



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Free Agents PAC**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>		46130.33
(b) Cash on Hand at Beginning of Reporting Period.....	46130.33	
(c) Total Receipts (from Line 19) .....	609.50	609.50
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	46739.83	46739.83
7. Total Disbursements (from Line 31).....	8476.23	8476.23
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	38263.60	38263.60
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Free Agents PAC**

Report Covering the Period: From:  /  /  To:  /  /

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).....	0.00	0.00
(ii) Unitemized .....	0.00	0.00
(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) .....	0.00	0.00
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.).....	609.50	609.50
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 Transfers (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))..... ▶	609.50	609.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	609.50	609.50

**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) Allocated 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 .....	36.00	36.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	36.00	36.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (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 .....	8440.23	8440.23
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated 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)) ..	8476.23	8476.23
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8476.23	8476.23

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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) .....	0.00	0.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	36.00	36.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	36.00	36.00

**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 OF 14
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" 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)  
**Free Agents PAC**

Full Name (Last, First, Middle Initial) <b>A. Christine M. Taylor</b>		Date of Receipt MM / DD / YYYY 03 / 01 / 2013 <b>Transaction ID : SA17.4563</b>
Mailing Address 705 Esme Drive		Amount of Each Receipt this Period 135.00
City Girard	State OH	Zip Code 44420
FEC ID number of contributing federal political committee. C		
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.80	

Full Name (Last, First, Middle Initial) <b>B. Christine M. Taylor</b>		Date of Receipt MM / DD / YYYY 04 / 05 / 2013 <b>Transaction ID : SA17.4564</b>
Mailing Address 705 Esme Drive		Amount of Each Receipt this Period 133.00
City Girard	State OH	Zip Code 44420
FEC ID number of contributing federal political committee. C		
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 363.80	

Full Name (Last, First, Middle Initial) <b>C. Christine M. Taylor</b>		Date of Receipt MM / DD / YYYY 05 / 29 / 2013 <b>Transaction ID : SA17.4565</b>
Mailing Address 705 Esme Drive		Amount of Each Receipt this Period 19.80
City Girard	State OH	Zip Code 44420
FEC ID number of contributing federal political committee. C		
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 383.60	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	287.80
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 7 OF 14  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Free Agents PAC**

Full Name (Last, First, Middle Initial)  
**A. Christine M. Taylor**

Mailing Address 705 Esme Drive

City State Zip Code  
Girard OH 44420

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
403.40

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 29 / 2013  
**Transaction ID : SA17.4566**

Amount of Each Receipt this Period  
19.80

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 19.80

**TOTAL** This Period (last page this line number only)..... ▶ 307.60

**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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Free Agents PAC**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address P.O.Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement  
Credit Card Payment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
03 / 08 / 2013

Transaction ID : **SB29.4645**

Amount of Each Disbursement this Period

271.61

Full Name (Last, First, Middle Initial)

**B. American Express**

Mailing Address P.O.Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement  
Credit Adjustment for Billing Inquiries

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
01 / 25 / 2013

Transaction ID : **SB29.4645.0**

Amount of Each Disbursement this Period

-61.34

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. American Express**

Mailing Address P.O.Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement  
Credit Card Payment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
04 / 05 / 2013

Transaction ID : **SB29.4650**

Amount of Each Disbursement this Period

1000.36

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

1271.97

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Free Agents PAC**

Full Name (Last, First, Middle Initial)

**A. Southwest Airlines**

Mailing Address Dallas Love Field

City Dallas State TX Zip Code 75235

Purpose of Disbursement  
Travel Expenses

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	27	/	2013

Transaction ID : SB29.4650.1

Amount of Each Disbursement this Period

460.30
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Southwest Airlines**

Mailing Address Dallas Love Field

City Dallas State TX Zip Code 75235

Purpose of Disbursement  
Travel Expenses

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	27	/	2013

Transaction ID : SB29.4650.2

Amount of Each Disbursement this Period

460.30
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. American Express**

Mailing Address P.O.Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement  
Credit Card Payment

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	02	/	2013

Transaction ID : SB29.4659

Amount of Each Disbursement this Period

38.41
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

38.41
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**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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Free Agents PAC**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address P.O.Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement  
Credit Card Payment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 29 / 2013

Transaction ID : **SB29.4665**

Amount of Each Disbursement this Period

759.95

Full Name (Last, First, Middle Initial)

**B. Apple Store 192**

Mailing Address 267 Crocker Park Blvd.

City Westlake State OH Zip Code 44145

Purpose of Disbursement  
Computer

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 15 / 2013

Transaction ID : **SB29.4665.1**

Amount of Each Disbursement this Period

750.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. David Mullen**

Mailing Address 4748 Jones Valley Road

City Williamsort State TN Zip Code 38487

Purpose of Disbursement  
Consulting for Event

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 05 / 2013

Transaction ID : **SB29.4635**

Amount of Each Disbursement this Period

2000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

2759.95

**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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Free Agents PAC**

Full Name (Last, First, Middle Initial)

**A. Verizon Wireless**

Mailing Address P.O. Box 25505

City State Zip Code  
Lehigh Valley PA 18002

Purpose of Disbursement  
Telephone Service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
01 / 31 / 2013

**Transaction ID : SB29.4621**

Amount of Each Disbursement this Period

103.98

Full Name (Last, First, Middle Initial)

**B. Verizon Wireless**

Mailing Address P.O. Box 25505

City State Zip Code  
Lehigh Valley PA 18002

Purpose of Disbursement  
Telephone Service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
03 / 05 / 2013

**Transaction ID : SB29.4623**

Amount of Each Disbursement this Period

103.98

Full Name (Last, First, Middle Initial)

**C. Verizon Wireless**

Mailing Address P.O. Box 25505

City State Zip Code  
Lehigh Valley PA 18002

Purpose of Disbursement  
Telephone Service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
04 / 02 / 2013

**Transaction ID : SB29.4624**

Amount of Each Disbursement this Period

103.98

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

311.94

**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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Free Agents PAC**

Full Name (Last, First, Middle Initial)

**A. Verizon Wireless**

Mailing Address P.O. Box 25505

City State Zip Code  
Lehigh Valley PA 18002

Purpose of Disbursement  
Telephone Service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB29.4625**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Verizon Wireless**

Mailing Address P.O. Box 25505

City State Zip Code  
Lehigh Valley PA 18002

Purpose of Disbursement  
Telephone Service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB29.4626**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Webster Chamberlain & Bean**

Mailing Address 1747 Pennsylvania Avenue NW  
Suite 1000

City State Zip Code  
Washington DC 20006

Purpose of Disbursement  
Legal Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB29.4634**

Amount of Each Disbursement this Period

**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)

<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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Free Agents PAC**

Full Name (Last, First, Middle Initial)

**A. Marilyn L. Wehling**

Mailing Address 4337 West Anderson Road

City South Euclid State OH Zip Code 44121-3574

Purpose of Disbursement  
Reimbursement for Internet Service

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
04 / 01 / 2013

**Transaction ID : SB29.4633**

Amount of Each Disbursement this Period

76.00

Full Name (Last, First, Middle Initial)

**B. Matthew M. Welch**

Mailing Address 13140 Maple Brook Trail

City Strongsville State OH Zip Code 44136

Purpose of Disbursement  
Web Development

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
03 / 01 / 2013

**Transaction ID : SB29.4628**

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

**C. Matthew M. Welch**

Mailing Address 13140 Maple Brook Trail

City Strongsville State OH Zip Code 44136

Purpose of Disbursement  
Web Development

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
04 / 01 / 2013

**Transaction ID : SB29.4629**

Amount of Each Disbursement this Period

300.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

676.00

**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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**Free Agents PAC**

Full Name (Last, First, Middle Initial)

**A. Matthew M. Welch**

Mailing Address 13140 Maple Brook Trail

City State Zip Code  
Strongsville OH 44136

Purpose of Disbursement  
Web Development

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
05 / 01 / 2013

**Transaction ID : SB29.4630**

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

**B. Matthew M. Welch**

Mailing Address 13140 Maple Brook Trail

City State Zip Code  
Strongsville OH 44136

Purpose of Disbursement  
Web Development

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
06 / 01 / 2013

**Transaction ID : SB29.4631**

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

600.00

7866.00