# SCHEDULE E (FEC Form 3X)
# ITEMIZED INDEPENDENT EXPENDITURES


FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
FIRE FIGHTERS INTERESTED IN REGISTRATION AND EDUCATION POLITICAL ACTION COMMITTEE

FEC IDENTIFICATION NUMBER ▼ C00029447

Full Name (Last, First, Middle, Initial) of Payee: Landmark Strategies
Mailing Address: 6225 Brandon Avenue, Suite 305
City: Springfield | State: VA | Zip Code: 22150
Date: 11/05/2002 | Amount: 1887.62
Transaction ID: SE24.11663
Purpose of Expenditure: Phone Bank
Category/Type
Name of Federal Candidate supported or opposed by expenditure: Jean Carnahan for Missouri Commitee
Office Sought: House / X Senate / Presidential
State: MO District: ____
Check One: X Support / Oppose

Full Name (Last, First, Middle, Initial) of Payee: Landmark Strategies
Mailing Address: 6225 Brandon Avenue, Suite 305
City: Springfield | State: VA | Zip Code: 22150
Date: 11/05/2002 | Amount: 702.21
Transaction ID: SE24.11664
Purpose of Expenditure: Phone Bank
Category/Type
Name of Federal Candidate supported or opposed by expenditure: Mark Pryor for U.S. Senate
Office Sought: House / X Senate / Presidential
State: AR District: ____
Check One: X Support / Oppose

Full Name (Last, First, Middle, Initial) of Payee: Landmark Strategies
Mailing Address: 6225 Brandon Avenue, Suite 305
City: Springfield | State: VA | Zip Code: 22150
Date: 11/05/2002 | Amount: 1161.22
Transaction ID: SE24.11665
Purpose of Expenditure: Phone Bank
Category/Type
Name of Federal Candidate supported or opposed by expenditure: Erskine Bowles
Office Sought: House / X Senate / Presidential
State: NC District: ____
Check One: X Support / Oppose

(a) **SUBTOTAL** of Itemized Independent Expenditures ..... ▶ **3751.05**
(b) **SUBTOTAL** of Unitemized Independent Expenditures ..... ▶ **237.33**

(c) **TOTAL** Independent Expenditures ..... ▶

Under penalty of perjury, I certify that no coordination of independent expenditures reported herein has been made in connection with, or in response to, or suggestion of any candidate or any authorized committee or agent of such candidate or authorized committee.

Signature _____ Date M M D D Y Y Y Y