

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
Rely on Your Beliefs Fund

ADDRESS (number and street) 209 Pennsylvania Avenue, SE
 Check if different than previously reported. (ACC)
Washington DC 20003

2. **FEC IDENTIFICATION NUMBER** C00344648
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 05 01 2007 through 05 31 2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Paul Kilgore

Signature of Treasurer Electronically Filed by Paul Kilgore Date 06 20 2007

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Rely on Your Beliefs Fund

Report Covering the Period: From:

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		240493.94
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	198015.54									
(c) Total Receipts (from Line 19)	136950.00	346450.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	334965.54	586943.94								
7. Total Disbursements (from Line 31)	39275.79	291254.19								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	295689.75	295689.75								
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**

Write or Type Committee Name
Rely on Your Beliefs Fund

Report Covering the Period: From:

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	7

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)	5950.00	23950.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	5950.00	23950.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	126000.00	312500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	131950.00	336450.00
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	5000.00	10000.00
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))	136950.00	346450.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	136950.00	346450.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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.....	29875.79	134241.32
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	29875.79	134241.32
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9400.00	156812.87
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	200.00
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))..	39275.79	291254.19
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	39275.79	291254.19

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)	131950.00	336450.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	131950.00	336450.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	29875.79	134241.32
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	29875.79	134241.32

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 35
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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)
Rely on Your Beliefs Fund

A. Full Name (Last, First, Middle Initial)
Aetna PAC

Mailing Address 1331 F St NW
Suit 450

City State Zip Code
Washington DC 20004-1133

FEC ID number of contributing federal political committee. **C** C00181826

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 Y
0 5 / 0 2 / 2 0 0 7

Transaction ID: 70508.C473

Amount of Each Receipt this Period
2500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Alabama Farmers Federation PAC

Mailing Address PO Box 11023

City State Zip Code
Montgomery AL 36191-0001

FEC ID number of contributing federal political committee. **C** C00094573

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 Y
0 5 / 3 0 / 2 0 0 7

Transaction ID: 70618.C529

Amount of Each Receipt this Period
2500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Altria Group PAC

Mailing Address 101 Constitution Ave NW
Suite 400

City State Zip Code
Washington DC 20001-2133

FEC ID number of contributing federal political committee. **C** C00089136

Name of Employer Occupation

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 5 / 1 5 / 2 0 0 7

Transaction ID: 70515.C490

Amount of Each Receipt this Period
2500.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	7500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 35
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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)
Rely on Your Beliefs Fund

Full Name (Last, First, Middle Initial) A. American Apparel & Footwear PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7		
Mailing Address 1601 N Kent St Suite 1200		Transaction ID: 70508.C471		
City Arlington State VA Zip Code 22209-2105	Amount of Each Receipt this Period 5000.00		Receipt	
FEC ID number of contributing federal political committee. C C00338442				
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 5000.00			

Full Name (Last, First, Middle Initial) B. American Assoc of Nurse Anesthetists PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7		
Mailing Address 412 1st St., NE Suit 12		Transaction ID: 70618.C527		
City Washington State DC Zip Code 20003	Amount of Each Receipt this Period 2500.00		Receipt	
FEC ID number of contributing federal political committee. C C00173153				
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 2500.00			

Full Name (Last, First, Middle Initial) C. American Council of Life Insurers PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7		
Mailing Address 101 Constitution Ave NW Suite 700		Transaction ID: 70517.C498		
City Washington State DC Zip Code 20001-2133	Amount of Each Receipt this Period 2500.00		Receipt	
FEC ID number of contributing federal political committee. C C00147066				
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 5000.00			

SUBTOTAL of Receipts This Page (optional) ▶	10000.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 35
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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)
Rely on Your Beliefs Fund

Full Name (Last, First, Middle Initial) A. American Dental PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7
Mailing Address 1111 14th St NW Suite 1100		Transaction ID: 70618.C524
City Washington State DC Zip Code 20005-5627	FEC ID number of contributing federal political committee. C C00000729	Amount of Each Receipt this Period 2500.00
Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Receipt
Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) B. American Insurance Association PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7
Mailing Address 1130 Connecticut Ave NW Suite 1000		Transaction ID: 70518.C513
City Washington State DC Zip Code 20036-3901	FEC ID number of contributing federal political committee. C C00103143	Amount of Each Receipt this Period 2500.00
Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Receipt
Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) C. AMPAC of the Chicago Board of Trade		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7
Mailing Address 1455 Pennsylvania Ave NW Suite 1225		Transaction ID: 70618.C525
City Washington State DC Zip Code 20004-1015	FEC ID number of contributing federal political committee. C C00059832	Amount of Each Receipt this Period 1000.00
Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Receipt
Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional)	▶	6000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 35
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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)
Rely on Your Beliefs Fund

A. Full Name (Last, First, Middle Initial)
Association of American Railroads PAC

Mailing Address 50 F St NW

City Washington State DC Zip Code 20001-1530

FEC ID number of contributing federal political committee. **C** C00280743

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
05 / 02 / 2007

Transaction ID: 70508.C477

Amount of Each Receipt this Period
2000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Automotive Free International Trade PAC

Mailing Address 1625 Prince St Suite 225

City Alexandria State VA Zip Code 22314-2889

FEC ID number of contributing federal political committee. **C** C00250399

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
05 / 16 / 2007

Transaction ID: 70517.C496

Amount of Each Receipt this Period
5000.00

Receipt

C. Full Name (Last, First, Middle Initial)
AZ PAC

Mailing Address 701 Pennsylvania Ave NW Suite 500

City Washington State DC Zip Code 20004-2624

FEC ID number of contributing federal political committee. **C** C00279455

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
05 / 15 / 2007

Transaction ID: 70515.C480

Amount of Each Receipt this Period
5000.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	12000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 35
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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)
Rely on Your Beliefs Fund

Full Name (Last, First, Middle Initial) A. BNSF RailPAC		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 7	
Mailing Address 700 13th St NW Suite 220		Transaction ID: 70618.C526	
City State Zip Code Washington DC 20005-5915	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C C00235739		Receipt	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) B. Bryan Cave LLP Political Fund		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 7	
Mailing Address 700 13th St NW Ste 700		Transaction ID: 70508.C478	
City State Zip Code Washington DC 20005-6619	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C C00332643		Receipt	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) C. Capital One Associates Political Fund		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 7	
Mailing Address 1680 Capital One Dr		Transaction ID: 70515.C487	
City State Zip Code Mc Lean VA 22102-3407	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C C00326595		Receipt	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 5000.00		

SUBTOTAL of Receipts This Page (optional) ▶	8500.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 35
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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)
Rely on Your Beliefs Fund

Full Name (Last, First, Middle Initial) A. CSX Corporation Good Government Fund		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7
Mailing Address 1331 Pennsylvania Ave NW Suite 500		Transaction ID: 70508.C479
City Washington State DC Zip Code 20004-1743	FEC ID number of contributing federal political committee. C C00163832	Amount of Each Receipt this Period 5000.00
Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Receipt
Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) B. Eli Lilly and Co. PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7
Mailing Address 555 12th St NW Suite 650		Transaction ID: 70517.C497
City Washington State DC Zip Code 20004-1209	FEC ID number of contributing federal political committee. C C00082792	Amount of Each Receipt this Period 5000.00
Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Receipt
Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) C. FedPac		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7
Mailing Address 801 Pennsylvania Ave NW		Transaction ID: 70517.C495
City Washington State DC Zip Code 20004-2615	FEC ID number of contributing federal political committee. C C00002261	Amount of Each Receipt this Period 2500.00
Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Receipt
Aggregate Year-to-Date ▼ 2500.00		

SUBTOTAL of Receipts This Page (optional)	▶	12500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 35
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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)
Rely on Your Beliefs Fund

A. Full Name (Last, First, Middle Initial)
Freddie Mac PAC

Mailing Address 401 9th St NW Ste 600
Suite 600

City Washington State DC Zip Code 20004-2144

FEC ID number of contributing federal political committee. **C** C00404129

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
05 / 02 / 2007

Transaction ID: 70508.C475

Amount of Each Receipt this Period
2500.00

Receipt

B. Full Name (Last, First, Middle Initial)
GlaxoSmithKline PAC

Mailing Address 1500 K Street, NW
Suite 650

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00199703

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
05 / 15 / 2007

Transaction ID: 70515.C483

Amount of Each Receipt this Period
2500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Home Depot PAC

Mailing Address 101 Constitution Ave NW Ste 800W
Suite 800 W

City Washington State DC Zip Code 20001-2127

FEC ID number of contributing federal political committee. **C** C00284885

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
05 / 18 / 2007

Transaction ID: 70518.C508

Amount of Each Receipt this Period
5000.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	10000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 / 35
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Rely on Your Beliefs Fund

A. Full Name (Last, First, Middle Initial)
Independent Community Bankers PAC

Mailing Address 1 Thomas Circle NW
Suite 400

City State Zip Code
Washington DC 20005-5807

FEC ID number of contributing federal political committee. **C** C00032698

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
05 / 15 / 2007

Transaction ID: 70515.C492

Amount of Each Receipt this Period
2500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Kochpac

Mailing Address 655 15th St NW
Suite 445

City State Zip Code
Washington DC 20005-5727

FEC ID number of contributing federal political committee. **C** C00236489

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
05 / 15 / 2007

Transaction ID: 70515.C485

Amount of Each Receipt this Period
2500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Medco Health PAC

Mailing Address 591 Redwood Hwy Ste 4000
Building 4000

City State Zip Code
Mill Valley CA 94941-3039

FEC ID number of contributing federal political committee. **C** C00384362

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
05 / 15 / 2007

Transaction ID: 70515.C494

Amount of Each Receipt this Period
5000.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	10000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 35
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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)
Rely on Your Beliefs Fund

Full Name (Last, First, Middle Initial) A. Morgan Stanley PAC		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 7
Mailing Address 401 9th St NW Suite 650		Transaction ID: 70515.C481
City State Zip Code Washington DC 20004-2151	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00337626		Receipt
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) B. New York Life PAC		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 7
Mailing Address 1501 K St NW Suite 575		Transaction ID: 70508.C470
City State Zip Code Washington DC 20005-1413	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00158881		Receipt
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Norfolk Southern Corp Good Govt Fund		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 7
Mailing Address 1500 K St NW Suite 175		Transaction ID: 70515.C489
City State Zip Code Washington DC 20005-1209	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00009282		Receipt
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional) ▶	11000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 / 35						
	(check only one)							
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Rely on Your Beliefs Fund

A. Full Name (Last, First, Middle Initial)
Northwest Airlines PAC

Mailing Address 901 9th St NW
Suite 310

City Washington State DC Zip Code 20001-4427

FEC ID number of contributing federal political committee. **C** C00104802

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
05 / 02 / 2007

Transaction ID: 70508.C472

Amount of Each Receipt this Period
2500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Office of the Commissioner of Major

Mailing Address League Baseball PAC
1050 Connecticut Avenue, NW., Ste.

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00368142

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
05 / 15 / 2007

Transaction ID: 70515.C486

Amount of Each Receipt this Period
2500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Raytheon PAC

Mailing Address 1100 Wilson Blvd Ste 1500
Suite 1500

City Arlington State VA Zip Code 22209-2270

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
05 / 15 / 2007

Transaction ID: 70515.C482

Amount of Each Receipt this Period
2500.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	7500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 35
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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)
Rely on Your Beliefs Fund

Full Name (Last, First, Middle Initial) A. ReitPAC		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 7	
Mailing Address 1875 I St NW Ste 600 Suite 600		Transaction ID: 70518.C515	
City Washington State DC Zip Code 20006-5413	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C C00303339		Receipt	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. SIFMA PAC		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 7	
Mailing Address 1425 K St NW 7th Floor		Transaction ID: 70515.C491	
City Washington State DC Zip Code 20005-3500	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C C00067504		Receipt	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. T-Mobile PAC		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 7	
Mailing Address 401 9th St NW Suite 550		Transaction ID: 70518.C512	
City Washington State DC Zip Code 20004-2141	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C C00361758		Receipt	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	10000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 35
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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)
Rely on Your Beliefs Fund

A. Full Name (Last, First, Middle Initial)
UBS Americas PAC

Mailing Address 1501 K St NW
Suite 1100

City State Zip Code
Washington DC 20005-1410

FEC ID number of contributing federal political committee. **C** C00012245

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
05 / 18 / 2007

Transaction ID: 70518.C514

Amount of Each Receipt this Period
5000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Union Pacific Corporation PAC

Mailing Address 600 13th St NW
Suite 340

City State Zip Code
Washington DC 20005-3012

FEC ID number of contributing federal political committee. **C** C00010470

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
05 / 15 / 2007

Transaction ID: 70515.C493

Amount of Each Receipt this Period
5000.00

Receipt

C. Full Name (Last, First, Middle Initial)
United States Telecom Assoc. PAC

Mailing Address 607 14th St NW Ste 400

City State Zip Code
Washington DC 20005-2051

FEC ID number of contributing federal political committee. **C** C00000984

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
05 / 15 / 2007

Transaction ID: 70515.C484

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	11000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 35		
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Rely on Your Beliefs Fund

A. Full Name (Last, First, Middle Initial)
US Oncology Good Govt Committee

Mailing Address 16825 Northchase Dr Ste 1300

City State Zip Code
Houston TX 77060-6005

FEC ID number of contributing federal political committee. **C** C00339655

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
05 / 30 / 2007

Transaction ID: 70618.C530

Amount of Each Receipt this Period
2500.00

Receipt

B. Full Name (Last, First, Middle Initial)
US Team PAC

Mailing Address 100 W Putnam Ave

City State Zip Code
Greenwich CT 06830-5342

FEC ID number of contributing federal political committee. **C** C00104851

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
05 / 15 / 2007

Transaction ID: 70515.C488

Amount of Each Receipt this Period
2500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Washington Group International PAC

Mailing Address 2345 Crystal Dr Ste 708 Suite 708

City State Zip Code
Arlington VA 22202-4801

FEC ID number of contributing federal political committee. **C** C00097550

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
05 / 02 / 2007

Transaction ID: 70508.C469

Amount of Each Receipt this Period
2500.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	7500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 / 35
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Rely on Your Beliefs Fund

A. Full Name (Last, First, Middle Initial)
Washington Group International PAC

Mailing Address 2345 Crystal Dr Ste 708
Suite 708

City State Zip Code
Arlington VA 22202-4801

FEC ID number of contributing federal political committee. **C** C00097550

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 1 8 / 2 0 0 7

Transaction ID: 70518.C522

Amount of Each Receipt this Period
2500.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	2500.00
TOTAL This Period (last page this line number only)	▶	126000.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 35
	<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	

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NAME OF COMMITTEE (In Full)
Rely on Your Beliefs Fund

A. Full Name (Last, First, Middle Initial)
Larry Burton

Mailing Address 4125 26th Rd N

City State Zip Code
Arlington VA 22207-5140

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

Name of Employer Business Roundtable Occupation Lobbyist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
05 / 18 / 2007

Transaction ID: 70518.C523

Amount of Each Receipt this Period
1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Ray Cole

Mailing Address 2004 Rhode Island Ave

City State Zip Code
Mc Lean VA 22101-4921

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

Name of Employer Van Scoyoc Occupation Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
05 / 02 / 2007

Transaction ID: 70508.C476

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Samantha Cook

Mailing Address 600 New Hampshire Ave NW Suite 1000

City State Zip Code
Washington DC 20037-2401

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

Name of Employer Fierce Isakowitz & Blalock Occupation Lobbyist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
MM / DD / YYYY
05 / 18 / 2007

Transaction ID: 70518.C511

Amount of Each Receipt this Period
1200.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	3200.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 35
	<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	

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NAME OF COMMITTEE (In Full)
Rely on Your Beliefs Fund

A. Full Name (Last, First, Middle Initial)
Jared Davis

Mailing Address 5155 Financial Way

City State Zip Code
Mason OH 45040-7447

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

Name of Employer Check n Go Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
05 / 30 / 2007

Transaction ID: 70618.C528

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Art Lifson

Mailing Address 1155 21st St NW Ste 340 Suite 340

City State Zip Code
Washington DC 20036-3308

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

Name of Employer Self-Employed Occupation Lobbyist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
05 / 18 / 2007

Transaction ID: 70518.C509

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Andrew Shore

Mailing Address 1909 K St NW

City State Zip Code
Washington DC 20006-1152

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

Name of Employer Mayer Browne Occupation Lobbyist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
MM / DD / YYYY
05 / 18 / 2007

Transaction ID: 70518.C510

Amount of Each Receipt this Period
1500.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	2750.00
TOTAL This Period (last page this line number only)	▶	5950.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 22 / 35
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15
		<input checked="" type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Rely on Your Beliefs Fund

A. Full Name (Last, First, Middle Initial)
Bob Beauprez for Congress

Mailing Address PO Box 501

City State Zip Code
Wheat Ridge CO 80034-0501

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

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

Transaction ID: 70508.C474

Amount of Each Receipt this Period
5000.00

Refund of Contribution Made

SUBTOTAL of Receipts This Page (optional)	▶	5000.00
TOTAL This Period (last page this line number only)	▶	5000.00

**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)

PAGE 23 / 35

<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)
Rely on Your Beliefs Fund

Full Name (Last, First, Middle Initial) A. Comcast		Transaction ID: 70517.E870
Mailing Address PO Box 3005		Date of Disbursement MM / DD / YYYY 05 / 16 / 2007
City Southeastern	State PA	Zip Code 19398-3005
Purpose of Disbursement PAC INTERNET EXPENSE	Amount of Each Disbursement this Period 46.42	
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:	PAC INTERNET EXPENSE	

Full Name (Last, First, Middle Initial) B. UPS		Transaction ID: 70508.E858
Mailing Address PO Box 72470244		Date of Disbursement MM / DD / YYYY 05 / 02 / 2007
City Philadelphia	State PA	Zip Code 19170-0001
Purpose of Disbursement PAC SHIPPING EXPENSE	Amount of Each Disbursement this Period 10.01	
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:	PAC SHIPPING EXPENSE	

Full Name (Last, First, Middle Initial) C. UPS		Transaction ID: 70517.E869
Mailing Address PO Box 72470244		Date of Disbursement MM / DD / YYYY 05 / 16 / 2007
City Philadelphia	State PA	Zip Code 19170-0001
Purpose of Disbursement PAC SHIPPING EXPENSE	Amount of Each Disbursement this Period 66.87	
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:	PAC SHIPPING EXPENSE	

SUBTOTAL of Disbursements This Page (optional)	123.30
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)

<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)
Rely on Your Beliefs Fund

Full Name (Last, First, Middle Initial) A. UPS		Transaction ID: 70518.E878 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 7
Mailing Address PO Box 72470244		Amount of Each Disbursement this Period 11.54
City Philadelphia State PA Zip Code 19170-0001	Category/ Type PAC SHIPPING EXPENSE	
Purpose of Disbursement PAC SHIPPING EXPENSE		
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) ▼	

Full Name (Last, First, Middle Initial) B. UPS		Transaction ID: 70618.E881 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 7
Mailing Address PO Box 72470244		Amount of Each Disbursement this Period 36.64
City Philadelphia State PA Zip Code 19170-0001	Category/ Type PAC SHIPPING EXPENSE	
Purpose of Disbursement PAC SHIPPING EXPENSE		
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) ▼	

Full Name (Last, First, Middle Initial) C. Visa		Transaction ID: 70508.E849 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 7
Mailing Address PO Box 77042		Amount of Each Disbursement this Period 3608.65
City Madison State WI Zip Code 53707-1042	Category/ Type CREDIT CARD CHARGES: SEE BELOW	
Purpose of Disbursement CREDIT CARD CHARGES: SEE BELOW		
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) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3656.83
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)
Rely on Your Beliefs Fund

Full Name (Last, First, Middle Initial) A. Washington Post		Transaction ID: 70508.E852 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 7
Mailing Address 1150 15th St NW		Amount of Each Disbursement this Period 30.46
City Washington State DC Zip Code 20071-0001	[MEMO ITEM] MEMO: PAC SUBSCRIPTION	
Purpose of Disbursement PAC SUBSCRIPTION 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) ▼

Full Name (Last, First, Middle Initial) B. US Airways		Transaction ID: 70620.E934 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 7
Mailing Address 4000 E Sky Harbor Blvd		Amount of Each Disbursement this Period 503.80
City Phoenix State AZ Zip Code 85034-3802	[MEMO ITEM] MEMO: PAC AIRFARE EXPENSE	
Purpose of Disbursement PAC AIRFARE EXPENSE 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) ▼

Full Name (Last, First, Middle Initial) C. US Airways		Transaction ID: 70508.E855 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 7
Mailing Address 4000 E Sky Harbor Blvd		Amount of Each Disbursement this Period 509.40
City Phoenix State AZ Zip Code 85034-3802	[MEMO ITEM] MEMO: TURNER FOR CONGRESS	
Purpose of Disbursement TURNER FOR CONGRESS 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) ▶	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)
Rely on Your Beliefs Fund

A. Sonoma Full Name (Last, First, Middle Initial) Mailing Address 223 Pennsylvania Ave SE City Washington State DC Zip Code 20003-1107 Purpose of Disbursement PAC FUNDRAISING LUNCH 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: 70508.E857 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 7 Amount of Each Disbursement this Period 43.25 [MEMO ITEM] MEMO: PAC FUNDRAISING LUNCH
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B. Agent Fee Full Name (Last, First, Middle Initial) Mailing Address 3424 S National Ave City Springfield State MO Zip Code 65807-7307 Purpose of Disbursement PAC AIRFARE EXPENSE 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: 70508.E851 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 7 Amount of Each Disbursement this Period 75.00 [MEMO ITEM] MEMO: PAC AIRFARE EXPENSE
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C. American Air Full Name (Last, First, Middle Initial) Mailing Address 4255 Amon Carter Blvd # 2400 City Fort Worth State TX Zip Code 76155-2603 Purpose of Disbursement PAC AIRFARE EXPENSE 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: 70508.E850 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 7 Amount of Each Disbursement this Period 1850.60 [MEMO ITEM] MEMO: PAC AIRFARE EXPENSE
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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)
Rely on Your Beliefs Fund

Full Name (Last, First, Middle Initial) A. Delta Airlines		Transaction ID: 70508.E856 Date of Disbursement MM / DD / YYYY 05 / 02 / 2007	
Mailing Address 1030 Delta Blvd		Amount of Each Disbursement this Period 549.80	
City Atlanta State GA Zip Code 30354-1989	Purpose of Disbursement TURNER FOR CONGRESS	Category/ Type	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

[MEMO ITEM]
MEMO: TURNER FOR CONGRESS

Full Name (Last, First, Middle Initial) B. Visa		Transaction ID: 70508.E838 Date of Disbursement MM / DD / YYYY 05 / 02 / 2007	
Mailing Address PO Box 77042		Amount of Each Disbursement this Period 97.32	
City Madison State WI Zip Code 53707-1042	Purpose of Disbursement CREDIT CARD CHARGES: SEE BELOW	Category/ Type	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

CREDIT CARD CHARGES: SEE BELOW

Full Name (Last, First, Middle Initial) C. Johnnys Half Shell		Transaction ID: 70508.E839 Date of Disbursement MM / DD / YYYY 05 / 02 / 2007	
Mailing Address 400 N Capitol St NW		Amount of Each Disbursement this Period 26.60	
City Washington State DC Zip Code 20001-1511	Purpose of Disbursement PAC LUNCH MEETING	Category/ Type	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

[MEMO ITEM]
MEMO: PAC LUNCH MEETING

SUBTOTAL of Disbursements This Page (optional) ▶	97.32
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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)
Rely on Your Beliefs Fund

<p>A. Visa</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 77042</p> <p>City Madison State WI Zip Code 53707-1042</p> <p>Purpose of Disbursement CREDIT CARD CHARGES: SEE BELOW</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: 70508.E842</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="380.30"/></p> <p>CREDIT CARD CHARGES: SEE BELOW</p>
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<p>B. Washington Courier</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 5520 Cherokee Ave Suite 120</p> <p>City Alexandria State VA Zip Code 22312-2319</p> <p>Purpose of Disbursement PAC COURIER EXPENSE</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: 70508.E843</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="85.35"/></p> <p>[MEMO ITEM] MEMO: PAC COURIER EXPENSE</p>
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<p>C. SCI*Stamps.com</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 12959 Coral Tree PI</p> <p>City Los Angeles State CA Zip Code 90066-7020</p> <p>Purpose of Disbursement PAC 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: 70508.E845</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="81.98"/></p> <p>[MEMO ITEM] MEMO: PAC POSTAGE</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="380.30"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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)
Rely on Your Beliefs Fund

A. GMD Technologies Full Name (Last, First, Middle Initial) Mailing Address 3210 S 28th St Apt 302 City Alexandria State VA Zip Code 22302-1326 Purpose of Disbursement PAC TECHNOLOGY 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: 70508.E859 Date of Disbursement 05 / 02 / 2007 Amount of Each Disbursement this Period 608.80 PAC TECHNOLOGY SERVICES
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B. McKenna Long & Aldridge Full Name (Last, First, Middle Initial) Mailing Address 303 Peachtree St NE Suite 5300 City Atlanta State GA Zip Code 30308-3265 Purpose of Disbursement PAC LEGAL 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: 70508.E860 Date of Disbursement 05 / 02 / 2007 Amount of Each Disbursement this Period 1000.00 PAC LEGAL SERVICES
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C. McKenna Long & Aldridge Full Name (Last, First, Middle Initial) Mailing Address 303 Peachtree St NE Suite 5300 City Atlanta State GA Zip Code 30308-3265 Purpose of Disbursement PAC LEGAL 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: 70618.E883 Date of Disbursement 05 / 30 / 2007 Amount of Each Disbursement this Period 1000.00 PAC LEGAL SERVICES
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SUBTOTAL of Disbursements This Page (optional) ▶	2608.80
TOTAL This Period (last page this line number only) ▶	(Empty box)

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)
Rely on Your Beliefs Fund

Full Name (Last, First, Middle Initial) A. Thompson Communications		Transaction ID: 70508.E861 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 7
Mailing Address P.O. Box 5		Amount of Each Disbursement this Period 11226.71
City Marshfield State MO Zip Code 65706-0005	PAC STAFFING SERVICES	
Purpose of Disbursement PAC STAFFING SERVICES		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) ▼	

Full Name (Last, First, Middle Initial) B. Washington Courier		Transaction ID: 70517.E871 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 7
Mailing Address 5520 Cherokee Ave Suite 120		Amount of Each Disbursement this Period 10.58
City Alexandria State VA Zip Code 22312-2319	PAC COURIER EXPENSE	
Purpose of Disbursement PAC COURIER EXPENSE		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) ▼	

Full Name (Last, First, Middle Initial) C. Washington Courier		Transaction ID: 70618.E884 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 7
Mailing Address 5520 Cherokee Ave Suite 120		Amount of Each Disbursement this Period 11.74
City Alexandria State VA Zip Code 22312-2319	PAC COURIER EXPENSE	
Purpose of Disbursement PAC COURIER EXPENSE		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) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	11249.03
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)
Rely on Your Beliefs Fund

Full Name (Last, First, Middle Initial) A. Raspberry Falls Golf & Hunt Club		Transaction ID: 70618.E882
Mailing Address 41601 Raspberry Dr		Date of Disbursement 05 / 30 / 2007
City Leesburg	State VA	Zip Code 20176-6271
Purpose of Disbursement PAC EVENT FEES & CATERING	Amount of Each Disbursement this Period 5861.86	
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:	PAC EVENT FEES & CATERING	

Full Name (Last, First, Middle Initial) B. Adams Screen Printing		Transaction ID: 70618.E880
Mailing Address 6535 Shiloh Rd Ste C1000		Date of Disbursement 05 / 30 / 2007
City Alpharetta	State GA	Zip Code 30005-1608
Purpose of Disbursement PAC EVENT PRINTING	Amount of Each Disbursement this Period 1470.19	
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:	PAC EVENT PRINTING	

Full Name (Last, First, Middle Initial) C. Keri Ann Hayes		Transaction ID: 70517.E866
Mailing Address 202 11th St NE		Date of Disbursement 05 / 16 / 2007
City Washington	State DC	Zip Code 20002-6218
Purpose of Disbursement SEE BELOW-NO ITEMIZATION NECESSARY	Amount of Each Disbursement this Period 39.01	
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:	SEE BELOW-NO ITEMIZATION NECESSARY	

SUBTOTAL of Disbursements This Page (optional)	7371.06
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Rely on Your Beliefs Fund

Full Name (Last, First, Middle Initial) A. Keri Ann Hayes		Transaction ID: 70518.E877 Date of Disbursement 05 / 18 / 2007	
Mailing Address 202 11th St NE		Amount of Each Disbursement this Period 214.55	
City Washington State DC Zip Code 20002-6218	Purpose of Disbursement PAC TAXI/TOLL EXPENSES	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) ▼	PAC TAXI/TOLL EXPENSES	

Full Name (Last, First, Middle Initial) B. Jay Perron		Transaction ID: 70517.E872 Date of Disbursement 05 / 16 / 2007	
Mailing Address 1441 Constitution Ave NE		Amount of Each Disbursement this Period 120.00	
City Washington State DC Zip Code 20002-6421	Purpose of Disbursement SEE BELOW-NO ITEMIZATION NECESSARY	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) ▼	SEE BELOW-NO ITEMIZATION NECESSARY	

Full Name (Last, First, Middle Initial) C. Dan Williams		Transaction ID: 70508.E863 Date of Disbursement 05 / 02 / 2007	
Mailing Address 209 Pennsylvania Ave SE		Amount of Each Disbursement this Period 2028.00	
City Washington State DC Zip Code 20003-1107	Purpose of Disbursement PAC OFFICE RENT	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) ▼	PAC OFFICE RENT	

SUBTOTAL of Disbursements This Page (optional) ▶	2362.55
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)
Rely on Your Beliefs Fund

A. Full Name (Last, First, Middle Initial)
Dan Williams

Mailing Address 209 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1107

Purpose of Disbursement
PAC OFFICE RENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 70618.E879

Date of Disbursement

/ /

Amount of Each Disbursement this Period

PAC OFFICE RENT

SUBTOTAL of Disbursements This Page (optional) ►

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

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

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

FOR LINE NUMBER:
(check only one)

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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)
Rely on Your Beliefs Fund

Full Name (Last, First, Middle Initial) A. Turner for Congress		Transaction ID: 70517.E876 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 7
Mailing Address 131 N Ludlow St Suite 317		Amount of Each Disbursement this Period 1160.89
City Dayton State OH Zip Code 45402-1164	[MEMO ITEM] MEMO: EVENT TRAVEL EXPENSE	
Purpose of Disbursement EVENT TRAVEL EXPENSE		Category/ Type
Candidate Name MIKE TURNER		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 03	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. JoAnn Davis for Congress		Transaction ID: 70508.E862 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 7
Mailing Address PO Box 1834		Amount of Each Disbursement this Period 2500.00
City Yorktown State VA Zip Code 23692-1834	PAC CONTRIBUTION	
Purpose of Disbursement PAC CONTRIBUTION		Category/ Type
Candidate Name JO ANN S. DAVIS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 01	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. The Ritz Carlton Naples		Transaction ID: 70517.E868 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 7
Mailing Address 280 Vanderbilt Beach Rd		Amount of Each Disbursement this Period 1900.00
City Naples State FL Zip Code 34108-2371	IN KIND: EVENT ACCOMODATI- ONS	
Purpose of Disbursement EVENT ACCOMODATIONS		Category/ Type
Candidate Name VERNON BUCHANAN		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 13	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4400.00
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 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)
Rely on Your Beliefs Fund

Full Name (Last, First, Middle Initial) A. Republican Party of FL Recount Fund		Transaction ID: 70517.E875																					
Mailing Address PO Box 311		Date of Disbursement																					
City Tallahassee State FL Zip Code 32302-0311		<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>5</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	6		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		1	6		2	0	0	7														
Purpose of Disbursement		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="2">5000.00</td> </tr> </table>		5000.00																			
5000.00																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Category/Type																					
State: District:		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					

SUBTOTAL of Disbursements This Page (optional)	▶	5000.00
TOTAL This Period (last page this line number only)	▶	9400.00