

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 LIBERTY LEAGUE

ADDRESS (number and street) 210 SOUTH ST #5-1 BOSTON MA 02111

2. FEC IDENTIFICATION NUMBER C00442038 3. IS THIS REPORT NEW OR AMENDED

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report(Q1) (b) Monthly Report Due On: Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) (d) 30-Day Post -Election Report for the: General (30G) Runoff (30R) Special (30S)

5. Covering Period 01 01 2008 through 03 31 2008

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 R Dennis Corrigan Signature of Treasurer Electronically Filed by R Dennis Corrigan Date 04 14 2008

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 FE6AN026 FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
LIBERTY LEAGUE

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		5477.42
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	5477.42									
(c) Total Receipts (from Line 19)	3128.00	3128.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	8605.42	8605.42								
7. Total Disbursements (from Line 31)	7267.51	7267.51								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1337.91	1337.91								
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)	1400.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
LIBERTY LEAGUE

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	8

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	1500.00	1500.00
(i) Itemized (use Schedule A)	1628.00	1628.00
(ii) Unitemized	3128.00	3128.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	3128.00	3128.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	3128.00	3128.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	3128.00	3128.00

DETAILED SUMMARY PAGE

of Disbursements

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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.....	427.51	427.51
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	427.51	427.51
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2850.00	2850.00
24. Independent Expenditure (use Schedule E)	2290.00	2290.00
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	1700.00	1700.00
(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))	1700.00	1700.00
29. Other Disbursements.....	0.00	0.00
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))..	7267.51	7267.51
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7267.51	7267.51

DETAILED SUMMARY PAGE
of Disbursements

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	3128.00	3128.00
34. Total Contribution Refunds (from Line 28(d))	1700.00	1700.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1428.00	1428.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	427.51	427.51
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	427.51	427.51

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

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

A.	Full Name (Last, First, Middle Initial) Ms. Stephanie F Hamilton		Date of Receipt
	Mailing Address 15 Oakridge Dr		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Saugus	MA	01906
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4451
Name of Employer comm of mass		Occupation supervisor	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"/> 250.00
		<input type="text"/> 250.00	

B.	Full Name (Last, First, Middle Initial) Ms. Stephanie F Hamilton		Date of Receipt
	Mailing Address 15 Oakridge Dr		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Saugus	MA	01906
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4452
Name of Employer comm of mass		Occupation supervisor	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"/> 250.00
		<input type="text"/> 500.00	

C.	Full Name (Last, First, Middle Initial) Mr. William Hees		Date of Receipt
	Mailing Address 78 Dana St #1		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Cambridge	MA	02138
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4405
Name of Employer CNET		Occupation Software Engineer	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"/> 500.00
		<input type="text"/> 500.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1000.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 7 / 12	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full) LIBERTY LEAGUE

A.

Full Name (Last, First, Middle Initial) Mr. Joseph Sidney Morton		Date of Receipt	
Mailing Address 43A Fort Square North		M M / D D / Y Y Y Y 0 2 / 1 4 / 2 0 0 8	
City	State	Zip Code	Transaction ID: SA11AI.4464
Greenfield	MA	01301	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		500.00	
Name of Employer ConAgra Foods	Occupation Custodian		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional)	500.00
TOTAL This Period (last page this line number only)	1500.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
LIBERTY LEAGUE

A.	Full Name (Last, First, Middle Initial) AMERICANS UNITED FOR LIBERTY	Transaction ID: SB23.4481 Date of Disbursement
	Mailing Address 2554 LINCOLN BL #293	<input type="text" value="02"/> / <input type="text" value="10"/> / <input type="text" value="2008"/>
	City VENICE State CA Zip Code 90291	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1850.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) RONALD E PAUL	Transaction ID: SB23.4469 Date of Disbursement
	Mailing Address 101 Blossom	<input type="text" value="02"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City Lake Jackson State TX Zip Code 77566	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name RONALD E PAUL	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 14	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2850.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="2850.00"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
LIBERTY LEAGUE

A. Full Name (Last, First, Middle Initial) Mr. Amir Hirsch <hr/> Mailing Address 28 Holton St <hr/> City Allston State MA Zip Code 02134 <hr/> Purpose of Disbursement Refund of cash contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A.4473 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 0 8
	Amount of Each Disbursement this Period 400.00
B. Full Name (Last, First, Middle Initial) Mr. Steven Young <hr/> Mailing Address 339 College Rd <hr/> City Wolfeboro State NH Zip Code 03894 <hr/> Purpose of Disbursement Refund of cash contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A.4472 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 0 8
	Amount of Each Disbursement this Period 1300.00

SUBTOTAL of Disbursements This Page (optional) ►

1700.00

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

1700.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 10 / 12
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
LIBERTY LEAGUE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor City of Boston	Nature of Debt (Purpose): Rent Faneuil Hall for Tea Party Rally
Mailing Address 1 City Hall Plaza	
City State ZIP Code Boston MA 02201	

Outstanding Balance Beginning This Period 1400.00	Transaction ID: SD10.4395	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1400.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Scott A DiNitto	Nature of Debt (Purpose): Live video streaming feed on our Website
Mailing Address 429 Marlborough St	
City State ZIP Code Boston MA 02115	

Outstanding Balance Beginning This Period 1000.00	Transaction ID: SD10.4391	
Amount Incurred This Period 0.00	Payment This Period 1000.00	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional).....	1400.00
2) TOTALS This Period (last page this line number only).....	1400.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	1400.00

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) LIBERTY LEAGUE	FEC IDENTIFICATION NUMBER ▼ C C00442038
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Scott A DiNitto

Mailing Address
429 Marlborough St

City Boston	State MA	Zip Code 02115
----------------	-------------	-------------------

Purpose of Expenditure Full payment for vid- eo streaming	Category/ Type 007
---	---

Name of Federal Candidate supported or Opposed by expenditure:
RON PAUL

Calendar Year-To-Date Per Election for Office Sought	2290.00
---	---

Date
02 / 16 / 2008

Amount
1000.00

Transaction ID: SE.4392

Office Sought: House State: _____
 Senate District: 00
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2008

Full Name (Last, First, Middle, Initial) of Payee
WATD

Mailing Address
130 Enterprise Drive

City Marshfield	State MA	Zip Code 02050
--------------------	-------------	-------------------

Purpose of Expenditure Radio Ad	Category/ Type 004
------------------------------------	---

Name of Federal Candidate supported or Opposed by expenditure:
RON PAUL

Calendar Year-To-Date Per Election for Office Sought	1290.00
---	---

Date
02 / 02 / 2008

Amount
300.00

Transaction ID: SE.4420

Office Sought: House State: _____
 Senate District: 00
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2008

(a) SUBTOTAL of Itemized Independent Expenditures	1300.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R Dennis Corrigan
Signature

Date 04 / 14 / 2008

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) LIBERTY LEAGUE		FEC IDENTIFICATION NUMBER C C00442038	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee WTKK-FM		Date M M / D D / Y Y Y Y 0 2 / 0 1 / 2 0 0 8	
Mailing Address 55 Morrissey Blvd		Amount 990.00	
City State Zip Code Dorchester MA 02125		Transaction ID: SE.4417	
Purpose of Expenditure Radio Ad		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: RON PAUL		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008	
Calendar Year-To-Date Per Election for Office Sought		990.00	

(a) SUBTOTAL of Itemized Independent Expenditures	990.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	2290.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
R Dennis Corrigan Signature	Date M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 8