursement M M / D D / Y Y Y Y 09 17 2010</div> <div>Amount of Each Disbursement this Period <div>87.62</div></div> <div>[MEMO ITEM]</div>	
		<div>SUBTOTAL of Disbursements This Page (optional)</div> <div>TOTAL This Period (last page this line number only)</div>	<div>0.00</div>

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)
AMERICA'S FOUNDATION

A. Full Name (Last, First, Middle Initial) Amtrak Mailing Address 30th and Market St, Fl. 5	Transaction ID: SB21B.46601.18 Date of Disbursement <div> <div>09</div> <div>17</div> <div>2010</div> </div>
City Philadelphia State PA Zip Code 19102 Purpose of Disbursement Travel Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>180.00</div> [MEMO ITEM]
B. Full Name (Last, First, Middle Initial) Amtrak Mailing Address 30th and Market St, Fl. 5 City Philadelphia State PA Zip Code 19102 Purpose of Disbursement Travel Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.46601.19 Date of Disbursement <div> <div>09</div> <div>17</div> <div>2010</div> </div> Amount of Each Disbursement this Period <div>180.00</div> [MEMO ITEM]
C. Full Name (Last, First, Middle Initial) American Heritage Credit Union Mailing Address P.O. Box 67001 City Harrisburg State PA Zip Code 17106-7001 Purpose of Disbursement Credit Card Payment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.46602 Date of Disbursement <div> <div>09</div> <div>17</div> <div>2010</div> </div> Amount of Each Disbursement this Period <div>160.87</div>

SUBTOTAL of Disbursements This Page (optional) ►

160.87

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A. Full Name (Last, First, Middle Initial) Balfour Insurance Agency	Transaction ID: SB21B.46544 Date of Disbursement
Mailing Address 5 Tabiona Court	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 6 / 2 0 1 0</div> </div>
City Silver Spring State MD Zip Code 20906 Purpose of Disbursement Insurance Candidate Name	Amount of Each Disbursement this Period <div>1014.92</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Barna Advisory Services, PC	Transaction ID: SB21B.46484 Date of Disbursement
Mailing Address 270 S. Woodmont Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 3 / 2 0 1 0</div> </div>
City Downingtown State PA Zip Code 19335 Purpose of Disbursement Accounting Fees Candidate Name	Amount of Each Disbursement this Period <div>2548.06</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Barna Advisory Services, PC	Transaction ID: SB21B.46485 Date of Disbursement
Mailing Address 270 S. Woodmont Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 6 / 2 0 1 0</div> </div>
City Downingtown State PA Zip Code 19335 Purpose of Disbursement Accounting Fees Candidate Name	Amount of Each Disbursement this Period <div>2500.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

6062.98

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 227 / 277

<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)
AMERICA'S FOUNDATION

A. Full Name (Last, First, Middle Initial) Barna Advisory Services, PC	Transaction ID: SB21B.46486																				
Mailing Address 270 S. Woodmont Drive	Date of Disbursement																				
City State Zip Code Downingtown PA 19335	<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>9</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	7		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	7		2	0	1	0												
Purpose of Disbursement Accounting Fees Candidate Name	Amount of Each Disbursement this Period																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General State: District: <input type="checkbox"/> Other (specify) ▼	<table border="1"> <tr> <td colspan="10">2500.00</td> </tr> </table>	2500.00																			
2500.00																					
B. Full Name (Last, First, Middle Initial) BB&T	Transaction ID: SB21B.46624																				
Mailing Address PO Box 200	Date of Disbursement																				
City State Zip Code Wilson NC 27894-0020	<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>7</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	0		2	0	1	0												
Purpose of Disbursement Bank Service Charges Candidate Name	Amount of Each Disbursement this Period																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General State: District: <input type="checkbox"/> Other (specify) ▼	<table border="1"> <tr> <td colspan="10">368.91</td> </tr> </table>	368.91																			
368.91																					
C. Full Name (Last, First, Middle Initial) BB&T	Transaction ID: SB21B.46625																				
Mailing Address PO Box 200	Date of Disbursement																				
City State Zip Code Wilson NC 27894-0020	<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>7</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		3	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		3	1		2	0	1	0												
Purpose of Disbursement Bank Service Charges Candidate Name	Amount of Each Disbursement this Period																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General State: District: <input type="checkbox"/> Other (specify) ▼	<table border="1"> <tr> <td colspan="10">428.05</td> </tr> </table>	428.05																			
428.05																					

SUBTOTAL of Disbursements This Page (optional)

3296.96

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 PageFOR LINE NUMBER:
(check only one)

PAGE 228 / 277

<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)
AMERICA'S FOUNDATION**A.**Full Name (Last, First, Middle Initial)
BB&T

Mailing Address PO Box 200

City Wilson State NC Zip Code 27894-0020

Purpose of Disbursement
Bank Service Charges

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.46626

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	1	0

Amount of Each Disbursement this Period

288.21

B.Full Name (Last, First, Middle Initial)
BB&T

Mailing Address PO Box 200

City Wilson State NC Zip Code 27894-0020

Purpose of Disbursement
Bank Service Charges

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.46627

Date of Disbursement

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

Amount of Each Disbursement this Period

343.22

C.Full Name (Last, First, Middle Initial)
Matt BeynonMailing Address 1747 Pennsylvania Ave, NW
Suite 1200

City Washington State DC Zip Code 20006

Purpose of Disbursement
PAC Staff Fees

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.46495

Date of Disbursement

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

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

2631.43

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 229 / 277

<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)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Matt Beynon

Transaction ID: SB21B.46496

Date of Disbursement

/ /

Mailing Address 1747 Pennsylvania Ave, NW
Suite 1200

City Washington State DC Zip Code 20006

Amount of Each Disbursement this Period

Purpose of Disbursement
PAC Staff Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

B.

Full Name (Last, First, Middle Initial)

Matt Beynon

Transaction ID: SB21B.46497

Date of Disbursement

/ /

Mailing Address 1747 Pennsylvania Ave, NW
Suite 1200

City Washington State DC Zip Code 20006

Amount of Each Disbursement this Period

Purpose of Disbursement
PAC Staff Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

C.

Full Name (Last, First, Middle Initial)

Matt Beynon

Transaction ID: SB21B.46498

Date of Disbursement

/ /

Mailing Address 1747 Pennsylvania Ave, NW
Suite 1200

City Washington State DC Zip Code 20006

Amount of Each Disbursement this Period

Purpose of Disbursement
Expense Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

SUBTOTAL of Disbursements This Page (optional)

5212.44

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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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)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
Fedex Kinkos

Mailing Address 942 South Shady Grove Road

City State Zip Code
Memphis TN 38120

Purpose of Disbursement
Printing & Shipping Expenses

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46498.0

Date of Disbursement

M M / D D / Y Y Y Y
09 30 2010

Amount of Each Disbursement this Period

772.12

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Oceanaire

Mailing Address 1201 F. Street NW

City State Zip Code
Washington DC 20004

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46498.1

Date of Disbursement

M M / D D / Y Y Y Y
09 30 2010

Amount of Each Disbursement this Period

358.32

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
BigEye Direct, Inc.

Mailing Address 13860 Redskin Drive

City State Zip Code
Herndon VA 20171

Purpose of Disbursement
Direct Mail Costs - Postage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46509

Date of Disbursement

M M / D D / Y Y Y Y
07 07 2010

Amount of Each Disbursement this Period

161.16

SUBTOTAL of Disbursements This Page (optional)

161.16

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 231 / 277

<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)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

BigEye Direct, Inc.

Mailing Address 13860 Redskin Drive

City Herndon State VA Zip Code 20171

Purpose of Disbursement
Direct Mail Costs - Postage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46511

Date of Disbursement

/ /

Amount of Each Disbursement this Period

896.10

B.

Full Name (Last, First, Middle Initial)

BigEye Direct, Inc.

Mailing Address 13860 Redskin Drive

City Herndon State VA Zip Code 20171

Purpose of Disbursement
Direct Mail Costs - Printing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46512

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2608.69

C.

Full Name (Last, First, Middle Initial)

BigEye Direct, Inc.

Mailing Address 13860 Redskin Drive

City Herndon State VA Zip Code 20171

Purpose of Disbursement
Direct Mail Costs - Printing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46516

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2309.62

SUBTOTAL of Disbursements This Page (optional)

5814.41

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)

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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)
AMERICA'S FOUNDATION

A. Full Name (Last, First, Middle Initial) BigEye Direct, Inc.	Transaction ID: SB21B.46519 Date of Disbursement																				
Mailing Address 13860 Redskin Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	4		2	0	1	0												
City Herndon State VA Zip Code 20171	Amount of Each Disbursement this Period																				
Purpose of Disbursement Direct Mail Costs - Postage	<table border="1"> <tr> <td colspan="10">1024.17</td> </tr> </table>	1024.17																			
1024.17																					
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) ▼																				
B. Full Name (Last, First, Middle Initial) BigEye Direct, Inc.	Transaction ID: SB21B.46526 Date of Disbursement																				
Mailing Address 13860 Redskin Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	0		2	0	1	0												
City Herndon State VA Zip Code 20171	Amount of Each Disbursement this Period																				
Purpose of Disbursement Direct Mail Costs - Postage	<table border="1"> <tr> <td colspan="10">6223.12</td> </tr> </table>	6223.12																			
6223.12																					
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) ▼																				
C. Full Name (Last, First, Middle Initial) BigEye Direct, Inc.	Transaction ID: SB21B.46527 Date of Disbursement																				
Mailing Address 13860 Redskin Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		0	1		2	0	1	0												
City Herndon State VA Zip Code 20171	Amount of Each Disbursement this Period																				
Purpose of Disbursement Direct Mail Costs - Postage	<table border="1"> <tr> <td colspan="10">17769.73</td> </tr> </table>	17769.73																			
17769.73																					
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) ▼																				

SUBTOTAL of Disbursements This Page (optional)

25017.02

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

BigEye Direct, Inc.

Mailing Address 13860 Redskin Drive

City Herndon State VA Zip Code 20171

Purpose of Disbursement
Direct Mail Costs - Postage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46528

Date of Disbursement

09 / 01 / 2010

Amount of Each Disbursement this Period

2143.45

B.

Full Name (Last, First, Middle Initial)

BigEye Direct, Inc.

Mailing Address 13860 Redskin Drive

City Herndon State VA Zip Code 20171

Purpose of Disbursement
Direct Mail Costs - Postage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46531

Date of Disbursement

09 / 08 / 2010

Amount of Each Disbursement this Period

4905.53

C.

Full Name (Last, First, Middle Initial)

BigEye Direct, Inc.

Mailing Address 13860 Redskin Drive

City Herndon State VA Zip Code 20171

Purpose of Disbursement
Direct Mail Costs - Postage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46532

Date of Disbursement

09 / 08 / 2010

Amount of Each Disbursement this Period

479.16

SUBTOTAL of Disbursements This Page (optional)

7528.14

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 234 / 277

<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)
AMERICA'S FOUNDATION

A. Full Name (Last, First, Middle Initial) BigEye Direct, Inc.	Transaction ID: SB21B.46533 Date of Disbursement
Mailing Address 13860 Redskin Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 5 / 2 0 1 0</div> </div>
City Herndon State VA Zip Code 20171	Amount of Each Disbursement this Period
Purpose of Disbursement Direct Mail Costs - Postage	<div>1193.17</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) BigEye Direct, Inc.	Transaction ID: SB21B.46534 Date of Disbursement
Mailing Address 13860 Redskin Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 2 / 2 0 1 0</div> </div>
City Herndon State VA Zip Code 20171	Amount of Each Disbursement this Period
Purpose of Disbursement Direct Mail Costs - Postage	<div>1038.16</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) BigEye Direct, Inc.	Transaction ID: SB21B.46535 Date of Disbursement
Mailing Address 13860 Redskin Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 2 / 2 0 1 0</div> </div>
City Herndon State VA Zip Code 20171	Amount of Each Disbursement this Period
Purpose of Disbursement Direct Mail Costs - Postage	<div>60.03</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

2291.36

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 235 / 277

<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)
AMERICA'S FOUNDATION

A. Full Name (Last, First, Middle Initial) BigEye Direct, Inc.	Transaction ID: SB21B.46536 Date of Disbursement
Mailing Address 13860 Redskin Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 4 / 2 0 1 0</div> </div>
City Herndon State VA Zip Code 20171	Amount of Each Disbursement this Period
Purpose of Disbursement Direct Mail Costs - Printing Candidate Name	<div> <div>2209.65</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Big Fish, A Design Ptrship, Inc.	Transaction ID: SB21B.46494 Date of Disbursement
Mailing Address 405 8th Street, SE Suite 200	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 1 / 2 0 1 0</div> </div>
City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period
Purpose of Disbursement Website Design & Maintenance Candidate Name	<div> <div>800.00</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Brabender Cox Mihalke	Transaction ID: SB21B.46457 Date of Disbursement
Mailing Address Landmarks Bldg, Suite 625 One Station Square	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 1 / 2 0 1 0</div> </div>
City Pittsburgh State PA Zip Code 15219	Amount of Each Disbursement this Period
Purpose of Disbursement Design & Production Services Candidate Name	<div> <div>1023.68</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

4033.33

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 236 / 277

<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)
AMERICA'S FOUNDATION

A. Full Name (Last, First, Middle Initial) Bryn Mawr Trust Company	Transaction ID: SB21B.46468 Date of Disbursement
Mailing Address 801 Lancaster Avenue	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 2 / 2 0 1 0</div> </div>
City State Zip Code Bryn Mawr PA 19010	Amount of Each Disbursement this Period
Purpose of Disbursement Bank Service Charges Candidate Name	<div> <div>90.22</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Bryn Mawr Trust Company	Transaction ID: SB21B.46469 Date of Disbursement
Mailing Address 801 Lancaster Avenue	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 1 0</div> </div>
City State Zip Code Bryn Mawr PA 19010	Amount of Each Disbursement this Period
Purpose of Disbursement Bank Service Charges Candidate Name	<div> <div>75.00</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Bryn Mawr Trust Company	Transaction ID: SB21B.46470 Date of Disbursement
Mailing Address 801 Lancaster Avenue	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 5 / 2 0 1 0</div> </div>
City State Zip Code Bryn Mawr PA 19010	Amount of Each Disbursement this Period
Purpose of Disbursement Bank Service Charges Candidate Name	<div> <div>103.32</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

268.54

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 237 / 277

<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)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Bryn Mawr Trust Company

Mailing Address 801 Lancaster Avenue

City State Zip Code
Bryn Mawr PA 19010

Purpose of Disbursement

Bank Service Charges

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46471

Date of Disbursement

08 / 31 / 2010

Amount of Each Disbursement this Period

75.00

B.

Full Name (Last, First, Middle Initial)

Bryn Mawr Trust Company

Mailing Address 801 Lancaster Avenue

City State Zip Code
Bryn Mawr PA 19010

Purpose of Disbursement

Bank Service Charges

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46472

Date of Disbursement

09 / 03 / 2010

Amount of Each Disbursement this Period

87.16

C.

Full Name (Last, First, Middle Initial)

Bryn Mawr Trust Company

Mailing Address 801 Lancaster Avenue

City State Zip Code
Bryn Mawr PA 19010

Purpose of Disbursement

Bank Service Charges

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46473

Date of Disbursement

09 / 30 / 2010

Amount of Each Disbursement this Period

75.00

SUBTOTAL of Disbursements This Page (optional)

237.16

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Catterton Printing

Mailing Address 100 Post Office Road

City State Zip Code
Waldorf MD 20602

Purpose of Disbursement
Direct Mail Costs - Printing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46542

Date of Disbursement

/ /

Amount of Each Disbursement this Period

382.40

B.

Full Name (Last, First, Middle Initial)

Colortree

Mailing Address P.O. Box 18160

City State Zip Code
Merrifield VA 22118-0160

Purpose of Disbursement
Direct Mail Costs - Printing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46621

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1409.75

C.

Full Name (Last, First, Middle Initial)

Colortree

Mailing Address P.O. Box 18160

City State Zip Code
Merrifield VA 22118-0160

Purpose of Disbursement
Direct Mail Costs - Printing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46622

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1336.44

SUBTOTAL of Disbursements This Page (optional)

3128.59

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
Colortree

Mailing Address P.O. Box 18160

City Merrifield State VA Zip Code 22118-0160

Purpose of Disbursement
Direct Mail Costs - Printing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46623

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5697.23

B.

Full Name (Last, First, Middle Initial)
Concordia Group, LLC

Mailing Address 400 Locust Street, Suite 330

City Des Moines State IA Zip Code 50309

Purpose of Disbursement
Political Consulting Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46583

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4000.00

C.

Full Name (Last, First, Middle Initial)
Concordia Group, LLC

Mailing Address 400 Locust Street, Suite 330

City Des Moines State IA Zip Code 50309

Purpose of Disbursement
Political Consulting Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46584

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4000.00

SUBTOTAL of Disbursements This Page (optional)

13697.23

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A. Full Name (Last, First, Middle Initial) Concordia Group, LLC	Transaction ID: SB21B.46585 Date of Disbursement
Mailing Address 400 Locust Street, Suite 330	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 5 / 2 0 1 0</div> </div>
City State Zip Code Des Moines IA 50309	Amount of Each Disbursement this Period
Purpose of Disbursement Political Consulting Fees	<div> <div></div> <div>4000.00</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Conrad Direct, Inc.	Transaction ID: SB21B.46448 Date of Disbursement
Mailing Address 300 Knickerbocker Road	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 1 / 2 0 1 0</div> </div>
City State Zip Code Cresskill NJ 07626-7626	Amount of Each Disbursement this Period
Purpose of Disbursement List Rental Fees	<div> <div></div> <div>12332.26</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Conrad Direct, Inc.	Transaction ID: SB21B.46449 Date of Disbursement
Mailing Address 300 Knickerbocker Road	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 2 / 2 0 1 0</div> </div>
City State Zip Code Cresskill NJ 07626-7626	Amount of Each Disbursement this Period
Purpose of Disbursement List Rental Fees	<div> <div></div> <div>1835.64</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

18167.90

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A. Full Name (Last, First, Middle Initial) Conrad Direct, Inc.	Transaction ID: SB21B.46450 Date of Disbursement
Mailing Address 300 Knickerbocker Road	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 8 / 2 0 1 0</div> </div>
City Cresskill State NJ Zip Code 07626-7626	Amount of Each Disbursement this Period
Purpose of Disbursement List Rental Fees Candidate Name	<div> <div>7304.28</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Conrad Direct, Inc.	Transaction ID: SB21B.46451 Date of Disbursement
Mailing Address 300 Knickerbocker Road	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 2 / 2 0 1 0</div> </div>
City Cresskill State NJ Zip Code 07626-7626	Amount of Each Disbursement this Period
Purpose of Disbursement List Rental Fees Candidate Name	<div> <div>5129.94</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Conrad Direct, Inc.	Transaction ID: SB21B.46452 Date of Disbursement
Mailing Address 300 Knickerbocker Road	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 2 / 2 0 1 0</div> </div>
City Cresskill State NJ Zip Code 07626-7626	Amount of Each Disbursement this Period
Purpose of Disbursement List Rental Fees Candidate Name	<div> <div>9646.83</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
SUBTOTAL of Disbursements This Page (optional)	<div>22081.05</div>
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A. Full Name (Last, First, Middle Initial) Conrad Direct, Inc.	Transaction ID: SB21B.46453 Date of Disbursement																				
Mailing Address 300 Knickerbocker Road	<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>9</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		3	0		2	0	1	0												
City Cresskill State NJ Zip Code 07626-7626	Amount of Each Disbursement this Period																				
Purpose of Disbursement List Rental Fees Candidate Name	<table border="1"> <tr> <td colspan="10">16735.50</td> </tr> </table>	16735.50																			
16735.50																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Direct Impressions, Inc.	Transaction ID: SB21B.46562 Date of Disbursement																				
Mailing Address 2100 Tomlynn Street	<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>7</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		0	1		2	0	1	0												
City Richmond State VA Zip Code 23230	Amount of Each Disbursement this Period																				
Purpose of Disbursement Direct Mail Costs - Printing Candidate Name	<table border="1"> <tr> <td colspan="10">6831.20</td> </tr> </table>	6831.20																			
6831.20																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Direct Impressions, Inc.	Transaction ID: SB21B.46563 Date of Disbursement																				
Mailing Address 2100 Tomlynn Street	<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>7</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	2		2	0	1	0												
City Richmond State VA Zip Code 23230	Amount of Each Disbursement this Period																				
Purpose of Disbursement Direct Mail Costs - Printing Candidate Name	<table border="1"> <tr> <td colspan="10">1294.65</td> </tr> </table>	1294.65																			
1294.65																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

24861.35

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
Direct Impressions, Inc.

Mailing Address 2100 Tomlynn Street

City Richmond State VA Zip Code 23230

Purpose of Disbursement
Direct Mail Costs - Printing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46564

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2373.50

B.

Full Name (Last, First, Middle Initial)
Direct Impressions, Inc.

Mailing Address 2100 Tomlynn Street

City Richmond State VA Zip Code 23230

Purpose of Disbursement
Direct Mail Costs - Printing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46565

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1020.00

C.

Full Name (Last, First, Middle Initial)
FLS Connect

Mailing Address 7300 Hudson Blvd. Suite 270

City St. Paul State MN Zip Code 55128

Purpose of Disbursement
Telemarketing Expenses

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46586

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3452.25

SUBTOTAL of Disbursements This Page (optional)

6845.75

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A. Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: SB21B.46587 Date of Disbursement																				
Mailing Address 7300 Hudson Blvd. Suite 270	<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>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	1	0												
City State Zip Code St. Paul MN 55128	Amount of Each Disbursement this Period																				
Purpose of Disbursement Telemarketing Expenses Candidate Name	<table border="1"> <tr> <td colspan="10">3681.74</td> </tr> </table>	3681.74																			
3681.74																					
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) ▼	Category/ Type																				
B. Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: SB21B.46588 Date of Disbursement																				
Mailing Address 7300 Hudson Blvd. Suite 270	<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>9</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	9		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	9		2	0	1	0												
City State Zip Code St. Paul MN 55128	Amount of Each Disbursement this Period																				
Purpose of Disbursement Telemarketing Expenses Candidate Name	<table border="1"> <tr> <td colspan="10">3851.37</td> </tr> </table>	3851.37																			
3851.37																					
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) ▼	Category/ Type																				
C. Full Name (Last, First, Middle Initial) FORMost Graphic Communications	Transaction ID: SB21B.46613 Date of Disbursement																				
Mailing Address 7564 Standish Place, Ste 115	<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>7</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		0	1		2	0	1	0												
City State Zip Code Rockville MD 20855-2745	Amount of Each Disbursement this Period																				
Purpose of Disbursement Direct Mail Costs - Printing/Mailshop Candidate Name	<table border="1"> <tr> <td colspan="10">164.26</td> </tr> </table>	164.26																			
164.26																					
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) ▼	Category/ Type																				

SUBTOTAL of Disbursements This Page (optional)

7697.37

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 245 / 277

<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)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
FORmost Graphic Communications

Mailing Address 7564 Standish Place, Ste 115

City State Zip Code
Rockville MD 20855-2745

Purpose of Disbursement
Direct Mail Costs - Postage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46614

Date of Disbursement

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

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
FORmost Graphic Communications

Mailing Address 7564 Standish Place, Ste 115

City State Zip Code
Rockville MD 20855-2745

Purpose of Disbursement
Direct Mail Costs - Printing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46615

Date of Disbursement

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

Amount of Each Disbursement this Period

103.72

C.

Full Name (Last, First, Middle Initial)
FORmost Graphic Communications

Mailing Address 7564 Standish Place, Ste 115

City State Zip Code
Rockville MD 20855-2745

Purpose of Disbursement
Direct Mail Costs - Printing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.46616

Date of Disbursement

M M / D D / Y Y Y Y
0 7 / 2 8 / 2 0 1 0

Amount of Each Disbursement this Period

215.76

SUBTOTAL of Disbursements This Page (optional)

1319.48

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A. Full Name (Last, First, Middle Initial) FORmost Graphic Communications	Transaction ID: SB21B.46617 Date of Disbursement																				
Mailing Address 7564 Standish Place, Ste 115	<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>8</td><td></td> <td>2</td><td>0</td><td></td> <td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	0		2	0	1	0												
City Rockville State MD Zip Code 20855-2745	Amount of Each Disbursement this Period																				
Purpose of Disbursement Direct Mail Costs - Postage	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
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) ▼																				
B. Full Name (Last, First, Middle Initial) FORmost Graphic Communications	Transaction ID: SB21B.46618 Date of Disbursement																				
Mailing Address 7564 Standish Place, Ste 115	<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>8</td><td></td> <td>2</td><td>6</td><td></td> <td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	6		2	0	1	0												
City Rockville State MD Zip Code 20855-2745	Amount of Each Disbursement this Period																				
Purpose of Disbursement Direct Mail Costs - Printing/Mailshop	<table border="1"> <tr> <td colspan="10">342.14</td> </tr> </table>	342.14																			
342.14																					
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) ▼																				
C. Full Name (Last, First, Middle Initial) FORmost Graphic Communications	Transaction ID: SB21B.46619 Date of Disbursement																				
Mailing Address 7564 Standish Place, Ste 115	<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>9</td><td></td> <td>1</td><td>5</td><td></td> <td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	5		2	0	1	0												
City Rockville State MD Zip Code 20855-2745	Amount of Each Disbursement this Period																				
Purpose of Disbursement Direct Mail Costs - Postage	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
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) ▼																				

SUBTOTAL of Disbursements This Page (optional)

2342.14

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 247 / 277

<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)
AMERICA'S FOUNDATION

A. Full Name (Last, First, Middle Initial) FORmost Graphic Communications	Transaction ID: SB21B.46620 Date of Disbursement																				
Mailing Address 7564 Standish Place, Ste 115	<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>9</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	4		2	0	1	0												
City Rockville State MD Zip Code 20855-2745	Amount of Each Disbursement this Period																				
Purpose of Disbursement Direct Mail Costs - Printing/Mailshop Candidate Name	<table border="1"> <tr> <td colspan="10">189.04</td> </tr> </table>	189.04																			
189.04																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Global Payments Inc.	Transaction ID: SB21B.46575 Date of Disbursement																				
Mailing Address 10 Glenlake Pkwy NE North Tower	<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>7</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	2		2	0	1	0												
City Atlanta State GA Zip Code 30328	Amount of Each Disbursement this Period																				
Purpose of Disbursement Merchant Credit Card Fees Candidate Name	<table border="1"> <tr> <td colspan="10">396.38</td> </tr> </table>	396.38																			
396.38																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Global Payments Inc.	Transaction ID: SB21B.46576 Date of Disbursement																				
Mailing Address 10 Glenlake Pkwy NE North Tower	<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>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	1	0												
City Atlanta State GA Zip Code 30328	Amount of Each Disbursement this Period																				
Purpose of Disbursement Merchant Credit Card Fees Candidate Name	<table border="1"> <tr> <td colspan="10">529.66</td> </tr> </table>	529.66																			
529.66																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

1115.08

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 248 / 277

<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)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
Global Payments Inc.

Mailing Address 10 Glenlake Pkwy NE
North Tower

City Atlanta State GA Zip Code 30328

Purpose of Disbursement
Merchant Credit Card Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.46577

Date of Disbursement

09 / 30 / 2010

Amount of Each Disbursement this Period

492.38

B.

Full Name (Last, First, Middle Initial)
HSP Direct

Mailing Address 13755 Sunrise Valley Drive
Suite 450

City Herndon State VA Zip Code 20171

Purpose of Disbursement
Direct Mail Expenses and Creative Design Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.46507

Date of Disbursement

07 / 01 / 2010

Amount of Each Disbursement this Period

12079.17

C.

Full Name (Last, First, Middle Initial)
HSP Direct

Mailing Address 13755 Sunrise Valley Drive
Suite 450

City Herndon State VA Zip Code 20171

Purpose of Disbursement
Direct Mail Expenses and Creative Design Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.46510

Date of Disbursement

07 / 08 / 2010

Amount of Each Disbursement this Period

4480.80

SUBTOTAL of Disbursements This Page (optional)

17052.35

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 249 / 277

<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)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
HSP Direct

Mailing Address 13755 Sunrise Valley Drive
Suite 450

City Herndon State VA Zip Code 20171

Purpose of Disbursement
Direct Mail Expenses and Creative Design Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.46513

Date of Disbursement

/ /

Amount of Each Disbursement this Period

6502.68

B.

Full Name (Last, First, Middle Initial)
HSP Direct

Mailing Address 13755 Sunrise Valley Drive
Suite 450

City Herndon State VA Zip Code 20171

Purpose of Disbursement
Direct Mail Costs - Postage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.46514

Date of Disbursement

/ /

Amount of Each Disbursement this Period

8930.59

C.

Full Name (Last, First, Middle Initial)
HSP Direct

Mailing Address 13755 Sunrise Valley Drive
Suite 450

City Herndon State VA Zip Code 20171

Purpose of Disbursement
Direct Mail Expenses and Creative Design Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.46517

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4134.73

SUBTOTAL of Disbursements This Page (optional)

19568.00

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)

PAGE 250 / 277

<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)
AMERICA'S FOUNDATION

<p>A.</p> <p>Full Name (Last, First, Middle Initial) HSP Direct</p> <p>Mailing Address 13755 Sunrise Valley Drive Suite 450</p> <p>City Herndon State VA Zip Code 20171</p> <p>Purpose of Disbursement Direct Mail Expenses and Creative Design Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.46520</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 2 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div>564.03</div> </p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) HSP Direct</p> <p>Mailing Address 13755 Sunrise Valley Drive Suite 450</p> <p>City Herndon State VA Zip Code 20171</p> <p>Purpose of Disbursement Direct Mail Expenses and Creative Design Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.46521</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 9 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div>6734.07</div> </p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) HSP Direct</p> <p>Mailing Address 13755 Sunrise Valley Drive Suite 450</p> <p>City Herndon State VA Zip Code 20171</p> <p>Purpose of Disbursement Direct Mail Costs - Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.46522</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 9 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div>9206.76</div> </p>

SUBTOTAL of Disbursements This Page (optional)

16504.86

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

<p>A.</p> <p>Full Name (Last, First, Middle Initial) HSP Direct</p> <p>Mailing Address 13755 Sunrise Valley Drive Suite 450</p> <p>City Herndon State VA Zip Code 20171</p> <p>Purpose of Disbursement Direct Mail Expenses and Creative Design Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.46523</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 6 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div> <div></div> <div>1056.42</div> </div> </p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) HSP Direct</p> <p>Mailing Address 13755 Sunrise Valley Drive Suite 450</p> <p>City Herndon State VA Zip Code 20171</p> <p>Purpose of Disbursement Direct Mail Costs - Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.46524</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 6 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div> <div></div> <div>3818.95</div> </div> </p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) HSP Direct</p> <p>Mailing Address 13755 Sunrise Valley Drive Suite 450</p> <p>City Herndon State VA Zip Code 20171</p> <p>Purpose of Disbursement Direct Mail Expenses and Creative Design Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.46529</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 2 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div> <div></div> <div>7234.52</div> </div> </p>

SUBTOTAL of Disbursements This Page (optional) ►

12109.89

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
HSP Direct

Mailing Address 13755 Sunrise Valley Drive
Suite 450

City Herndon State VA Zip Code 20171

Purpose of Disbursement
Direct Mail Expenses and Creative Design Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.46537

Date of Disbursement

/ /

Amount of Each Disbursement this Period

6414.21

B.

Full Name (Last, First, Middle Initial)
HSP Direct

Mailing Address 13755 Sunrise Valley Drive
Suite 450

City Herndon State VA Zip Code 20171

Purpose of Disbursement
Direct Mail Expenses and Creative Design Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.46539

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3096.99

C.

Full Name (Last, First, Middle Initial)
Irides, LLC

Mailing Address 1000 Wilson Blve, Suite 601

City Arlington State VA Zip Code 22209

Purpose of Disbursement
Website Design & Maintenance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.46561

Date of Disbursement

/ /

Amount of Each Disbursement this Period

150.00

SUBTOTAL of Disbursements This Page (optional)

9661.20

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 253 / 277

<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)
AMERICA'S FOUNDATION

A. Full Name (Last, First, Middle Initial) Iron Mountain <hr/> Mailing Address PO Box 27128	Transaction ID: SB21B.46593 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	1		2	0	1	0	
M	M	/	D	D	/	Y	Y	Y	Y													
0	7		2	1		2	0	1	0													
City New York State NY Zip Code 10087-7128 Purpose of Disbursement Rent Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <table border="1"> <tr> <td>764.65</td> </tr> </table>	764.65																				
764.65																						
B. Full Name (Last, First, Middle Initial) Iron Mountain <hr/> Mailing Address PO Box 27128 <hr/> City New York State NY Zip Code 10087-7128 Purpose of Disbursement Rent Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.46594 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>822.09</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	6		2	0	1	0	822.09
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		2	6		2	0	1	0													
822.09																						
C. Full Name (Last, First, Middle Initial) Iron Mountain <hr/> Mailing Address PO Box 27128 <hr/> City New York State NY Zip Code 10087-7128 Purpose of Disbursement Rent Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.46595 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>822.09</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	7		2	0	1	0	822.09
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		1	7		2	0	1	0													
822.09																						

SUBTOTAL of Disbursements This Page (optional)

2408.83

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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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)
AMERICA'S FOUNDATION

A. Full Name (Last, First, Middle Initial) Kenmore Envelope Company	Transaction ID: SB21B.46566 Date of Disbursement																				
Mailing Address 4641 International Trade Court	<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>7</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	8		2	0	1	0												
City Richmond State VA Zip Code 23231	Amount of Each Disbursement this Period																				
Purpose of Disbursement Direct Mail Costs - Printing Candidate Name	<table border="1"> <tr> <td colspan="10">2255.04</td> </tr> </table>	2255.04																			
2255.04																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Konica	Transaction ID: SB21B.46477 Date of Disbursement																				
Mailing Address 103 Gibraltar Road	<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>8</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	6		2	0	1	0												
City Horsham State PA Zip Code 19044	Amount of Each Disbursement this Period																				
Purpose of Disbursement Equipment Rent Candidate Name	<table border="1"> <tr> <td colspan="10">393.26</td> </tr> </table>	393.26																			
393.26																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Nadine Maenza	Transaction ID: SB21B.46491 Date of Disbursement																				
Mailing Address 315 Foxtail Lane	<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>7</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	1		2	0	1	0												
City Spring city State PA Zip Code 19475	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Staff Fees Candidate Name	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

7648.30

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 PageFOR 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)
AMERICA'S FOUNDATION**A.**

Full Name (Last, First, Middle Initial)

Nadine Maenza

Mailing Address 315 Foxtail Lane

City
Spring cityState
PAZip Code
19475Purpose of Disbursement
PAC Staff Fees

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.46492

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	6		2	0	1	0

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Nadine Maenza

Mailing Address 315 Foxtail Lane

City
Spring cityState
PAZip Code
19475Purpose of Disbursement
PAC Staff Fees

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.46493

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	1	0

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

MDI Mail & Imaging

Mailing Address 21721-A Filigree Court

City
AdhburnState
VAZip Code
20147Purpose of Disbursement
Direct Mail Costs - Postage

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.46499

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	7		2	0	1	0

Amount of Each Disbursement this Period

20742.52

SUBTOTAL of Disbursements This Page (optional)

30742.52

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 256 / 277

<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)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

MDI Mail & Imaging

Mailing Address 21721-A Filigree Court

City Adhburn State VA Zip Code 20147

Purpose of Disbursement
Direct Mail Costs - Postage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.46500

Date of Disbursement

/ /

Amount of Each Disbursement this Period

272.76

B.

Full Name (Last, First, Middle Initial)

MDI Mail & Imaging

Mailing Address 21721-A Filigree Court

City Adhburn State VA Zip Code 20147

Purpose of Disbursement
Direct Mail Costs - Printing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.46501

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3125.39

C.

Full Name (Last, First, Middle Initial)

MDI Mail & Imaging

Mailing Address 21721-A Filigree Court

City Adhburn State VA Zip Code 20147

Purpose of Disbursement
Direct Mail Costs - Printing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.46502

Date of Disbursement

/ /

Amount of Each Disbursement this Period

7172.95

SUBTOTAL of Disbursements This Page (optional)

10571.10

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)

PAGE 257 / 277

<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)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

MDI Mail & Imaging

Mailing Address 21721-A Filigree Court

City Adhburn State VA Zip Code 20147

Purpose of Disbursement
Direct Mail Costs - Printing/Mailshop

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.46503

Date of Disbursement

08 / 19 / 2010

Amount of Each Disbursement this Period

2352.06

B.

Full Name (Last, First, Middle Initial)

NJI New Media

Mailing Address Summit of Richfield II
3046 Brecksville Road

City Richfield State OH Zip Code 44286

Purpose of Disbursement
Website Design & Maintenance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.46580

Date of Disbursement

07 / 21 / 2010

Amount of Each Disbursement this Period

50.00

C.

Full Name (Last, First, Middle Initial)

NJI New Media

Mailing Address Summit of Richfield II
3046 Brecksville Road

City Richfield State OH Zip Code 44286

Purpose of Disbursement
Compensation for Fundraising Svcs

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.46581

Date of Disbursement

09 / 30 / 2010

Amount of Each Disbursement this Period

1233.48

SUBTOTAL of Disbursements This Page (optional)

3635.54

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A. Full Name (Last, First, Middle Initial)
RST Marketing Associates, Inc.

Mailing Address P.O. Box 228

City Forest State VA Zip Code 24551

Purpose of Disbursement
Direct Mail Costs - Printing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.46567

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5024.97

B. Full Name (Last, First, Middle Initial)
RST Marketing Associates, Inc.

Mailing Address P.O. Box 228

City Forest State VA Zip Code 24551

Purpose of Disbursement
Direct Mail Costs - Postage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.46568

Date of Disbursement

/ /

Amount of Each Disbursement this Period

6915.70

C. Full Name (Last, First, Middle Initial)
RST Marketing Associates, Inc.

Mailing Address P.O. Box 228

City Forest State VA Zip Code 24551

Purpose of Disbursement
Direct Mail Costs - Postage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.46569

Date of Disbursement

/ /

Amount of Each Disbursement this Period

11112.08

SUBTOTAL of Disbursements This Page (optional)

23052.75

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 PageFOR LINE NUMBER:
(check only one)

PAGE 259 / 277

<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)
AMERICA'S FOUNDATION**A.** Full Name (Last, First, Middle Initial)
RST Marketing Associates, Inc.

Mailing Address P.O. Box 228

City Forest State VA Zip Code 24551

Purpose of Disbursement
Direct Mail Costs - Printing

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.46570

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	6		2	0	1	0

Amount of Each Disbursement this Period

6956.02

B. Full Name (Last, First, Middle Initial)
Sisk Mailing Service, Inc.

Mailing Address 203 Log Canoe Circle

City Stevensville State MD Zip Code 21666

Purpose of Disbursement
Direct Mail Costs - Postage

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.46545

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	7		2	0	1	0

Amount of Each Disbursement this Period

824.08

C. Full Name (Last, First, Middle Initial)
Sisk Mailing Service, Inc.

Mailing Address 203 Log Canoe Circle

City Stevensville State MD Zip Code 21666

Purpose of Disbursement
Direct Mail Costs - Postage

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.46546

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	2		2	0	1	0

Amount of Each Disbursement this Period

14680.77

SUBTOTAL of Disbursements This Page (optional)

22460.87

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 260 / 277

<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)
AMERICA'S FOUNDATION

A. Full Name (Last, First, Middle Initial) Sisk Mailing Service, Inc.	Transaction ID: SB21B.46547 Date of Disbursement																				
Mailing Address 203 Log Canoe Circle	<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>8</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	4		2	0	1	0												
City State Zip Code Stevensville MD 21666	Amount of Each Disbursement this Period																				
Purpose of Disbursement Direct Mail Costs - Postage	<table border="1"> <tr> <td>18151.68</td> </tr> </table>	18151.68																			
18151.68																					
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) ▼																				
B. Full Name (Last, First, Middle Initial) Sisk Mailing Service, Inc.	Transaction ID: SB21B.46548 Date of Disbursement																				
Mailing Address 203 Log Canoe Circle	<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>8</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	5		2	0	1	0												
City State Zip Code Stevensville MD 21666	Amount of Each Disbursement this Period																				
Purpose of Disbursement Direct Mail Costs - Postage	<table border="1"> <tr> <td>780.20</td> </tr> </table>	780.20																			
780.20																					
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) ▼																				
C. Full Name (Last, First, Middle Initial) Sisk Mailing Service, Inc.	Transaction ID: SB21B.46549 Date of Disbursement																				
Mailing Address 203 Log Canoe Circle	<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>8</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	6		2	0	1	0												
City State Zip Code Stevensville MD 21666	Amount of Each Disbursement this Period																				
Purpose of Disbursement Direct Mail Costs - Printing/Mailshop	<table border="1"> <tr> <td>765.45</td> </tr> </table>	765.45																			
765.45																					
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) ▼																				

SUBTOTAL of Disbursements This Page (optional)

19697.33

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 261 / 277

<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)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Sisk Mailing Service, Inc.

Mailing Address 203 Log Canoe Circle

City State Zip Code
Stevensville MD 21666

Purpose of Disbursement
Direct Mail Costs - Postage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.46550

Date of Disbursement

/ /

Amount of Each Disbursement this Period

255.66

B.

Full Name (Last, First, Middle Initial)

Sisk Mailing Service, Inc.

Mailing Address 203 Log Canoe Circle

City State Zip Code
Stevensville MD 21666

Purpose of Disbursement
Direct Mail Costs - Postage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.46551

Date of Disbursement

/ /

Amount of Each Disbursement this Period

15000.00

C.

Full Name (Last, First, Middle Initial)

Sisk Mailing Service, Inc.

Mailing Address 203 Log Canoe Circle

City State Zip Code
Stevensville MD 21666

Purpose of Disbursement
Direct Mail Costs - Postage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.46552

Date of Disbursement

/ /

Amount of Each Disbursement this Period

89.10

SUBTOTAL of Disbursements This Page (optional)

15344.76

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 PageFOR LINE NUMBER:
(check only one)

PAGE 262 / 277

<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)
AMERICA'S FOUNDATION**A.**

Full Name (Last, First, Middle Initial)

Sisk Mailing Service, Inc.

Mailing Address 203 Log Canoe Circle

City State Zip Code
Stevensville MD 21666Purpose of Disbursement
Direct Mail Costs - Postage

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.46553

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	2		2	0	1	0

Amount of Each Disbursement this Period

1413.50

B.

Full Name (Last, First, Middle Initial)

Sisk Mailing Service, Inc.

Mailing Address 203 Log Canoe Circle

City State Zip Code
Stevensville MD 21666Purpose of Disbursement
Direct Mail Costs - Printing/Mailshop

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.46554

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Amount of Each Disbursement this Period

2074.99

C.

Full Name (Last, First, Middle Initial)

Sisk Mailing Service, Inc.

Mailing Address 203 Log Canoe Circle

City State Zip Code
Stevensville MD 21666Purpose of Disbursement
Direct Mail Costs - Postage

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.46555

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	9		2	0	1	0

Amount of Each Disbursement this Period

4999.83

SUBTOTAL of Disbursements This Page (optional)

8488.32

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 263 / 277

<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)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
SM Jenkins & Co

Transaction ID: SB21B.46489

Date of Disbursement

/ /

Mailing Address One Tower Bridge
Suite 1410

Amount of Each Disbursement this Period

City West Conshohocken State PA Zip Code 19428

Purpose of Disbursement
Rent

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
SM Jenkins & Co

Transaction ID: SB21B.46490

Date of Disbursement

/ /

Mailing Address One Tower Bridge
Suite 1410

Amount of Each Disbursement this Period

City West Conshohocken State PA Zip Code 19428

Purpose of Disbursement
Rent

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Sunrise Data Services

Transaction ID: SB21B.46508

Date of Disbursement

/ /

Mailing Address 13755 Sunrise Valley Drive
Suite 450

Amount of Each Disbursement this Period

City Herndon State VA Zip Code 20171

Purpose of Disbursement
Database Maintenance Fees

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

4589.90

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 264 / 277

<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)
AMERICA'S FOUNDATION

A. Full Name (Last, First, Middle Initial) Sunrise Data Services	Transaction ID: SB21B.46515 Date of Disbursement																				
Mailing Address 13755 Sunrise Valley Drive Suite 450	<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>7</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	2		2	0	1	0												
City Herndon State VA Zip Code 20171	Amount of Each Disbursement this Period																				
Purpose of Disbursement Database Maintenance Fees Candidate Name	<table border="1"> <tr> <td colspan="10">1434.70</td> </tr> </table>	1434.70																			
1434.70																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Sunrise Data Services	Transaction ID: SB21B.46518 Date of Disbursement																				
Mailing Address 13755 Sunrise Valley Drive Suite 450	<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>7</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	8		2	0	1	0												
City Herndon State VA Zip Code 20171	Amount of Each Disbursement this Period																				
Purpose of Disbursement Database Maintenance Fees Candidate Name	<table border="1"> <tr> <td colspan="10">2104.38</td> </tr> </table>	2104.38																			
2104.38																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Sunrise Data Services	Transaction ID: SB21B.46525 Date of Disbursement																				
Mailing Address 13755 Sunrise Valley Drive Suite 450	<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>8</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	6		2	0	1	0												
City Herndon State VA Zip Code 20171	Amount of Each Disbursement this Period																				
Purpose of Disbursement Database Maintenance Fees Candidate Name	<table border="1"> <tr> <td colspan="10">1999.87</td> </tr> </table>	1999.87																			
1999.87																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

5538.95

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 265 / 277

<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)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
Sunrise Data Services

Mailing Address 13755 Sunrise Valley Drive
Suite 450

City Herndon State VA Zip Code 20171

Purpose of Disbursement
Database Maintenance Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.46530

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2178.34

B.

Full Name (Last, First, Middle Initial)
Sunrise Data Services

Mailing Address 13755 Sunrise Valley Drive
Suite 450

City Herndon State VA Zip Code 20171

Purpose of Disbursement
Database Maintenance Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.46538

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2120.21

C.

Full Name (Last, First, Middle Initial)
TaylorTech Consulting

Mailing Address 3622 Calumet Street

City Philadelphia State PA Zip Code 19129

Purpose of Disbursement
Computer Consulting Svcs

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.46483

Date of Disbursement

/ /

Amount of Each Disbursement this Period

42.50

SUBTOTAL of Disbursements This Page (optional)

4341.05

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 266 / 277

<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)
AMERICA'S FOUNDATION

A. Full Name (Last, First, Middle Initial) The Clapham Group Mailing Address 5272 Lyngate Ct. Suite 200	Transaction ID: SB21B.46556 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 1 / 2 0 1 0</div> </div>
City State Zip Code Burke VA 22015 Purpose of Disbursement PAC Staff Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>1000.00</div>
B. Full Name (Last, First, Middle Initial) The Clapham Group Mailing Address 5272 Lyngate Ct. Suite 200 City State Zip Code Burke VA 22015 Purpose of Disbursement PAC Staff Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.46557 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 6 / 2 0 1 0</div> </div> Amount of Each Disbursement this Period <div>1000.00</div>
C. Full Name (Last, First, Middle Initial) The Clapham Group Mailing Address 5272 Lyngate Ct. Suite 200 City State Zip Code Burke VA 22015 Purpose of Disbursement PAC Staff Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.46558 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 5 / 2 0 1 0</div> </div> Amount of Each Disbursement this Period <div>1000.00</div>

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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A. Full Name (Last, First, Middle Initial) Tri-state Envelope Corporation	Transaction ID: SB21B.46458 Date of Disbursement																				
Mailing Address 1 Orgler Place	<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>7</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		0	1		2	0	1	0												
City Ashland State PA Zip Code 17921	Amount of Each Disbursement this Period																				
Purpose of Disbursement Direct Mail Costs - Printing	<table border="1"> <tr> <td colspan="10">2697.45</td> </tr> </table>	2697.45																			
2697.45																					
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) ▼																				
B. Full Name (Last, First, Middle Initial) Tri-state Envelope Corporation	Transaction ID: SB21B.46459 Date of Disbursement																				
Mailing Address 1 Orgler Place	<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>7</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		0	8		2	0	1	0												
City Ashland State PA Zip Code 17921	Amount of Each Disbursement this Period																				
Purpose of Disbursement Direct Mail Costs - Printing	<table border="1"> <tr> <td colspan="10">3293.33</td> </tr> </table>	3293.33																			
3293.33																					
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) ▼																				
C. Full Name (Last, First, Middle Initial) Tri-state Envelope Corporation	Transaction ID: SB21B.46460 Date of Disbursement																				
Mailing Address 1 Orgler Place	<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>7</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	8		2	0	1	0												
City Ashland State PA Zip Code 17921	Amount of Each Disbursement this Period																				
Purpose of Disbursement Direct Mail Costs - Printing	<table border="1"> <tr> <td colspan="10">2044.51</td> </tr> </table>	2044.51																			
2044.51																					
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) ▼																				

SUBTOTAL of Disbursements This Page (optional)

8035.29

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 268 / 277

<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)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
Tri-state Envelope Corporation

Mailing Address 1 Orgler Place

City Ashland State PA Zip Code 17921

Purpose of Disbursement
Direct Mail Costs - Printing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.46461

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1675.86

B.

Full Name (Last, First, Middle Initial)
Tri-state Envelope Corporation

Mailing Address 1 Orgler Place

City Ashland State PA Zip Code 17921

Purpose of Disbursement
Direct Mail Costs - Printing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.46462

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3324.39

C.

Full Name (Last, First, Middle Initial)
Union League of Philadelphia

Mailing Address 140 South Broad Street

City Philadelphia State PA Zip Code 19102-3083

Purpose of Disbursement
PAC Meeting Expenses

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.46609

Date of Disbursement

/ /

Amount of Each Disbursement this Period

540.15

SUBTOTAL of Disbursements This Page (optional)

5540.40

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 269 / 277

<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)
AMERICA'S FOUNDATION

A. Full Name (Last, First, Middle Initial) Union League of Philadelphia	Transaction ID: SB21B.46610 Date of Disbursement
Mailing Address 140 South Broad Street	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 5 / 2 0 1 0</div> </div>
City Philadelphia State PA Zip Code 19102-3083	Amount of Each Disbursement this Period
Purpose of Disbursement PAC Meeting Expenses	<div>164.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Union League of Philadelphia	Transaction ID: SB21B.46611 Date of Disbursement
Mailing Address 140 South Broad Street	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 7 / 2 0 1 0</div> </div>
City Philadelphia State PA Zip Code 19102-3083	Amount of Each Disbursement this Period
Purpose of Disbursement PAC Fundraising Event Costs	<div>876.36</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Union League of Philadelphia	Transaction ID: SB21B.46612 Date of Disbursement
Mailing Address 140 South Broad Street	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 3 0 / 2 0 1 0</div> </div>
City Philadelphia State PA Zip Code 19102-3083	Amount of Each Disbursement this Period
Purpose of Disbursement PAC Fundraising Event Costs	<div>1804.36</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

2844.72

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A. Full Name (Last, First, Middle Initial) United States Treasury	Transaction ID: SB21B.46540 Date of Disbursement
Mailing Address 1500 Pennsylvania Ave, NW	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 5 / 2 0 1 0</div> </div>
City Washington State DC Zip Code 20220	Amount of Each Disbursement this Period <div>10000.00</div>
Purpose of Disbursement PAC Income Tax Payment Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Verizon	Transaction ID: SB21B.46603 Date of Disbursement
Mailing Address P.O. Box 28000	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 1 / 2 0 1 0</div> </div>
City Lehigh Valley State PA Zip Code 18002-0646	Amount of Each Disbursement this Period <div>4.51</div>
Purpose of Disbursement Telephone Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Verizon	Transaction ID: SB21B.46604 Date of Disbursement
Mailing Address P.O. Box 28000	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 5 / 2 0 1 0</div> </div>
City Lehigh Valley State PA Zip Code 18002-0646	Amount of Each Disbursement this Period <div>179.25</div>
Purpose of Disbursement Telephone Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

10183.76

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 271 / 277

<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)
AMERICA'S FOUNDATION

A. Full Name (Last, First, Middle Initial) Verizon Mailing Address P.O. Box 28000	Transaction ID: SB21B.46605 Date of Disbursement <div> <div>09</div> <div>17</div> <div>2010</div> </div>
City Lehigh Valley State PA Zip Code 18002-0646 Purpose of Disbursement Telephone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>178.30</div>
B. Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address P.O. Box 41556 City Philadelphia State PA Zip Code 19101-1464 Purpose of Disbursement Telephone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.46608 Date of Disbursement <div> <div>09</div> <div>17</div> <div>2010</div> </div> Amount of Each Disbursement this Period <div>107.18</div>
C. Full Name (Last, First, Middle Initial) Virginia Davis Partners, LLC Mailing Address 834 Beechwood Dr. City Havertown State PA Zip Code 19083 Purpose of Disbursement Exp Reim - Email Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.46479 Date of Disbursement <div> <div>07</div> <div>21</div> <div>2010</div> </div> Amount of Each Disbursement this Period <div>150.00</div>

SUBTOTAL of Disbursements This Page (optional)

435.48

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)

Virginia Davis Partners, LLC

Mailing Address 834 Beechwood Dr.

City
Havertown

State
PA

Zip Code
19083

Purpose of Disbursement
Media & Press Management Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.46480

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)

Virginia Davis Partners, LLC

Mailing Address 834 Beechwood Dr.

City
Havertown

State
PA

Zip Code
19083

Purpose of Disbursement
Media & Press Management Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.46481

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Virginia Davis Partners, LLC

Mailing Address 834 Beechwood Dr.

City
Havertown

State
PA

Zip Code
19083

Purpose of Disbursement
Media & Press Management Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.46482

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

5175.00

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)

PAGE 273 / 277

<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)
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
Washington Intelligence Bureau

Mailing Address 4128 Pepsi Place

City Chantilly State VA Zip Code 20151

Purpose of Disbursement
Direct Mail Processing Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.46504

Date of Disbursement

07 / 01 / 2010

Amount of Each Disbursement this Period

2520.07

B.

Full Name (Last, First, Middle Initial)
Washington Intelligence Bureau

Mailing Address 4128 Pepsi Place

City Chantilly State VA Zip Code 20151

Purpose of Disbursement
Direct Mail Processing Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.46505

Date of Disbursement

07 / 28 / 2010

Amount of Each Disbursement this Period

4366.91

C.

Full Name (Last, First, Middle Initial)
Washington Intelligence Bureau

Mailing Address 4128 Pepsi Place

City Chantilly State VA Zip Code 20151

Purpose of Disbursement
Direct Mail Processing Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.46506

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

4410.14

SUBTOTAL of Disbursements This Page (optional)

11297.12

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 274 / 277

<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)
AMERICA'S FOUNDATION

A. Full Name (Last, First, Middle Initial) Washington Political Group, LLC	Transaction ID: SB21B.46572 Date of Disbursement
Mailing Address 3630 Portland Trail Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 1 / 2 0 1 0</div> </div>
City Suwanee State GA Zip Code 30024	Amount of Each Disbursement this Period
Purpose of Disbursement Political Consulting Fees Candidate Name	<div> <div>2000.00</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Washington Political Group, LLC	Transaction ID: SB21B.46573 Date of Disbursement
Mailing Address 3630 Portland Trail Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 6 / 2 0 1 0</div> </div>
City Suwanee State GA Zip Code 30024	Amount of Each Disbursement this Period
Purpose of Disbursement Political Consulting Fees Candidate Name	<div> <div>2000.00</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Washington Political Group, LLC	Transaction ID: SB21B.46574 Date of Disbursement
Mailing Address 3630 Portland Trail Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 5 / 2 0 1 0</div> </div>
City Suwanee State GA Zip Code 30024	Amount of Each Disbursement this Period
Purpose of Disbursement Political Consulting Fees Candidate Name	<div> <div>4000.00</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
SUBTOTAL of Disbursements This Page (optional)	<div>8000.00</div>
TOTAL This Period (last page this line number only)	<div>473511.60</div>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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)
AMERICA'S FOUNDATION

A. Full Name (Last, First, Middle Initial) Carly for California	Transaction ID: SB23.46592 Date of Disbursement
Mailing Address 915 L Street Suite C-378	<input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/>
City Sacramento State CA Zip Code 95814	Amount of Each Disbursement this Period
Purpose of Disbursement Campaign Contribution - General Candidate Name	<input type="text" value="1000.00"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) FITZPATRICK FOR CONGRESS	Transaction ID: SB23.46478 Date of Disbursement
Mailing Address PO Box 185	<input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/>
City Langhorne State PA Zip Code 19047	Amount of Each Disbursement this Period
Purpose of Disbursement Campaign Contribution - General Candidate Name	<input type="text" value="1000.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 08	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Keith Fimian for Congress 2010	Transaction ID: SB23.46560 Date of Disbursement
Mailing Address PO Box 3131	<input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/>
City Oakton State VA Zip Code 22124	Amount of Each Disbursement this Period
Purpose of Disbursement Campaign Contribution - General Candidate Name	<input type="text" value="1000.00"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
 AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)
 PAT MEEHAN FOR CONGRESS

Mailing Address 5035 TOWNSHIP LINE ROAD
 PO BOX 308

City DREXEL HILL State PA Zip Code 19026

Purpose of Disbursement
 Campaign Contribution - General

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2010 ☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.46474

Date of Disbursement

09 / 01 / 2010

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
 PAT MEEHAN FOR CONGRESS

Mailing Address 5035 TOWNSHIP LINE ROAD
 PO BOX 308

City DREXEL HILL State PA Zip Code 19026

Purpose of Disbursement
 Campaign Contribution - General

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2010 ☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.46475

Date of Disbursement

09 / 24 / 2010

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)
 Toomey for Senate

Mailing Address 3440 Hamilton Blvd

City Allentown State PA Zip Code 18103

Purpose of Disbursement
 Campaign Contribution - General

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2010 ☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.46464

Date of Disbursement

09 / 08 / 2010

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

4500.00

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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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
 AMERICA'S FOUNDATION

A. Full Name (Last, First, Middle Initial) Toomey for Senate Mailing Address 3440 Hamilton Blvd	Transaction ID: SB23.46465 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 4 / 2 0 1 0</div> </div>
City Allentown State PA Zip Code 18103 Purpose of Disbursement Campaign Contribution - General Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Amount of Each Disbursement this Period <div>1000.00</div> <div>Category/Type</div>
B. Full Name (Last, First, Middle Initial) Toomey for Senate Mailing Address 3440 Hamilton Blvd	Transaction ID: SB23.46466 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 5 / 2 0 1 0</div> </div>
City Allentown State PA Zip Code 18103 Purpose of Disbursement Campaign Contribution - General Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Amount of Each Disbursement this Period <div>1000.00</div> <div>Category/Type</div>
C. Full Name (Last, First, Middle Initial) Toomey for Senate Mailing Address 3440 Hamilton Blvd	Transaction ID: SB23.46467 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 7 / 2 0 1 0</div> </div>
City Allentown State PA Zip Code 18103 Purpose of Disbursement Campaign Contribution - General Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Amount of Each Disbursement this Period <div>500.00</div> <div>Category/Type</div>

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

10000.00