

The Legacy Committee Political Action Committee

30011 Ivy Glenn Drive, Ste 223

Laguna Niguel

CA

92677

FEC ID No. C00429084

☐ 24-Hour Notice ☒ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 1 / 3

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
The Legacy Committee Political Action Committee

FEC IDENTIFICATION NUMBER

C C00429084

Check if ☐ 24-hour notice ☒ 48-hour notice

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

Response Dynamics, Inc.

Date

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

Amount

2700.00

Mailing Address

2070 Chain Bridge Rd., Suite 520

City

Vienna

State

VA

Zip Code

22182

Purpose of Expenditure

Postage

Category/
Type

003

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☒ Presidential

Check One:

☒ Support☐ Oppose

Disbursement For:

☐ Primary☒ General 2008☐ Other (specify) : _____

Transaction ID: EDT.E.219

Calendar Year-To-Date Per Election

256154.56

for Office Sought

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

Response Dynamics, Inc.

Date

M M / D D / Y Y Y Y
0 7 / 1 5 / 2 0 0 8

Amount

19409.03

Mailing Address

2070 Chain Bridge Rd., Suite 520

City

Vienna

State

VA

Zip Code

22182

Purpose of Expenditure

Postage

Category/
Type

003

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☒ Presidential

Check One:

☒ Support☐ Oppose

Disbursement For:

☐ Primary☒ General 2008☐ Other (specify) : _____

Transaction ID: EDT.E.221

Calendar Year-To-Date Per Election

256154.56

for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures

22109.03

(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.

James Lacy

Signature

M M / D D / Y Y Y Y
0 7 / 2 3 / 2 0 0 8

24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour NoticeSCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE OF 2 / 3
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER C C00429084	
Check if <input type="checkbox"/> 24-hour notice <input checked="" type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Mid America Printing		Date M M / D D / Y Y Y Y 0 7 / 1 6 / 2 0 0 8	
Mailing Address 2070 Chain Bridge Road, Suite 520		Amount 4064.29	
City Vienna	State VA	Zip Code 22182	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential
Purpose of Expenditure Printing	Category/ Type	003	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate supported or Opposed by expenditure: John McCain			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2008 <input type="checkbox"/> Other (specify) : _____
Calendar Year-To-Date Per Election for Office Sought		256154.56	Transaction ID: EDT.E.222
Full Name (Last, First, Middle, Initial) of Payee Direct Response Data		Date M M / D D / Y Y Y Y 0 7 / 1 7 / 2 0 0 8	
Mailing Address 2070 Chain Bridge Road, Suite 520		Amount 7419.36	
City Vienna	State VA	Zip Code 22182	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential
Purpose of Expenditure Data entry	Category/ Type	003	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate supported or Opposed by expenditure: John McCain			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2008 <input type="checkbox"/> Other (specify) : _____
Calendar Year-To-Date Per Election for Office Sought		256154.56	Transaction ID: EDT.E.224

(a) SUBTOTAL of Itemized Independent Expenditures	11483.65
(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.	
James Lacy Signature	M M / D D / Y Y Y Y 0 7 / 2 3 / 2 0 0 8

24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :**FEC ID No.**☐ 24-Hour Notice ☐ 48-Hour Notice**SCHEDULE E (FEC Form 3X)****ITEMIZED INDEPENDENT EXPENDITURES**

PAGE OF 3 / 3

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

FEC IDENTIFICATION NUMBER**C** C00429084Check if ☐ 24-hour notice ☒ 48-hour notice

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

The Best List, Inc.

Date

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

Mailing Address

2070 Chain Bridge Rd., suite 520

Amount

2247.47

City

Vienna

State

VA

Zip Code

22182

Purpose of Expenditure

Mailing lists

Category/
Type

003

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☒ Presidential

Check One:

☒ Support☐ Oppose

Name of Federal Candidate supported or Opposed by expenditure:

John McCain

Disbursement For:

☐ Primary☒ General 2008☐ Other (specify) : _____

Calendar Year-To-Date Per Election

256154.56

for Office Sought

Transaction ID: EDT.E.223

(a) SUBTOTAL of Itemized Independent Expenditures

2247.47

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures

35840.15

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.

James Lacy

Signature

M M / D D / Y Y Y Y
0 7 / 2 3 / 2 0 0 8