

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
FREEDOM PROJECT; THE

ADDRESS (number and street) 509 7th Street NW
Floor 3
 Check if different than previously reported. (ACC)
Washington DC 20004 1600

2. **FEC IDENTIFICATION NUMBER** C00305805
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 03 01 2007 through 03 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 Margee Clancy

Signature of Treasurer Electronically Filed by Margee Clancy Date 04 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**

Write or Type Committee Name
FREEDOM PROJECT; THE

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	3

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		255568.08
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	262978.22									
(c) Total Receipts (from Line 19)	159477.01	225691.52								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	422455.23	481259.60								
7. Total Disbursements (from Line 31)	159869.29	218673.66								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	262585.94	262585.94								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)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
FREEDOM PROJECT; THE

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	3

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	28000.00	32500.00
(i) Itemized (use Schedule A)	0.00	500.00
(ii) Unitemized	28000.00	33000.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	128000.00	188000.00
(c) Other Political Committees (such as PACs)	156000.00	221000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
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)	3477.01	4691.52
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	159477.01	225691.52
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	159477.01	225691.52

DETAILED SUMMARY PAGE

of Disbursements

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.....	73153.38	121957.75
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	73153.38	121957.75
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	86715.91	96715.91
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	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	159869.29	218673.66
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	159869.29	218673.66

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)	156000.00	221000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	156000.00	221000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	73153.38	121957.75
37. Offsets to Operating Expenditures (from Line 15, page 3)	3477.01	4691.52
38. Net Operating Expenditures (subtract Line 37 from Line 36)	69676.37	117266.23

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 / 56
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial)
Bruce Gates

Mailing Address 4135 Seminary Road

City State Zip Code
Alexandria VA 22304-1647

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

Name of Employer Occupation
Washington Council E&Y Partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 12 / 2007

Transaction ID: SA11A1-155-7960-c

Amount of Each Receipt this Period
5000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Samuel Baptista

Mailing Address 2015 Lorraine Avenue

City State Zip Code
Mc Lean VA 22101-5331

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

Name of Employer Occupation
The Baptista Group President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 12 / 2007

Transaction ID: SA11A1-697-7962-c

Amount of Each Receipt this Period
2000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Henry Gandy

Mailing Address 6212 Park Road

City State Zip Code
Mc Lean VA 22101-4812

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

Name of Employer Occupation
The Duberstein Group Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 12 / 2007

Transaction ID: SA11A1-755-7967-c

Amount of Each Receipt this Period
5000.00

Contribution

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:	PAGE 7 / 56
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial)
Mr. David Hobbs

Mailing Address 101 Constitution Avenue NW

City State Zip Code
Washington DC 20001-2133

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

Name of Employer Occupation
The Hobbs Group President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 12 / 2007

Transaction ID: SA11A1-1269-7961-c

Amount of Each Receipt this Period
2500.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. Justin Sayfie

Mailing Address 2040 NE 210th Street

City State Zip Code
Miami FL 33179-1630

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

Name of Employer Occupation
Blosser & Sayfie Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 23 / 2007

Transaction ID: SA11A1-3688-7947-c

Amount of Each Receipt this Period
500.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. John Fish

Mailing Address 306 A Street SE

City State Zip Code
Washington DC 20003-3832

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

Name of Employer Occupation
RJR Executive Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 30 / 2007

Transaction ID: SA11A1-3707-7983-c

Amount of Each Receipt this Period
5000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	8000.00
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 / 56
	<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)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial)
Mr. Paul Jackson

Mailing Address 444 N Capitol Street NW
Suite 740

City Washington State DC Zip Code 20001-1512

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

Name of Employer News Corporation Occupation Director, Government Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

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

Transaction ID: SA11A1-4393-7942-c

Amount of Each Receipt this Period
1500.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. Richard DeVita

Mailing Address 6235 Morrison Boulevard

City Charlotte State NC Zip Code 28211-3508

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

Name of Employer The Todd Organization Occupation Insurance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	2		2	0	0	7

Transaction ID: SA11A1-4399-7952-c

Amount of Each Receipt this Period
500.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Robert Mecredy

Mailing Address 1331 1st Street N
Apt. 601

City Jacksonville Beach State FL Zip Code 32250-8303

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

Name of Employer Armor Holdings, Inc. Occupation Pres. Aerospace/Defense Grp.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	2		2	0	0	7

Transaction ID: SA11A1-4403-7958-c

Amount of Each Receipt this Period
2000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	4000.00
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 9 / 56
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial)
Robert Schiller

Mailing Address 3940 Alhambra Drive W

City State Zip Code
Jacksonville FL 32207-6013

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

Name of Employer Occupation
Armor Holdings, Inc. President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2007

Transaction ID: SA11A1-4404-7959-c

Amount of Each Receipt this Period
2000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. Gary Schleuger

Mailing Address 2121 Jamieson Avenue
Unit 1609

City State Zip Code
Alexandria VA 22314-5715

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

Name of Employer Occupation
Govt. Relations Consult&Fund Government Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2007

Transaction ID: SA11A1-4432-7994-c

Amount of Each Receipt this Period
2000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	4000.00
TOTAL This Period (last page this line number only)	28000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 56
	(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)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial) USTeam PAC		Date of Receipt M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 7
Mailing Address 100 W Putnam Avenue		Transaction ID: SA11C-296-7987-c
City State Zip Code Greenwich CT 06830-5342	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00104851		Contribution
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	

B. Full Name (Last, First, Middle Initial) Anheuser - Busch PAC		Date of Receipt M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 7
Mailing Address 1776 I Street NW Suite 200		Transaction ID: SA11C-303-7990-c
City State Zip Code Washington DC 20006-3700	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00034488		Contribution
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	

C. Full Name (Last, First, Middle Initial) Natl. Assn. Convenience Stores PAC		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 0 / 2 0 0 7
Mailing Address 1600 Duke Street		Transaction ID: SA11C-412-7997-c
City State Zip Code Alexandria VA 22314-3466	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00126763		Contribution
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) ▶	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 11 / 56
	<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)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. SECURITIES INDUSTRY ASSOCIATION POLITICAL ACTION COMMITTEE		Date of Receipt
Mailing Address 1425 K Street NW Floor 7		<input type="text" value="03"/> / <input type="text" value="23"/> / <input type="text" value="2007"/>
City	State	Zip Code
Washington	DC	20005-3684
FEC ID number of contributing federal political committee.		Transaction ID: SA11C-3631-7945-c
C C00067504		Amount of Each Receipt this Period
		5000.00
Name of Employer	Occupation	Contribution
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	5000.00	

Full Name (Last, First, Middle Initial) B. DIAGEO NORTH AMERICA INC. EMPLOYEES' POLITICAL PARTICIPATION COMMITTEE		Date of Receipt
Mailing Address 1301 K Street NW Suite 1000		<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2007"/>
City	State	Zip Code
Washington	DC	20005-3317
FEC ID number of contributing federal political committee.		Transaction ID: SA11C-3698-7955-c
C C00034470		Amount of Each Receipt this Period
		2500.00
Name of Employer	Occupation	Contribution
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	2500.00	

Full Name (Last, First, Middle Initial) C. NEW YORK MERCANTILE EXCHANGE POLITICAL ACTION COMMITTEE		Date of Receipt
Mailing Address 1 N End Avenue Floor 14		<input type="text" value="03"/> / <input type="text" value="23"/> / <input type="text" value="2007"/>
City	State	Zip Code
New York	NY	10282-1163
FEC ID number of contributing federal political committee.		Transaction ID: SA11C-3712-7949-c
C C00230185		Amount of Each Receipt this Period
		5000.00
Name of Employer	Occupation	Contribution
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	5000.00	

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 / 56
	<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)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Edison International Pac		Date of Receipt M M / D D / Y Y Y Y 03 / 12 / 2007
Mailing Address 520 S Grand Avenue Suite 700		Transaction ID: SA11C-4405-7963-c Amount of Each Receipt this Period 5000.00
City State Zip Code Los Angeles CA 90071-2665	Name of Employer Occupation _____	
FEC ID number of contributing federal political committee. C C00019653	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Contribution 5000.00
Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) B. ABBOTT LABORATORIES EMPLOYEE POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 03 / 23 / 2007
Mailing Address 100 Abbott Park Road		Transaction ID: SA11C-4265-7943-c Amount of Each Receipt this Period 5000.00
City State Zip Code Abbott Park IL 60064-3502	Name of Employer Occupation _____	
FEC ID number of contributing federal political committee. C C00040279	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Contribution 5000.00
Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) C. Chicago Mercantile Exchange PAC		Date of Receipt M M / D D / Y Y Y Y 03 / 23 / 2007
Mailing Address 20 S Wacker Drive		Transaction ID: SA11C-4275-7944-c Amount of Each Receipt this Period 5000.00
City State Zip Code Chicago IL 60606-7408	Name of Employer Occupation _____	
FEC ID number of contributing federal political committee. C C00076299	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Contribution 5000.00
Aggregate Year-to-Date ▼ 5000.00		

SUBTOTAL of Receipts This Page (optional) ▶	15000.00
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 13 / 56
	<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)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial) Emergent Biosolutions Employees PAC		Date of Receipt M M / D D / Y Y Y Y 03 / 12 / 2007	
Mailing Address 2273 Research Boulevard		Transaction ID: SA11C-4398-7951-c	
City State Zip Code Rockville MD 20850-3264	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C C00380303	Contribution		
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) ▼			

B. Full Name (Last, First, Middle Initial) Friends Of Ray Lahood		Date of Receipt M M / D D / Y Y Y Y 03 / 12 / 2007	
Mailing Address 4238 N Knoxville Avenue		Transaction ID: SA11C-4402-7956-c	
City State Zip Code Peoria IL 61614-7435	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C C00284901	Contribution		
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) ▼			

C. Full Name (Last, First, Middle Initial) Investment Company Institute Political Action Committee (ICI Pac)		Date of Receipt M M / D D / Y Y Y Y 03 / 12 / 2007	
Mailing Address 1401 H Street NW Suite 1200		Transaction ID: SA11C-4406-7965-c	
City State Zip Code Washington DC 20005-2110	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C C00105981	Contribution		
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) ▶	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 14 / 56
	<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)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. International Game Technology (IGT PAC)		Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2007
Mailing Address 9295 Prototype Drive		Transaction ID: SA11C-4422-7991-c
City State Zip Code Reno NV 89521-8986	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00316331	Contribution	
Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. AMERICA'S HEALTH INSURANCE PLANS PAC (AHIP PAC)		Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2007
Mailing Address 601 Pennsylvania Avenue NW		Transaction ID: SA11C-4040-7989-c
City State Zip Code Washington DC 20004-2601	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00106740	Contribution	
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. SWISHER INTERNATIONAL INC PAC FUND		Date of Receipt M M / D D / Y Y Y Y 03 / 12 / 2007
Mailing Address 459 E 16th Street		Transaction ID: SA11C-4123-7966-c
City State Zip Code Jacksonville FL 32206-3025	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00312785	Contribution	
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 / 56
	(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)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. PERFORMANT FINANCIAL CORPORATION POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2007
Mailing Address 333 N Canyon Parkway Suite 100		Transaction ID: SA11C-4125-7916-c
City Livermore	State CA	Zip Code 94551-9480
FEC ID number of contributing federal political committee. C C00411199		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	Contribution
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) B. FEDERAL NATIONAL MORTGAGE ASSOCIATION POLITICAL ACTION COMMITTEE AKA FANNIE MAE		Date of Receipt M M / D D / Y Y Y Y 03 / 12 / 2007
Mailing Address 3900 Wisconsin Avenue NW		Transaction ID: SA11C-4128-7957-c
City Washington	State DC	Zip Code 20016-2806
FEC ID number of contributing federal political committee. C C00393520		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	Contribution
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) C. MORTGAGE BANKERS ASSOCIATION POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2007
Mailing Address 1919 Pennsylvania Avenue NW Floor 8		Transaction ID: SA11C-4236-7915-c
City Washington	State DC	Zip Code 20006-3404
FEC ID number of contributing federal political committee. C C00004812		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	Contribution
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)	▶	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 16 / 56
	<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)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial)
ERNST & YOUNG POLITICAL ACTION COMMITTEE

Mailing Address 1225 Connecticut Avenue NW
Suite 800

City State Zip Code
Washington DC 20036-2604

FEC ID number of contributing federal political committee. **C** C00227744

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
03 / 30 / 2007

Transaction ID: SA11C-4240-7984-c

Amount of Each Receipt this Period
5000.00

Contribution

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

Mailing Address 430 1st Street SE

City State Zip Code
Washington DC 20003-1826

FEC ID number of contributing federal political committee. **C** C00002881

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
03 / 20 / 2007

Transaction ID: SA11C-1998-7998-c

Amount of Each Receipt this Period
5000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Southern Company Employees PAC

Mailing Address 1130 Connecticut Avenue NW
Suite 830

City State Zip Code
Washington DC 20036-3911

FEC ID number of contributing federal political committee. **C** C00144774

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
03 / 20 / 2007

Transaction ID: SA11C-2026-7995-c

Amount of Each Receipt this Period
5000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	15000.00
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 / 56
	<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)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial)
News America-Fox PAC

Mailing Address 444 N Capitol Street NW
Suite 722

City State Zip Code
Washington DC 20001-1534

FEC ID number of contributing federal political committee. **C** C00330019

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
 03 / 12 / 2007

Transaction ID: SA11C-2393-7964-c

Amount of Each Receipt this Period
2500.00

Contribution

B. Full Name (Last, First, Middle Initial)
COMCAST CORP. POLITICAL ACTION COMMITTEE

Mailing Address 1500 Market Street
Floor 35

City State Zip Code
Philadelphia PA 19102-2100

FEC ID number of contributing federal political committee. **C** C00248716

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
 03 / 30 / 2007

Transaction ID: SA11C-3971-7985-c

Amount of Each Receipt this Period
5000.00

Contribution

C. Full Name (Last, First, Middle Initial)
AUCTION MARKETS POLITICAL ACTION COMMITTEE OF THE CHICAGO BOARD OF TRADE A/K/A AUCTION

Mailing Address Chicago Board of Trade
141 W. Jackson Blvd.

City State Zip Code
Chicago IL 60604

FEC ID number of contributing federal political committee. **C** C00059832

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
 03 / 23 / 2007

Transaction ID: SA11C-4001-7948-c

Amount of Each Receipt this Period
5000.00

Contribution

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 18 / 56
	<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)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. WHOLESALER-DISTRIBUTOR PAC OF THE NATIONAL ASSOCIATION OF WHOLESALE-DISTRIBUTORS		Date of Receipt
Mailing Address 1725 K Street NW Suite 300		<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2007"/>
City Washington	State DC	Zip Code 20006-1419
FEC ID number of contributing federal political committee. C C00109306		Transaction ID: SA11C-4016-7986-c
Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="2500.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>		Contribution

Full Name (Last, First, Middle Initial) B. US-CUBA DEMOCRACY POLITICAL ACTION COMMITTEE		Date of Receipt
Mailing Address 1200 W 49th Street		<input type="text" value="03"/> / <input type="text" value="23"/> / <input type="text" value="2007"/>
City Hialeah	State FL	Zip Code 33012-3217
FEC ID number of contributing federal political committee. C C00387720		Transaction ID: SA11C-3716-7946-c
Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="2000.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="2000.00"/>		Contribution

Full Name (Last, First, Middle Initial) C. AMERICAN MARITIME OFFICERS VOLUNTARY POLITICAL ACTION FUND		Date of Receipt
Mailing Address 2 W Dixie Highway		<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2007"/>
City Dania Beach	State FL	Zip Code 33004-4312
FEC ID number of contributing federal political committee. C C00027532		Transaction ID: SA11C-3717-7999-c
Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>		Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="9500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 19 / 56
	<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)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. PRUDENTIAL FINANCIAL INC. POLITICAL ACTION COMMITTEE (AKA - PRUDENTIAL PAC)		Date of Receipt M M / D D / Y Y Y Y 03 / 12 / 2007
Mailing Address 751 Broad Street Floor 3		Transaction ID: SA11C-3738-7953-c
City State Zip Code Newark NJ 07102-3714	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00127779	Contribution	
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) B. ZENECA INC. POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2007
Mailing Address PO Box 15437		Transaction ID: SA11C-3744-7988-c
City State Zip Code Wilmington DE 19850-5437	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00279455	Contribution	
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. FEDERAL EXPRESS POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2007
Mailing Address 942 S Shady Grove Road		Transaction ID: SA11C-3842-7996-c
City State Zip Code Memphis TN 38120-4117	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00068692	Contribution	
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) ▶	15000.00
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 20 / 56
	(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)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial)
Blue Cross/Blue Shield PAC

Mailing Address 1310 G Street NW

City State Zip Code
Washington DC 20005-3000

FEC ID number of contributing federal political committee. **C** C00194746

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
0	3	/	1	2	/	2	0	0	7

Transaction ID: SA11C-108-7954-c

Amount of Each Receipt this Period
2500.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	2500.00
TOTAL This Period (last page this line number only)	▶	128000.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 21 / 56
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input checked="" type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial)
Mastercard

Mailing Address PO Box 70

City State Zip Code
Middletown OH 45042

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3477.01

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	0	7

Transaction ID: SA15-3605-8005-e

Amount of Each Receipt this Period
276.80

Refund, Life is Good, Gen-
.Fund.-gift exp

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

Mailing Address PO Box 70

City State Zip Code
Middletown OH 45042

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3477.01

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	1		2	0	0	7

Transaction ID: SA15-3605-8006-e

Amount of Each Receipt this Period
3200.21

Pre-payment listed on 3/2-
0/07 filing, se

SUBTOTAL of Receipts This Page (optional)	▶	3477.01
TOTAL This Period (last page this line number only)	▶	3477.01

**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)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Delta Airlines		Transaction ID: SB21B-396-7876-V Date of Disbursement MM / DD / YYYY 03 / 19 / 2007
Mailing Address Rightway Travel NASA Building		Amount of Each Disbursement this Period 944.70
City Stennis Space Cent	State MS	
Zip Code 39529		[MEMO ITEM] Subitemization of Master-card
Purpose of Disbursement Gen.Fund.-travel, airfare		
Candidate Name		002 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:		

Full Name (Last, First, Middle Initial) B. Delta Airlines		Transaction ID: SB21B-396-7930-V Date of Disbursement MM / DD / YYYY 03 / 19 / 2007
Mailing Address Rightway Travel NASA Building		Amount of Each Disbursement this Period 463.30
City Stennis Space Cent	State MS	
Zip Code 39529		[MEMO ITEM] Subitemization of Master-card
Purpose of Disbursement Gen.fund.-travel, airfare		
Candidate Name		002 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:		

Full Name (Last, First, Middle Initial) C. Delta Airlines		Transaction ID: SB21B-396-7861-V Date of Disbursement MM / DD / YYYY 03 / 01 / 2007
Mailing Address Rightway Travel NASA Building		Amount of Each Disbursement this Period 1191.20
City Stennis Space Cent	State MS	
Zip Code 39529		[MEMO ITEM] Subitemization of Master-card
Purpose of Disbursement Gen.fund.-Air travel		
Candidate Name		002 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:		

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)

PAGE 23 / 56

<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)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Transaction ID: SB21B-3722-7928-V Date of Disbursement MM / DD / YYYY 03 / 19 / 2007
Mailing Address PO Box 17464		Amount of Each Disbursement this Period 91.63
City Baltimore State MD Zip Code 21297-1464	Purpose of Disbursement Telephone 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) ▼	[MEMO ITEM] Subitemization of Master-card

Full Name (Last, First, Middle Initial) B. Verizon		Transaction ID: SB21B-3424-7879-V Date of Disbursement MM / DD / YYYY 03 / 19 / 2007
Mailing Address PO Box 17577		Amount of Each Disbursement this Period 106.52
City Baltimore State MD Zip Code 21297-0513	Purpose of Disbursement Telephone 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) ▼	[MEMO ITEM] Subitemization of Master-card

Full Name (Last, First, Middle Initial) C. Boca Raton Resort		Transaction ID: SB21B-609-7883-V Date of Disbursement MM / DD / YYYY 03 / 19 / 2007
Mailing Address 501 E Camino Real		Amount of Each Disbursement this Period 529.00
City Boca Raton State FL Zip Code 33432-6127	Purpose of Disbursement Gen.Fund.-travel lodging 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) ▼	[MEMO ITEM] Subitemization of Master-card

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)

<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)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Big Horn Golf Club		Transaction ID: SB21B-2678-7969-e Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 7
Mailing Address 255 Palowet Drive		Amount of Each Disbursement this Period 5359.00
City Palm Desert State CA Zip Code 92260-7326	Purpose of Disbursement Gen.Fund.-Gift 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) ▼	Category/Type 003

Full Name (Last, First, Middle Initial) B. Mastercard		Transaction ID: SB21B-3605-7934-e Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 7
Mailing Address PO Box 70		Amount of Each Disbursement this Period 22334.85
City Middletown State OH Zip Code 45042	Purpose of Disbursement Credit Card (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) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) C. Venturehouse Group		Transaction ID: SB21B-3787-7937-e Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 7
Mailing Address 509 7th Street NW		Amount of Each Disbursement this Period 1250.00
City Washington State DC Zip Code 20004-1600	Purpose of Disbursement Office Rent 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) ▼	Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ▶	28943.85
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)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Interpark		Transaction ID: SB21B-3800-7921-e Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 7 / 2 0 0 7
Mailing Address 5883 Collection Center Drive		Amount of Each Disbursement this Period 235.00
City Chicago State IL Zip Code 60693-0058	Purpose of Disbursement Parking 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) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) B. Kevin Mr. McGrann		Transaction ID: SB21B-4052-7925-e Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 0 7
Mailing Address 150 N Carolina Avenue SE		Amount of Each Disbursement this Period 526.98
City Washington State DC Zip Code 20003-1841	Purpose of Disbursement Salary 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) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) C. Jessica Towhey		Transaction ID: SB21B-4392-7929-e Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 7
Mailing Address 618 N Carolina Avenue SE Apt. 3		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20003-4392	Purpose of Disbursement Copywriting 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) ▼	Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ▶	1761.98
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)

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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)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Big Horn Golf Club		Transaction ID: SB21B-2678-7968-e Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 7
Mailing Address 255 Palowet Drive		Amount of Each Disbursement this Period 7200.00
City Palm Desert State CA Zip Code 92260-7326	003 Category/Type	
Purpose of Disbursement Gen. Fund.-Greens Fees 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. Big Horn Golf Club		Transaction ID: SB21B-2678-7941-e Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 7
Mailing Address 255 Palowet Drive		Amount of Each Disbursement this Period 6346.84
City Palm Desert State CA Zip Code 92260-7326	003 Category/Type	
Purpose of Disbursement Gen.Fund.-Food & Beverage 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. Commonwealth of Virginia		Transaction ID: SB21B-4075-7931-e Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 7
Mailing Address PO Box 27264		Amount of Each Disbursement this Period 67.66
City Richmond State VA Zip Code 23261-7264	001 Category/Type	
Purpose of Disbursement Payroll taxes 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) ▶	13614.50
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)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Office of Tax and Revenue		Transaction ID: SB21B-4077-7933-e Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 7
Mailing Address PO Box 96385		Amount of Each Disbursement this Period 418.00
City Washington State DC Zip Code 20090-6385	Purpose of Disbursement Payroll taxes 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) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) B. Mastercard		Transaction ID: SB21B-3605-7992-e Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 7
Mailing Address PO Box 70		Amount of Each Disbursement this Period 3200.21
City Middletown State OH Zip Code 45042	Purpose of Disbursement 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) ▼	Category/Type 001 Credit Card Deposit disclosed on 2/7/07 (allocation provided below)

Full Name (Last, First, Middle Initial) C. Wiley Rein & Fielding, LLP		Transaction ID: SB21B-3634-7935-e Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 7
Mailing Address 1776 K Street NW		Amount of Each Disbursement this Period 2002.84
City Washington State DC Zip Code 20006-2304	Purpose of Disbursement 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) ▼	Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ▶	5621.05
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)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Wiley Rein & Fielding, LLP		Transaction ID: SB21B-3634-7920-e Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 7 / 2 0 0 7
Mailing Address 1776 K Street NW		Amount of Each Disbursement this Period 2002.10
City Washington State DC Zip Code 20006-2304	Purpose of Disbursement Legal services Candidate Name Category/Type 001	
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. Verizon Wireless		Transaction ID: SB21B-3722-7936-e Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 7
Mailing Address PO Box 17464		Amount of Each Disbursement this Period 725.00
City Baltimore State MD Zip Code 21297-1464	Purpose of Disbursement Telephone Candidate Name Category/Type 001	
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. Capitol Associates III-X		Transaction ID: SB21B-4390-7918-e Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 7 / 2 0 0 7
Mailing Address 426 C Street NE		Amount of Each Disbursement this Period 1250.00
City Washington State DC Zip Code 20002-5818	Purpose of Disbursement Office Rent Candidate Name Category/Type 001	
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) ▶	3977.10
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)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Dakota Catering Co.		Transaction ID: SB21B-4391-7922-e Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 7
Mailing Address 800 NW 24th Street		Amount of Each Disbursement this Period 464.00
City Wilton Manors State FL Zip Code 33311-3751	003 Category/ Type	
Purpose of Disbursement Gen.Fund.-Food and Beverage		
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. Interpark		Transaction ID: SB21B-3800-7940-e Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 7
Mailing Address 5883 Collection Center Drive		Amount of Each Disbursement this Period 235.00
City Chicago State IL Zip Code 60693-0058	001 Category/ Type	
Purpose of Disbursement Parking		
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. First Financial Bank		Transaction ID: SB21B-3803-7932-e Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 7
Mailing Address 7795 Tylersville Road		Amount of Each Disbursement this Period 2398.51
City West Chester State OH Zip Code 45069-2592	001 Category/ Type	
Purpose of Disbursement Payroll taxes		
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) ▶	3097.51
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)
FREEDOM PROJECT; THE

<p>A. Full Name (Last, First, Middle Initial) Clark, Schaefer, Hackett & Co.</p>		<p>Transaction ID: SB21B-1382-8010-e Date of Disbursement</p>
<p>Mailing Address 160 N Breiel Boulevard</p>		<p><input type="text" value="03"/> / <input type="text" value="15"/> / <input type="text" value="2007"/></p>
<p>City Middletown State OH Zip Code 45042-3806</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="45.00"/></p>	
<p>Purpose of Disbursement Payroll processing</p>	<p><input type="text" value="001"/> Category/Type</p>	
<p>Candidate Name</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>B. Full Name (Last, First, Middle Initial) Clark, Schaefer, Hackett & Co.</p>		<p>Transaction ID: SB21B-1382-7930-e Date of Disbursement</p>
<p>Mailing Address 160 N Breiel Boulevard</p>		<p><input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2007"/></p>
<p>City Middletown State OH Zip Code 45042-3806</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="45.00"/></p>	
<p>Purpose of Disbursement Payroll processing</p>	<p><input type="text" value="001"/> Category/Type</p>	
<p>Candidate Name</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>C. Full Name (Last, First, Middle Initial) Amy Hobart</p>		<p>Transaction ID: SB21B-3801-7924-e Date of Disbursement</p>
<p>Mailing Address 402 Ashford Lane</p>		<p><input type="text" value="03"/> / <input type="text" value="15"/> / <input type="text" value="2007"/></p>
<p>City Alexandria State VA Zip Code 22304-7158</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="785.71"/></p>	
<p>Purpose of Disbursement Salary</p>	<p><input type="text" value="001"/> Category/Type</p>	
<p>Candidate Name</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>		

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="875.71"/></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)

<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)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Amy Hobart		Transaction ID: SB21B-3801-7927-e Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 7	
Mailing Address 402 Ashford Lane		Amount of Each Disbursement this Period 785.70	
City Alexandria State VA Zip Code 22304-7158	Purpose of Disbursement Salary Candidate Name	001 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. Whitaker Mr. Askew		Transaction ID: SB21B-3802-7923-e Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 0 7	
Mailing Address 3044 R Street NW		Amount of Each Disbursement this Period 1955.18	
City Washington State DC Zip Code 20007-2962	Purpose of Disbursement Salary Candidate Name	001 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. Whitaker Mr. Askew		Transaction ID: SB21B-3802-7926-e Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 7	
Mailing Address 3044 R Street NW		Amount of Each Disbursement this Period 1954.84	
City Washington State DC Zip Code 20007-2962	Purpose of Disbursement Salary Candidate Name	001 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) ▶	4695.72
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)
FREEDOM PROJECT; THE

<p>A. Full Name (Last, First, Middle Initial) H. Ron Mr. Wietzel</p>		<p>Transaction ID: SB21B-3809-7917-e Date of Disbursement</p>	
<p>Mailing Address 7378 Charter Cup Lane</p>		<p><input type="text" value="03"/> / <input type="text" value="27"/> / <input type="text" value="2007"/></p>	
<p>City West Chester</p>	<p>State OH</p>	<p>Zip Code 45069-1593</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Gen.Fund.-Deposit Ground Transp.</p>		<p><input type="text" value="002"/> Category/ Type</p>	<p><input type="text" value="10000.00"/></p>
<p>Candidate Name</p>		<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>State: District:</p>		

<p>B. Full Name (Last, First, Middle Initial) Kevin Mr. McGrann</p>		<p>Transaction ID: SB21B-4052-7928-e Date of Disbursement</p>	
<p>Mailing Address 150 N Carolina Avenue SE</p>		<p><input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2007"/></p>	
<p>City Washington</p>	<p>State DC</p>	<p>Zip Code 20003-1841</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Salary</p>		<p><input type="text" value="001"/> Category/ Type</p>	<p><input type="text" value="527.05"/></p>
<p>Candidate Name</p>		<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>State: District:</p>		

<p>C. Full Name (Last, First, Middle Initial) Boca Raton Resort</p>		<p>Transaction ID: SB21B-609-7884-V Date of Disbursement</p>	
<p>Mailing Address 501 E Camino Real</p>		<p><input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2007"/></p>	
<p>City Boca Raton</p>	<p>State FL</p>	<p>Zip Code 33432-6127</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Gen.Fund.- travel, lodging</p>		<p><input type="text" value="002"/> Category/ Type</p>	<p><input type="text" value="529.00"/></p>
<p>Candidate Name</p>		<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>State: District:</p>		

[MEMO ITEM]
Subitemization of Master-card

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 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)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Boca Raton Resort		Transaction ID: SB21B-609-7886-V Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 7
Mailing Address 501 E Camino Real		Amount of Each Disbursement this Period 529.00
City Boca Raton State FL Zip Code 33432-6127	[MEMO ITEM] Subitemization of Master-card	
Purpose of Disbursement Gen.fund.-travel, lodging Candidate Name		002 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. Boca Raton Resort		Transaction ID: SB21B-609-7887-V Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 7
Mailing Address 501 E Camino Real		Amount of Each Disbursement this Period 529.00
City Boca Raton State FL Zip Code 33432-6127	[MEMO ITEM] Subitemization of Master-card	
Purpose of Disbursement Gen.fund.-travel, lodging Candidate Name		002 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. Congressional Liquors		Transaction ID: SB21B-1778-7933-V Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 7
Mailing Address 404 1st Street SE		Amount of Each Disbursement this Period 392.14
City Washington State DC Zip Code 20003-1826	[MEMO ITEM] Subitemization of Master-card	
Purpose of Disbursement Gen.Fund.-food & beverage Candidate Name		003 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)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. La Quinta Resort & Club		Transaction ID: SB21B-1804-7901-V Date of Disbursement MM / DD / YYYY 03 / 19 / 2007
Mailing Address 49499 Eisenhower Drive		Amount of Each Disbursement this Period 819.64
City La Quinta State CA Zip Code 92253-2722	[MEMO ITEM] Subitemization of Master-card	
Purpose of Disbursement Gen.fund.-travel, lodging Candidate Name		002 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. La Quinta Resort & Club		Transaction ID: SB21B-1804-7903-V Date of Disbursement MM / DD / YYYY 03 / 19 / 2007
Mailing Address 49499 Eisenhower Drive		Amount of Each Disbursement this Period 34.48
City La Quinta State CA Zip Code 92253-2722	[MEMO ITEM] Subitemization of Master-card	
Purpose of Disbursement Gen.fund.-travel, food & beverage Candidate Name		002 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. La Quinta Resort & Club		Transaction ID: SB21B-1804-7902-V Date of Disbursement MM / DD / YYYY 03 / 19 / 2007
Mailing Address 49499 Eisenhower Drive		Amount of Each Disbursement this Period 992.97
City La Quinta State CA Zip Code 92253-2722	[MEMO ITEM] Subitemization of Master-card	
Purpose of Disbursement Gen.fund.-travel, lodging Candidate Name		002 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)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. La Quinta Resort & Club		Transaction ID: SB21B-1804-7863-V Date of Disbursement MM / DD / YYYY 03 / 01 / 2007
Mailing Address 49499 Eisenhower Drive		Amount of Each Disbursement this Period 309.00
City La Quinta State CA Zip Code 92253-2722	Purpose of Disbursement Gen.Fund.- Lodging Candidate Name Category/Type 002	
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) ▼	[MEMO ITEM] Subitemization of Master-card

Full Name (Last, First, Middle Initial) B. La Quinta Resort & Club		Transaction ID: SB21B-1804-7864-V Date of Disbursement MM / DD / YYYY 03 / 01 / 2007
Mailing Address 49499 Eisenhower Drive		Amount of Each Disbursement this Period 309.00
City La Quinta State CA Zip Code 92253-2722	Purpose of Disbursement Gen.Fund.-Lodging Candidate Name Category/Type 002	
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) ▼	[MEMO ITEM] Subitemization of Master-card

Full Name (Last, First, Middle Initial) C. La Quinta Resort & Club		Transaction ID: SB21B-1804-7865-V Date of Disbursement MM / DD / YYYY 03 / 01 / 2007
Mailing Address 49499 Eisenhower Drive		Amount of Each Disbursement this Period 309.00
City La Quinta State CA Zip Code 92253-2722	Purpose of Disbursement Gen.Fund.-Lodging Candidate Name Category/Type 002	
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) ▼	[MEMO ITEM] Subitemization of Master-card

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. La Quinta Resort & Club		Transaction ID: SB21B-1804-7866-V Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 7
Mailing Address 49499 Eisenhower Drive		Amount of Each Disbursement this Period 309.00
City La Quinta State CA Zip Code 92253-2722	Purpose of Disbursement Gen.Fund.-Lodging 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) ▼	[MEMO ITEM] Subitemization of Master-card

Full Name (Last, First, Middle Initial) B. United Airlines		Transaction ID: SB21B-3902-7873-V Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 7
Mailing Address 1200 East Algonquin Road		Amount of Each Disbursement this Period 208.90
City Elk Grove Township State IL Zip Code 60007	Purpose of Disbursement Gen. Fund.- travel, airfare 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) ▼	[MEMO ITEM] Subitemization of Master-card

Full Name (Last, First, Middle Initial) C. United Airlines		Transaction ID: SB21B-3902-7874-V Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 7
Mailing Address 1200 East Algonquin Road		Amount of Each Disbursement this Period 208.90
City Elk Grove Township State IL Zip Code 60007	Purpose of Disbursement Gen. Fund.-travel, airfare 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) ▼	[MEMO ITEM] Subitemization of Master-card

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)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. The Alamo Travel Group		Transaction ID: SB21B-4316-7905-V Date of Disbursement MM / DD / YYYY 03 / 19 / 2007
Mailing Address 9000 Wurzbach Road		Amount of Each Disbursement this Period 25.00
City San Antonio State TX Zip Code 78240-1038	Purpose of Disbursement Gen.fund.-travel reservation fee 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) ▼	[MEMO ITEM] Subitemization of Master-card

Full Name (Last, First, Middle Initial) B. The Alamo Travel Group		Transaction ID: SB21B-4316-7906-V Date of Disbursement MM / DD / YYYY 03 / 19 / 2007
Mailing Address 9000 Wurzbach Road		Amount of Each Disbursement this Period 25.00
City San Antonio State TX Zip Code 78240-1038	Purpose of Disbursement Gen. fund.-travel reservation fee 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) ▼	[MEMO ITEM] Subitemization of Master-card

Full Name (Last, First, Middle Initial) C. The Alamo Travel Group		Transaction ID: SB21B-4316-7935-V Date of Disbursement MM / DD / YYYY 03 / 19 / 2007
Mailing Address 9000 Wurzbach Road		Amount of Each Disbursement this Period 25.00
City San Antonio State TX Zip Code 78240-1038	Purpose of Disbursement Gen.Fund.-travel reservation fee 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) ▼	[MEMO ITEM] Subitemization of Master-card

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)

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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)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. The Alamo Travel Group		Transaction ID: SB21B-4316-7872-V Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 7
Mailing Address 9000 Wurzbach Road		Amount of Each Disbursement this Period 25.00
City San Antonio State TX Zip Code 78240-1038	Purpose of Disbursement Gen.Fund.-travel reservation fee 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) ▼
Purpose of Disbursement Gen.Fund.-travel reservation fee Candidate Name		
[MEMO ITEM] Subitemization of Master-card		

Full Name (Last, First, Middle Initial) B. The Alamo Travel Group		Transaction ID: SB21B-4316-7877-V Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 7
Mailing Address 9000 Wurzbach Road		Amount of Each Disbursement this Period 25.00
City San Antonio State TX Zip Code 78240-1038	Purpose of Disbursement Gen.Fund.-travel reservation fee 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) ▼
Purpose of Disbursement Gen.Fund.-travel reservation fee Candidate Name		
[MEMO ITEM] Subitemization of Master-card		

Full Name (Last, First, Middle Initial) C. The Alamo Travel Group		Transaction ID: SB21B-4316-7878-V Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 7
Mailing Address 9000 Wurzbach Road		Amount of Each Disbursement this Period 25.00
City San Antonio State TX Zip Code 78240-1038	Purpose of Disbursement Gen.Fund.-travel reservation fee 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) ▼
Purpose of Disbursement Gen.Fund.-travel reservation fee Candidate Name		
[MEMO ITEM] Subitemization of Master-card		

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)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. The Alamo Travel Group		Transaction ID: SB21B-4316-7891-V Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 7
Mailing Address 9000 Wurzbach Road		Amount of Each Disbursement this Period 25.00
City San Antonio State TX Zip Code 78240-1038	Purpose of Disbursement Gen.fund.-Travel, reservation fee Candidate Name Category/Type 002	
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. The Alamo Travel Group		Transaction ID: SB21B-4316-7929-V Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 7
Mailing Address 9000 Wurzbach Road		Amount of Each Disbursement this Period 25.00
City San Antonio State TX Zip Code 78240-1038	Purpose of Disbursement Gen.fund.-travel, reservation fee Candidate Name Category/Type 002	
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. The Alamo Travel Group		Transaction ID: SB21B-4316-7862-V Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 7
Mailing Address 9000 Wurzbach Road		Amount of Each Disbursement this Period 25.00
City San Antonio State TX Zip Code 78240-1038	Purpose of Disbursement Gen.Fund.-reservation fee Candidate Name Category/Type 002	
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:
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PAGE 40 / 56

<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)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Westin Kierland Resort		Transaction ID: SB21B-4426-7894-V Date of Disbursement MM / DD / YYYY 03 / 19 / 2007
Mailing Address 6902 E Greenway Parkway		Amount of Each Disbursement this Period 823.13
City Scottsdale State AZ Zip Code 85254-8123	Purpose of Disbursement Gen.Fund.-travel lodging 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) ▼	[MEMO ITEM] Subitemization of Master-card

Full Name (Last, First, Middle Initial) B. Westin Kierland Resort		Transaction ID: SB21B-4426-7892-V Date of Disbursement MM / DD / YYYY 03 / 19 / 2007
Mailing Address 6902 E Greenway Parkway		Amount of Each Disbursement this Period 30.99
City Scottsdale State AZ Zip Code 85254-8123	Purpose of Disbursement Gen.fund.-travel, food & beverage 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) ▼	[MEMO ITEM] Subitemization of Master-card

Full Name (Last, First, Middle Initial) C. Falls Prime Steakhouse		Transaction ID: SB21B-4427-7897-V Date of Disbursement MM / DD / YYYY 03 / 19 / 2007
Mailing Address 78430 Highway 111		Amount of Each Disbursement this Period 427.25
City La Quinta State CA Zip Code 92253-2065	Purpose of Disbursement Gen.Fund.-food & beverage 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) ▼	[MEMO ITEM] Subitemization of Master-card

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

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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)
FREEDOM PROJECT; THE

<p>A. Falls Prime Steakhouse</p> <p>Full Name (Last, First, Middle Initial) Falls Prime Steakhouse</p> <p>Mailing Address 78430 Highway 111</p>		<p>Transaction ID: SB21B-4427-7893-V</p> <p>Date of Disbursement</p> <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>3</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	9		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	9		2	0	7														
<p>City La Quinta State CA Zip Code 92253-2065</p> <p>Purpose of Disbursement Gen. Fund. - Food & Beverage</p> <p>Candidate Name</p>	<p>003</p> <p>Category/Type</p>	<p>Amount of Each Disbursement this Period</p> <p>230.72</p>																				
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>[MEMO ITEM] Subitemization of Master-card</p>																				

<p>B. Cannery Seafood</p> <p>Full Name (Last, First, Middle Initial) Cannery Seafood</p> <p>Mailing Address 30120 Lafayette Road</p>		<p>Transaction ID: SB21B-4431-7918-V</p> <p>Date of Disbursement</p> <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>3</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	9		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	9		2	0	7														
<p>City Newport Beach State CA Zip Code 92663</p> <p>Purpose of Disbursement Gen.Fund.-Food & Beverage</p> <p>Candidate Name</p>	<p>003</p> <p>Category/Type</p>	<p>Amount of Each Disbursement this Period</p> <p>375.10</p>																				
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>[MEMO ITEM] Subitemization of Master-card</p>																				

<p>C. Ritz Carlton San Jose</p> <p>Full Name (Last, First, Middle Initial) Ritz Carlton San Jose</p> <p>Mailing Address 6961 Avenue of the Governors</p>		<p>Transaction ID: SB21B-4424-7870-V</p> <p>Date of Disbursement</p> <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>3</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	9		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	9		2	0	7														
<p>City Isla Verde State PR Zip Code 00979</p> <p>Purpose of Disbursement Gen.Fund.-Travel Lodging</p> <p>Candidate Name</p>	<p>002</p> <p>Category/Type</p>	<p>Amount of Each Disbursement this Period</p> <p>1013.94</p>																				
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>[MEMO ITEM] Subitemization of Master-card</p>																				

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</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)

<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)
FREEDOM PROJECT; THE

<p>A. Full Name (Last, First, Middle Initial) Ritz Carlton San Jose</p>		<p>Transaction ID: SB21B-4424-7871-V Date of Disbursement 03 / 19 / 2007</p>
<p>Mailing Address 6961 Avenue of the Governors</p>		<p>Amount of Each Disbursement this Period 4220.87</p>
<p>City Isla Verde State PR Zip Code 00979</p>	<p>Purpose of Disbursement Gen.Fund.- Travel Lodging Candidate Name Category/Type 002</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>[MEMO ITEM] Subitemization of Master-card</p>

<p>B. Full Name (Last, First, Middle Initial) Ritz Carlton San Jose</p>		<p>Transaction ID: SB21B-4424-7868-V Date of Disbursement 03 / 01 / 2007</p>
<p>Mailing Address 6961 Avenue of the Governors</p>		<p>Amount of Each Disbursement this Period 120.00</p>
<p>City Isla Verde State PR Zip Code 00979</p>	<p>Purpose of Disbursement Gen.Fund-Travel Food & Bev. Candidate Name Category/Type 002</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>[MEMO ITEM] Subitemization of Master-card</p>

<p>C. Full Name (Last, First, Middle Initial) Ritz Carlton San Jose</p>		<p>Transaction ID: SB21B-4424-7869-V Date of Disbursement 03 / 01 / 2007</p>
<p>Mailing Address 6961 Avenue of the Governors</p>		<p>Amount of Each Disbursement this Period 484.70</p>
<p>City Isla Verde State PR Zip Code 00979</p>	<p>Purpose of Disbursement Gen.Fund.-Lodging Candidate Name Category/Type 002</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>[MEMO ITEM] Subitemization of Master-card</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</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)
FREEDOM PROJECT; THE

<p>A. Full Name (Last, First, Middle Initial) Red Rock Hotel & Casino</p>		<p>Transaction ID: SB21B-4425-7880-V Date of Disbursement</p> <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>3</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	9		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	9		2	0	7														
<p>Mailing Address 11011 Charleston Boulevard</p>		<p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td>304.11</td> </tr> </table>	304.11																			
304.11																						
<p>City Las Vegas State NV Zip Code 89135-1402</p>	<p>Purpose of Disbursement Gen. Fund. - Travel Lodging</p>																					
<p>Candidate Name</p>	<p>002 Category/Type</p>	<p>[MEMO ITEM] Subitemization of Master-card</p>																				
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>																					
<p>State: District:</p>																						

<p>B. Full Name (Last, First, Middle Initial) Red Rock Hotel & Casino</p>		<p>Transaction ID: SB21B-4425-7921-V Date of Disbursement</p> <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>3</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	9		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	9		2	0	7														
<p>Mailing Address 11011 Charleston Boulevard</p>		<p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td>374.50</td> </tr> </table>	374.50																			
374.50																						
<p>City Las Vegas State NV Zip Code 89135-1402</p>	<p>Purpose of Disbursement Gen.Fund.- Food and Beverage</p>																					
<p>Candidate Name</p>	<p>002 Category/Type</p>	<p>[MEMO ITEM] Subitemization of Master-card</p>																				
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>																					
<p>State: District:</p>																						

<p>C. Full Name (Last, First, Middle Initial) Red Rock Hotel & Casino</p>		<p>Transaction ID: SB21B-4425-7881-V Date of Disbursement</p> <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>3</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	9		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	9		2	0	7														
<p>Mailing Address 11011 Charleston Boulevard</p>		<p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td>304.11</td> </tr> </table>	304.11																			
304.11																						
<p>City Las Vegas State NV Zip Code 89135-1402</p>	<p>Purpose of Disbursement Gen.Fund.-travel, lodging</p>																					
<p>Candidate Name</p>	<p>002 Category/Type</p>	<p>[MEMO ITEM] Subitemization of Master-card</p>																				
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>																					
<p>State: District:</p>																						

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<table border="1"> <tr> <td>0.00</td> </tr> </table>	0.00
0.00		
<p>TOTAL This Period (last page this line number only)</p>	<table border="1"> <tr> <td></td> </tr> </table>	

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)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Red Rock Hotel & Casino		Transaction ID: SB21B-4425-7923-V Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 7
Mailing Address 11011 Charleston Boulevard		Amount of Each Disbursement this Period 623.81
City Las Vegas State NV Zip Code 89135-1402	Purpose of Disbursement Gen.Fund.-Travel, lodging 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) ▼	[MEMO ITEM] Subitemization of Master-card

Full Name (Last, First, Middle Initial) B. Red Rock Hotel & Casino		Transaction ID: SB21B-4425-7924-V Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 7
Mailing Address 11011 Charleston Boulevard		Amount of Each Disbursement this Period 631.60
City Las Vegas State NV Zip Code 89135-1402	Purpose of Disbursement Gen.Fund.-Travel, lodging 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) ▼	[MEMO ITEM] Subitemization of Master-card

Full Name (Last, First, Middle Initial) C. Complete Campaigns		Transaction ID: SB21B-4441-7936-V Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 7
Mailing Address 610 Gateway Center Way Suite K		Amount of Each Disbursement this Period 1375.00
City San Diego State CA Zip Code 92102-4548	Purpose of Disbursement Database management 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) ▼	[MEMO ITEM] Subitemization of Master-card

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)

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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)
FREEDOM PROJECT; THE

<p>A. Roll Call</p> <p>Full Name (Last, First, Middle Initial) Mailing Address 50 F Street NW Suite 700</p> <p>City Washington State DC Zip Code 20001-1530</p> <p>Purpose of Disbursement Subscription Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>		<p>Transaction ID: SB21B-3143-7888-V Date of Disbursement: 03 / 19 / 2007</p> <p>Amount of Each Disbursement this Period 460.01</p> <p>[MEMO ITEM] Subitemization of Master-card</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type: 001</p>

<p>B. U.S. Airways</p> <p>Full Name (Last, First, Middle Initial) Mailing Address 111 W Rio Salado Parkway</p> <p>City Tempe State AZ Zip Code 85281-2880</p> <p>Purpose of Disbursement Gen.Fund.-travel, airfare Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>		<p>Transaction ID: SB21B-607-7937-V Date of Disbursement: 03 / 19 / 2007</p> <p>Amount of Each Disbursement this Period 1290.80</p> <p>[MEMO ITEM] Subitemization of Master-card</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type: 002</p>

<p>C. U.S. Airways</p> <p>Full Name (Last, First, Middle Initial) Mailing Address 111 W Rio Salado Parkway</p> <p>City Tempe State AZ Zip Code 85281-2880</p> <p>Purpose of Disbursement Gen.fund.-travel, airfare Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>		<p>Transaction ID: SB21B-607-7908-V Date of Disbursement: 03 / 19 / 2007</p> <p>Amount of Each Disbursement this Period 327.30</p> <p>[MEMO ITEM] Subitemization of Master-card</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type: 002</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</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)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. U.S. Airways		Transaction ID: SB21B-607-7875-V Date of Disbursement 03 / 19 / 2007
Mailing Address 111 W Rio Salado Parkway		Amount of Each Disbursement this Period 345.40
City State Zip Code Tempe AZ 85281-2880	Purpose of Disbursement Gen.Fund.-travel, airfare 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) ▼	[MEMO ITEM] Subitemization of Master-card

Full Name (Last, First, Middle Initial) B. U.S. Airways		Transaction ID: SB21B-607-7910-V Date of Disbursement 03 / 19 / 2007
Mailing Address 111 W Rio Salado Parkway		Amount of Each Disbursement this Period 1458.50
City State Zip Code Tempe AZ 85281-2880	Purpose of Disbursement Gen.fund.-travel, airfare 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) ▼	[MEMO ITEM] Subitemization of Master-card

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	73114.47

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

<p>A. U.S. Airways</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 111 W Rio Salado Parkway</p> <p>City Tempe State AZ Zip Code 85281-2880</p> <p>Purpose of Disbursement In-kind, air travel</p> <p>Candidate Name John A Boehner</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: OH District: 08</p>		<p>Transaction ID: SB23-607-7945-V</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="828.80"/></p> <p>[MEMO ITEM] Subitemization of Master-card</p>
<p>Disbursement For: 2008</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text" value="011"/></p>

<p>B. The Alamo Travel Group</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 9000 Wurzbach Road</p> <p>City San Antonio State TX Zip Code 78240-1038</p> <p>Purpose of Disbursement In-kind, travel reservation fee</p> <p>Candidate Name John A Boehner</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: OH District: 08</p>		<p>Transaction ID: SB23-4316-7946-V</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="25.00"/></p> <p>[MEMO ITEM] Subitemization of Master-card</p>
<p>Disbursement For: 2008</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text" value="011"/></p>

<p>C. La Playa Beach & Golf Resort</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 9891 Gulf Shore Drive</p> <p>City Naples State FL Zip Code 34108-2019</p> <p>Purpose of Disbursement In-kind, lodging</p> <p>Candidate Name John A Boehner</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: OH District: 08</p>		<p>Transaction ID: SB23-4436-7947-V</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1057.05"/></p> <p>[MEMO ITEM] Subitemization of Master-card</p>
<p>Disbursement For: 2008</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text" value="011"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="0.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></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 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)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Mastercard		Transaction ID: SB23-3605-8011-e Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 7
Mailing Address PO Box 70		Amount of Each Disbursement this Period 1910.85
City Middleletown	State OH	
Zip Code 45042		
Purpose of Disbursement In-kind, travel Candidate Name John A Boehner Category/Type 011		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 08	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. United Airlines		Transaction ID: SB23-3902-7914-V Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 7
Mailing Address 1200 East Algonquin Road		Amount of Each Disbursement this Period 395.60
City Elk Grove Township	State IL	
Zip Code 60007		
Purpose of Disbursement In-kind, travel airfare Candidate Name Ileana Ros-Lehtinen Category/Type 011		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 18	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

[MEMO ITEM]
Subitemization of Master-card

Full Name (Last, First, Middle Initial) C. Paula Nowakowski		Transaction ID: SB23-4433-8000-e Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 7
Mailing Address 6122 Edsall Road Apt. 304		Amount of Each Disbursement this Period 80.00
City Alexandria	State VA	
Zip Code 22304-5854		
Purpose of Disbursement In-kind, taxi Candidate Name Ileana Ros-Lehtinen Category/Type 011		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 18	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

1990.85

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)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Mastercard		Transaction ID: SB23-3605-8001-e	
Mailing Address PO Box 70		Date of Disbursement 03 / 19 / 2007	
City Middletown	State OH	Zip Code 45042	Amount of Each Disbursement this Period 395.60
Purpose of Disbursement In-kind, travel airfare		011 Category/ Type	
Candidate Name Ileana Ros-Lehtinen			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: FL	District: 18		

Full Name (Last, First, Middle Initial) B. The Balboa Bay Club & Resort		Transaction ID: SB23-4434-7915-V	
Mailing Address 1221 W Coast Highway		Date of Disbursement 03 / 19 / 2007	
City Newport Beach	State CA	Zip Code 92663-5026	Amount of Each Disbursement this Period 1209.30
Purpose of Disbursement In-kind, lodging		011 Category/ Type	
Candidate Name Edward Royce			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA	District: 40		

[MEMO ITEM]
Subitemization of Master-card

Full Name (Last, First, Middle Initial) C. Mastercard		Transaction ID: SB23-3605-8002-e	
Mailing Address PO Box 70		Date of Disbursement 03 / 19 / 2007	
City Middletown	State OH	Zip Code 45042	Amount of Each Disbursement this Period 1209.30
Purpose of Disbursement In-kind, lodging		011 Category/ Type	
Candidate Name Edward Royce			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA	District: 40		

SUBTOTAL of Disbursements This Page (optional)	1604.90
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)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. The Balboa Bay Club & Resort		Transaction ID: SB23-4434-7916-V Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 7
Mailing Address 1221 W Coast Highway		Amount of Each Disbursement this Period 1209.30
City Newport Beach State CA Zip Code 92663-5026	[MEMO ITEM] Subitemization of Master-card	
Purpose of Disbursement In-kind, lodging Candidate Name Ken Calvert Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: DC District: 44		011 Category/Type
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mastercard		Transaction ID: SB23-3605-8003-e Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 7
Mailing Address PO Box 70		Amount of Each Disbursement this Period 1209.30
City Middletown State OH Zip Code 45042	011 Category/Type	
Purpose of Disbursement In-kind, lodging Candidate Name Ken Calvert Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: DC District: 44		
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. THELMA DRAKE FOR CONGRESS		Transaction ID: SB23-3664-7974-e Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 7
Mailing Address PO Box 61480		Amount of Each Disbursement this Period 5000.00
City Virginia Beach State VA Zip Code 23466-1480	011 Category/Type	
Purpose of Disbursement Contribution Candidate Name THELMA DRAKE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 02		
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	6209.30
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)

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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)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. FRIENDS OF MIKE FERGUSON		Transaction ID: SB23-3666-7976-e Date of Disbursement 03 / 13 / 2007
Mailing Address PO Box 225		Amount of Each Disbursement this Period 5000.00
City Colonia State NJ Zip Code 07067-0225	011 Category/ Type	
Purpose of Disbursement Contribution Candidate Name Mike Ferguson Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NJ District: 07		

Full Name (Last, First, Middle Initial) B. GEOFF DAVIS FOR CONGRESS		Transaction ID: SB23-3674-7972-e Date of Disbursement 03 / 13 / 2007
Mailing Address 3161 Dixie Highway Suite F		Amount of Each Disbursement this Period 5000.00
City Erlanger State KY Zip Code 41018-1841	011 Category/ Type	
Purpose of Disbursement Contribution Candidate Name Geoffrey C Davis Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: KY District: 04		

Full Name (Last, First, Middle Initial) C. U.S. Airways		Transaction ID: SB23-607-7942-V Date of Disbursement 03 / 19 / 2007
Mailing Address 111 W Rio Salado Parkway		Amount of Each Disbursement this Period 828.80
City Tempe State AZ Zip Code 85281-2880	011 Category/ Type	
Purpose of Disbursement In-kind, airfare Candidate Name Connie Mack Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: FL District: 14		

[MEMO ITEM]
Subitemization of Master-card

SUBTOTAL of Disbursements This Page (optional) ▶

10000.00

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)

<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)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. The Alamo Travel Group		Transaction ID: SB23-4316-7943-V Date of Disbursement 03 / 19 / 2007
Mailing Address 9000 Wurzbach Road		Amount of Each Disbursement this Period 25.00
City San Antonio State TX Zip Code 78240-1038	Purpose of Disbursement In-kind, travel reservation fee Candidate Name Connie Mack Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 14	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Subitemization of Master-card

Full Name (Last, First, Middle Initial) B. La Playa Beach & Golf Resort		Transaction ID: SB23-4436-7944-V Date of Disbursement 03 / 19 / 2007
Mailing Address 9891 Gulf Shore Drive		Amount of Each Disbursement this Period 1057.06
City Naples State FL Zip Code 34108-2019	Purpose of Disbursement In-kind, lodging Candidate Name Connie Mack Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 14	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Subitemization of Master-card

Full Name (Last, First, Middle Initial) C. Mastercard		Transaction ID: SB23-3605-8009-e Date of Disbursement 03 / 19 / 2007
Mailing Address PO Box 70		Amount of Each Disbursement this Period 1910.86
City Middletown State OH Zip Code 45042	Purpose of Disbursement In-kind, airfare Candidate Name Connie Mack Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 14	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1910.86
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 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)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. KLINE FOR CONGRESS		Transaction ID: SB23-4144-7979-e Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 7
Mailing Address 101 W Burnsville Parkway Suite 104		Amount of Each Disbursement this Period 5000.00
City Burnsville State MN Zip Code 55337-2571	Purpose of Disbursement Contribution Contribution <input type="checkbox"/> 011 Category/Type	
Candidate Name John P Kline	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 02	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. FALLIN FOR CONGRESS		Transaction ID: SB23-4146-7975-e Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 7
Mailing Address 119 N Robinson Avenue Suite 400		Amount of Each Disbursement this Period 5000.00
City Oklahoma City State OK Zip Code 73102-4613	Purpose of Disbursement Contribution Contribution <input type="checkbox"/> 011 Category/Type	
Candidate Name Mary C Fallin	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 05	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. VERN BUCHANAN FOR CONGRESS		Transaction ID: SB23-4148-7971-e Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 7
Mailing Address PO Box 48928		Amount of Each Disbursement this Period 5000.00
City Sarasota State FL Zip Code 34230-5928	Purpose of Disbursement Contribution Contribution <input type="checkbox"/> 011 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) ▶	15000.00
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)

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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)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. HELLER FOR CONGRESS		Transaction ID: SB23-4201-7978-e Date of Disbursement 03 / 13 / 2007	
Mailing Address PO Box 750580		Amount of Each Disbursement this Period 5000.00	
City Las Vegas	State NV		Zip Code 89136-0580
Purpose of Disbursement Contribution			011 Category/ Type
Candidate Name Dean Heller			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NV District: 02			

Full Name (Last, First, Middle Initial) B. CATHY MCMORRIS FOR CONGRESS		Transaction ID: SB23-4190-8007-e Date of Disbursement 03 / 27 / 2007	
Mailing Address PO Box 137		Amount of Each Disbursement this Period 5000.00	
City Spokane	State WA		Zip Code 99210-0137
Purpose of Disbursement Contribution			011 Category/ Type
Candidate Name Cathy Ann Mcmorris			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: WA District: 05			

Full Name (Last, First, Middle Initial) C. WALBERG FOR CONGRESS		Transaction ID: SB23-4311-7982-e Date of Disbursement 03 / 13 / 2007	
Mailing Address 6769 Teachout Road		Amount of Each Disbursement this Period 5000.00	
City Tipton	State MI		Zip Code 49287-9807
Purpose of Disbursement Contribution			011 Category/ Type
Candidate Name Timothy Walberg			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MI District: 07			

SUBTOTAL of Disbursements This Page (optional) ▶	15000.00
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)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. LAMBORN FOR CONGRESS		Transaction ID: SB23-4355-7980-e Date of Disbursement 03 / 13 / 2007
Mailing Address 5170 N Union Boulevard		Amount of Each Disbursement this Period 5000.00
City Colorado Springs State CO Zip Code 80918-2045	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name Douglas L Lamborn		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 05	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Charlie Dent For Congress		Transaction ID: SB23-4409-7973-e Date of Disbursement 03 / 13 / 2007
Mailing Address PO Box 442		Amount of Each Disbursement this Period 5000.00
City Allentown State PA Zip Code 18105-0442	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name Charles W Dent		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 15	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Sam Graves for Congress		Transaction ID: SB23-3343-7977-e Date of Disbursement 03 / 13 / 2007
Mailing Address PO Box 34744		Amount of Each Disbursement this Period 5000.00
City Kansas City State MO Zip Code 64116-1144	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name Sam Graves		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 06	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	15000.00
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)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. SALI FOR CONGRESS		Transaction ID: SB23-3938-7950-e	
Mailing Address PO Box 71		Date of Disbursement MM / DD / YYYY 03 / 13 / 2007	
City Kuna	State ID	Zip Code 83634-0071	Amount of Each Disbursement this Period 5000.00
Purpose of Disbursement 2006 General Debt Retirement		011 Category/ Type	
Candidate Name William Sali			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Retire Debt - G2006		
State: ID	District: 01		

Full Name (Last, First, Middle Initial) B. National Republican Congressional Committe		Transaction ID: SB23-3091-7938-e	
Mailing Address 320 1st Street SE		Date of Disbursement MM / DD / YYYY 03 / 08 / 2007	
City Washington	State DC	Zip Code 20003-1838	Amount of Each Disbursement this Period 15000.00
Purpose of Disbursement 2007 Contribution		011 Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

SUBTOTAL of Disbursements This Page (optional)

20000.00

TOTAL This Period (last page this line number only)

86715.91