



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

Write or Type Committee Name  
MADISON PROJECT INC.

Report Covering the Period: From: 

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	2

D	D
3	1

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 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		6701.07
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	160178.36									
(c) Total Receipts (from Line 19) .....	9874.94	785477.20								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	170053.30	792178.27								
7. Total Disbursements (from Line 31) .....	23397.37	645522.34								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	146655.93	146655.93								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	1543.62									

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

**For further information contact:**

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
MADISON PROJECT INC.

Report Covering the Period: From: 

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	2

D	D
3	1

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) .....	2750.00	237001.56
(ii) Unitemized .....	6364.00	536583.52
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	9114.00	773585.08
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	9114.00	773585.08
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) .....	238.63	9538.02
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	522.31	2354.10
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)) .....	9874.94	785477.20
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	9874.94	785477.20

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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.....	24797.37	578686.04
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	24797.37	578686.04
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	-1400.00	61336.30
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	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))..	23397.37	645522.34
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	23397.37	645522.34

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 22

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) .....	9114.00	773585.08
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	9114.00	773585.08
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	24797.37	578686.04
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	238.63	9538.02
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	24558.74	569148.02

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

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

FOR LINE NUMBER: PAGE 6 / 22  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

NAME OF COMMITTEE (In Full)  
MADISON PROJECT INC.

**A.** Full Name (Last, First, Middle Initial)  
Mr. John T. Alderson

Mailing Address 2239 Heather Ln

City State Zip Code  
Newport Beach CA 92660-3405

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 Y  
1 1 / 3 0 / 2 0 1 0

**Transaction ID:** SA11AI.42827

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Mr Kenneth Brown

Mailing Address 543 White Cottage Rd S

City State Zip Code  
Angwin CA 94508

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 ▼ 250.00

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

**Transaction ID:** SA11AI.42772

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Jennie K Dacy

Mailing Address PO Box 1221

City State Zip Code  
Bethel AK 99559-1221

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 ▼ 270.00

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

**Transaction ID:** SA11AI.42838

Amount of Each Receipt this Period  
120.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **270.00**

**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 / 22

(check only one)

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

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NAME OF COMMITTEE (In Full)  
MADISON PROJECT INC.

**A.**

Full Name (Last, First, Middle Initial)

Mrs Carolyn J Damon

Mailing Address PO Box 791719

City State Zip Code  
Paia HI 96779-1719

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

Name of Employer Occupation  
None Retired

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 225.00

Date of Receipt

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

Transaction ID: SA11AI.43000

Amount of Each Receipt this Period  
150.00

**B.**

Full Name (Last, First, Middle Initial)

Dr. John K Duckworth

Mailing Address 2586 Fogg Rd

City State Zip Code  
Nesbit MS 38651-8888

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 212.00

Date of Receipt

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

Transaction ID: SA11AI.42884

Amount of Each Receipt this Period  
20.00

**C.**

Full Name (Last, First, Middle Initial)

Dr. John K Duckworth

Mailing Address 2586 Fogg Rd

City State Zip Code  
Nesbit MS 38651-8888

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 237.00

Date of Receipt

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

Transaction ID: SA11AI.42885

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) .....

195.00

**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 / 22

(check only one)

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

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NAME OF COMMITTEE (In Full)  
MADISON PROJECT INC.

**A.**

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  
None Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 420.00

Date of Receipt

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

Transaction ID: SA11AI.43001

Amount of Each Receipt this Period  
45.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Harvey King

Mailing Address 11 Aalapapa Pl

City State Zip Code  
Kailua HI 96734-3118

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

Name of Employer Occupation  
None Retierd

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt

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

Transaction ID: SA11AI.42882

Amount of Each Receipt this Period  
240.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr Lloyd R Larner

Mailing Address 121 23rd St N

City State Zip Code  
Battle Creek MI 49015

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

Name of Employer Occupation  
None Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 220.00

Date of Receipt

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

Transaction ID: SA11AI.42874

Amount of Each Receipt this Period  
80.00

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

365.00

**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 / 22  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
MADISON PROJECT INC.

**A.** Full Name (Last, First, Middle Initial)  
Mr. Ralph K Lewis

Mailing Address 13559 Kensington PI

City State Zip Code  
Carmel IN 46032-5360

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 ▼ 225.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 0 8 / 2 0 1 0

**Transaction ID:** SA11AI.42889

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
Mr Robert L Pickens

Mailing Address 102 Joe Phillips Rd

City State Zip Code  
Madison AL 35758-9776

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 ▼ 420.00

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

**Transaction ID:** SA11AI.42810

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
Mr Burl Pillows

Mailing Address 10001 Highway 279

City State Zip Code  
Brownwood TX 76801-0405

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 ▼ 290.00

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

**Transaction ID:** SA11AI.42952

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 150.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 22  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
MADISON PROJECT INC.

**A.**

Full Name (Last, First, Middle Initial)  
Ms. Frances Predajna

Mailing Address 922 Arona Rd

City State Zip Code  
New Stanton PA 15672-1109

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

Name of Employer Occupation  
None Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 205.00

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

**Transaction ID:** SA11AI.42795

Amount of Each Receipt this Period  
100.00

**B.**

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

Mailing Address 4035 S 84th St Apt 3

City State Zip Code  
Greenfield WI 53228-2335

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

Name of Employer Occupation  
Homes For Independent Living Group Home Manager

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 321.00

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

**Transaction ID:** SA11AI.42886

Amount of Each Receipt this Period  
120.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Roger L Schaller

Mailing Address 8210 Lakeshore Rd

City State Zip Code  
Burtchville MI 48059-1324

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

Name of Employer Occupation  
Schaller Tool & Die Co. Manager

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

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

**Transaction ID:** SA11AI.42782

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **320.00**

**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: (check only one)	PAGE 11 / 22
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
MADISON PROJECT INC.

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Charles G. Schappert	Date of Receipt MM / DD / YYYY 11 / 30 / 2010
	Mailing Address PO Box 479	<b>Transaction ID:</b> SA11AI.42881
	City State Zip Code Paulsboro NJ 08066-0479	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
Name of Employer H.P.S., Inc.	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr Bernard R. Tanner	Date of Receipt MM / DD / YYYY 11 / 29 / 2010
	Mailing Address 110 Wood Rd Apt C106	<b>Transaction ID:</b> SA11AI.42783
	City State Zip Code Los Gatos CA 95030-6707	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	
Name of Employer None	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) MRS ANGELA WAITE	Date of Receipt MM / DD / YYYY 11 / 30 / 2010
	Mailing Address 1200 CALIFORNIA ST	<b>Transaction ID:</b> SA11AI.42745
	City State Zip Code SAN FRANCISCO CA 94109	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	900.00
<b>TOTAL</b> 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 / 22  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
MADISON PROJECT INC.

**A.**

Full Name (Last, First, Middle Initial)  
Mrs. Ruby S. Warren

Mailing Address 4020 Bluestem Cir

City State Zip Code  
Norman OK 73072-4525

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

Name of Employer None Occupation Homemaker

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
800.00

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

Transaction ID: SA11AI.42842

Amount of Each Receipt this Period  
300.00

**B.**

Full Name (Last, First, Middle Initial)  
Ms. 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 None 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  
1 1 / 2 9 / 2 0 1 0

Transaction ID: SA11AI.42781

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **550.00**

**TOTAL** This Period (last page this line number only) ..... ► **2750.00**

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 13 / 22	
	(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"/> 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)  
MADISON PROJECT INC.

A.

Full Name (Last, First, Middle Initial) United States Postal Office		Date of Receipt
Mailing Address 220 N Hatcher Ave		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>
City	State	Zip Code
Purcellville	VA	20134
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID: SA15.42735
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="238.63"/>
	<input type="text" value="1325.35"/>	Refund

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="238.63"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="238.63"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 14 / 22	
	(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"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full) MADISON PROJECT INC.
---

A.

Full Name (Last, First, Middle Initial) Nova List Company		Date of Receipt																				
Mailing Address 13755 Sunrise Valley Dr. Ste 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>1</td><td>2</td><td></td><td>0</td><td>3</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	1	2		0	3		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		0	3		2	0	1	0													
City	State	Zip Code																				
Herndon	VA	20171																				
FEC ID number of contributing federal political committee.		Transaction ID: SA17.42733																				
C		Amount of Each Receipt this Period																				
		522.31																				
Name of Employer	Occupation	LRI - Usual & Normal																				
Receipt For:	Aggregate Year-to-Date ▼																					
<input type="checkbox"/> Primary <input type="checkbox"/> General																						
<input type="checkbox"/> Other (specify) ▼	2354.10																					

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	522.31
<b>TOTAL</b> This Period (last page this line number only) .....	▶	522.31

**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 15 / 22

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

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NAME OF COMMITTEE (In Full)  
MADISON PROJECT INC.

A.	Full Name (Last, First, Middle Initial) BIGEYE Direct	Transaction ID: SB21B.43063 Date of Disbursement 11 / 24 / 2010
	Mailing Address 13864 Redskin Dr.	Amount of Each Disbursement this Period 543.93
	City Herndon State VA Zip Code 20171	
	Purpose of Disbursement PAC Printing & Mailing	Category/ Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Eagle Publishing	Transaction ID: SB21B.43074 Date of Disbursement 12 / 02 / 2010
	Mailing Address 1 Massachusetts Ave NW	Amount of Each Disbursement this Period 4106.81
	City Washington State DC Zip Code 20001	
	Purpose of Disbursement PAC Direct Marketing	Category/ Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK	Transaction ID: SB21B.43082 Date of Disbursement 11 / 30 / 2010
	Mailing Address 11325 RANDOM HILLS DR SUITE 240	Amount of Each Disbursement this Period 98.00
	City FAIRFAX State VA Zip Code 22030	
	Purpose of Disbursement PAC Bank Fees	Category/ Type
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	4748.74
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
MADISON PROJECT INC.

A.	Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK	Transaction ID: SB21B.43083
	Mailing Address 11325 RANDOM HILLS DR SUITE 240	Date of Disbursement 12 / 31 / 2010
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period 39.18
	Purpose of Disbursement PAC Bank Fees	Category/ Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) GLOBAL PAYMENTS INC	Transaction ID: SB21B.43084
	Mailing Address 10705 RED RUN BLVD	Date of Disbursement 12 / 31 / 2010
	City OWINGS MILLS State MD Zip Code 21117	Amount of Each Disbursement this Period 500.95
	Purpose of Disbursement PAC Transaction Fees	Category/ Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) HSP DIRECT	Transaction ID: SB21B.43064
	Mailing Address 13755 SUNRISE DR SUITE 450	Date of Disbursement 11 / 24 / 2010
	City HERNDON State VA Zip Code 20171	Amount of Each Disbursement this Period 777.77
	Purpose of Disbursement PAC Creative Fees	Category/ Type
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1317.90</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
MADISON PROJECT INC.

A.	Full Name (Last, First, Middle Initial) HSP DIRECT	Transaction ID: SB21B.43067
	Mailing Address 13755 SUNRISE DR SUITE 450	Date of Disbursement 12 / 09 / 2010
	City HERNDON State VA Zip Code 20171	Amount of Each Disbursement this Period 1350.86
	Purpose of Disbursement PAC Printing & Mailing	Category/ Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) MDI Imaging & Mail	Transaction ID: SB21B.43072
	Mailing Address 21955 Cascades Pkwy	Date of Disbursement 12 / 21 / 2010
	City Dulles State VA Zip Code 20166	Amount of Each Disbursement this Period 6754.34
	Purpose of Disbursement PAC Postage & Delivery	Category/ Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Professional Data Services	Transaction ID: SB21B.43076
	Mailing Address 264 N. Lumpkin St. Ste. 202	Date of Disbursement 12 / 02 / 2010
	City Athens State GA Zip Code 30601	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement PAC Compliance Consulting	Category/ Type
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>8605.20</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
MADISON PROJECT INC.

A.	Full Name (Last, First, Middle Initial) RST Marketing Associates	Transaction ID: SB21B.43065 Date of Disbursement
	Mailing Address 1272 Corporate Park Dr.	<input type="text" value="11"/> <input type="text" value="24"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Forest State VA Zip Code 24551	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC Postage & Delivery	<input type="text" value="4566.57"/>
	Candidate Name	Category/Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Mr. Jim Ryun	Transaction ID: SB21B.43077 Date of Disbursement
	Mailing Address 132 D St. SE	<input type="text" value="12"/> <input type="text" value="03"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC Field Consulting	<input type="text" value="2500.00"/>
	Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Mr. Jim Ryun	Transaction ID: SB21B.43078 Date of Disbursement
	Mailing Address 132 D St. SE	<input type="text" value="12"/> <input type="text" value="03"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement No Itemization Necessary	<input type="text" value="106.23"/>
	Candidate Name	Category/Type
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="7172.80"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

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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)  
MADISON PROJECT INC.

A.	Full Name (Last, First, Middle Initial) Mr. Jim Ryun	Transaction ID: SB21B.43079
	Mailing Address 132 D St. SE	Date of Disbursement MM / DD / YYYY 12 / 03 / 2010
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period 66.92
	Purpose of Disbursement No Itemization Necessary	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) SUNRISE DATA SERVICES	Transaction ID: SB21B.43066
	Mailing Address 13755 SUNRISE VALLEY DR SUITE 450	Date of Disbursement MM / DD / YYYY 11 / 24 / 2010
	City HERNDON State VA Zip Code 20171	Amount of Each Disbursement this Period 442.28
	Purpose of Disbursement PAC List Rental & Maintenance	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) SUNRISE DATA SERVICES	Transaction ID: SB21B.43068
	Mailing Address 13755 SUNRISE VALLEY DR SUITE 450	Date of Disbursement MM / DD / YYYY 12 / 09 / 2010
	City HERNDON State VA Zip Code 20171	Amount of Each Disbursement this Period 115.00
	Purpose of Disbursement PAC List Rental & Maintenance	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>624.20</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
MADISON PROJECT INC.

A.	Full Name (Last, First, Middle Initial) SUNRISE DATA SERVICES	Transaction ID: SB21B.43070 Date of Disbursement																			
	Mailing Address 13755 SUNRISE VALLEY DR 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>1</td><td>2</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	1	2		1	6		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	6		2	0	1	0												
	City HERNDON State VA Zip Code 20171	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PAC List Rental & Maintenance	<table border="1"><tr><td>223.75</td></tr></table>	223.75																		
223.75																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

B.	Full Name (Last, First, Middle Initial) SUNRISE DATA SERVICES	Transaction ID: SB21B.43073 Date of Disbursement																			
	Mailing Address 13755 SUNRISE VALLEY DR 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>1</td><td>2</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	1	2		3	0		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		3	0		2	0	1	0												
	City HERNDON State VA Zip Code 20171	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PAC List Rental & Maintenance	<table border="1"><tr><td>211.42</td></tr></table>	211.42																		
211.42																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

C.	Full Name (Last, First, Middle Initial) WASHINGTON INTELLIGENCE BUREAU	Transaction ID: SB21B.43069 Date of Disbursement																			
	Mailing Address 4128 PEPSI 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>1</td><td>2</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	1	2		1	6		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	6		2	0	1	0												
	City CHANTILLY State VA Zip Code 20151	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PAC Caging & Escrow	<table border="1"><tr><td>1803.90</td></tr></table>	1803.90																		
1803.90																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>2239.07</td></tr></table>	2239.07
2239.07		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td>24707.91</td></tr></table>	24707.91
24707.91		

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
MADISON PROJECT INC.

A.	Full Name (Last, First, Middle Initial) BUCK FOR COLORADO	Transaction ID: SB23.43177 Date of Disbursement																			
	Mailing Address PO BOX 101465	<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>1</td><td>2</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	1	2		3	1		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		3	1		2	0	1	0												
	City DENVER State CO Zip Code 80250	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Void of Previous	<table border="1"><tr><td>-1000.00</td></tr></table>	-1000.00																		
-1000.00																					
	Candidate Name KENNETH R BUCK	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) ED MARTIN FOR CONGRESS	Transaction ID: SB23.43178 Date of Disbursement																			
	Mailing Address 6037 HAMPTON AVENUE	<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>1</td><td>2</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	1	2		3	1		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		3	1		2	0	1	0												
	City ST LOUIS State MO Zip Code 63109	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Void of Previous	<table border="1"><tr><td>-225.00</td></tr></table>	-225.00																		
-225.00																					
	Candidate Name KENNETH R BUCK	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) JOE MILLER FOR US SENATE	Transaction ID: SB23.43179 Date of Disbursement																			
	Mailing Address PO BOX 72838	<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>1</td><td>2</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	1	2		3	1		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		3	1		2	0	1	0												
	City FAIRBANKS State AK Zip Code 99707	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Void of Previous	<table border="1"><tr><td>-175.00</td></tr></table>	-175.00																		
-175.00																					
	Candidate Name KENNETH R BUCK	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>-1400.00</td></tr></table>	-1400.00
-1400.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td>-1400.00</td></tr></table>	-1400.00
-1400.00		

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 22 / 22
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
MADISON PROJECT INC.

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor ELECTRONIC REPORTING SYSTEMS INC	Nature of Debt (Purpose): BEST EFFORTS MAILINGS
Mailing Address 683 BERRYVILLE AVE	
City State ZIP Code WINCHESTER VA 22601	

Outstanding Balance Beginning This Period	<b>Transaction ID: SD10.4110</b>	
1543.62		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	1543.62

1) <b>SUBTOTALS</b> This Period This Page (optional).....	1543.62
2) <b>TOTALS</b> This Period (last page this line number only).....	1543.62
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	1543.62