



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Freedom Fund

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	6

D	D
3	0

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		243372.26
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period .....	243372.26									
(c) Total Receipts (from Line 19) .....	272856.80	272856.80								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	516229.06	516229.06								
7. Total Disbursements (from Line 31) .....	196739.43	196739.43								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	319489.63	319489.63								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	.00									
10. Debts and Obligations owed <b>BY</b> 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 Fund

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	6

D	D
3	0

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	41250.00	41250.00
(i) Itemized (use Schedule A) .....	2575.00	2575.00
(ii) Unitemized .....	43825.00	43825.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	.00	.00
(b) Political Party Committees .....	228187.00	228187.00
(c) Other Political Committees (such as PACs) .....	272012.00	272012.00
(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 .....	.00	.00
13. All Loans Received .....	.00	.00
14. Loan Repayments Received .....	.00	.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	844.80	844.80
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	.00	.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	.00	.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	.00	.00
(b) Levin Funds (from Schedule H5) .....	.00	.00
(c) Total Transfer (add 18(a) and 18(b)).	.00	.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	272856.80	272856.80
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	272856.80	272856.80

**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.....	.00	.00
(ii) Non-Federal Share.....	.00	.00
(b) Other Federal Operating Expenditures.....	99239.43	99239.43
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	99239.43	99239.43
22. Transfers to Affiliated/Other Party Committees.....	.00	.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	95000.00	95000.00
24. Independent Expenditure (use Schedule E) .....	.00	.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	.00	.00
26. Loan Repayments Made.....	.00	.00
27. Loans Made.....	.00	.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	.00	.00
(b) Political Party Committees .....	.00	.00
(c) Other Political Committees (such as PACs) .....	.00	.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	.00	.00
29. Other Disbursements.....	2500.00	2500.00
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))..	196739.43	196739.43
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	196739.43	196739.43

**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) .....	272012.00	272012.00
34. Total Contribution Refunds (from Line 28(d)) .....	.00	.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	272012.00	272012.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	99239.43	99239.43
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	844.80	844.80
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	98394.63	98394.63

# 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 / 80
	<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 Fund

**A.** Full Name (Last, First, Middle Initial)  
Edwin Allen

Mailing Address Info requested

City State Zip Code  
Arlington VA 22207

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

Name of Employer Marc. Assoc. Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2007

Transaction ID: 1178308647496

Amount of Each Receipt this Period  
2000.00

Check

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

Mailing Address 609 Oakley Place

City State Zip Code  
Alexandria VA 22302

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

Name of Employer Bartlett & Bendall LLP Occupation Lobbyist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
03 / 23 / 2007

Transaction ID: 1174675102548

Amount of Each Receipt this Period  
2000.00

Check

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

Mailing Address 916 W Ironwood Dr

City State Zip Code  
Coeur D Alene ID 83814

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

Name of Employer Self Occupation Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2007

Transaction ID: 1178307168246

Amount of Each Receipt this Period  
250.00

Check

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 80
	<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 Fund

**A.** Full Name (Last, First, Middle Initial)  
Andrea Bergman

Mailing Address 3900 South 6th St.

City State Zip Code  
Arlington VA 22204

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

Name of Employer Info requested Occupation Info requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

Transaction ID: 1168965749328

Amount of Each Receipt this Period  
500.00

Check

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

Mailing Address 2053 Hickory Crest

City State Zip Code  
Memphis TN 38119

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

Name of Employer Self Occupation Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 4 / 2 0 0 7

Transaction ID: 1179860463325

Amount of Each Receipt this Period  
500.00

Check

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

Mailing Address 11 Mountain Park Avenue

City State Zip Code  
Waterbury CT 06708

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

Name of Employer Info requested Occupation Health Care Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 4 / 2 0 0 7

Transaction ID: 1178303993708

Amount of Each Receipt this Period  
500.00

Check

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<b>TOTAL</b> 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 / 80
	<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 Fund

**A.** Full Name (Last, First, Middle Initial)  
Marshall A. Brachman

Mailing Address 2108 West Freeway

City State Zip Code  
Fort Worth TX 76102

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

Name of Employer Self Employed Occupation Lobbyist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 2 / 2 0 0 7

Transaction ID: 1175542807275

Amount of Each Receipt this Period  
1000.00

Check

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

Mailing Address 6426 Osprey Court

City State Zip Code  
Woodbridge VA 22193

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

Name of Employer FASA Occupation Associate Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 4 / 2 0 0 7

Transaction ID: 1178306924457

Amount of Each Receipt this Period  
1000.00

Check

**C.** Full Name (Last, First, Middle Initial)  
C2 Group

Mailing Address 101 Constitution Ave., NW Suite 900

City State Zip Code  
Washington DC 20001

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 3 / 1 2 / 2 0 0 7

Transaction ID: 1182888269379

Amount of Each Receipt this Period  
1000.00

In-Kind

In-kind contribution partnership-see attribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 80
	<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 Fund

**A.** Full Name (Last, First, Middle Initial)  
S.B.J. Clark

Mailing Address 7213 Perimeter Road So.

City State Zip Code  
Seattle WA 98108

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

Name of Employer Info requested Occupation Info requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt  
MM / DD / YYYY  
06 / 11 / 2007

Transaction ID: 1181763022321

Amount of Each Receipt this Period  
3000.00

Check

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

Mailing Address 731 Gateshead Dr

City State Zip Code  
Naperville IL 60565

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

Name of Employer National Surgical Hospitals Occupation Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

Transaction ID: 1174672735420

Amount of Each Receipt this Period  
500.00

Check

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

Mailing Address 104 Oxford Ave

City State Zip Code  
Clarendon Hills IL 60514

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

Name of Employer National Surgical Care Occupation CFO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
04 / 19 / 2007

Transaction ID: 1177083472442

Amount of Each Receipt this Period  
500.00

Check

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 80
	<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 Fund

**A.** Full Name (Last, First, Middle Initial)  
Jack Egnatinsky

Mailing Address PO Box 25943

City State Zip Code  
C'Sted St. Croix VI 00824

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

Name of Employer Retired  
Occupation Retired Physician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 4 / 2 0 0 7

Transaction ID: 1179859499493

Amount of Each Receipt this Period  
500.00

Check

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

Mailing Address 503 Dilorenzo

City State Zip Code  
Naperville FL 60565

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

Name of Employer National Surgical Hospitals  
Occupation CFO

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 / 1 2 / 2 0 0 7

Transaction ID: 1174672522539

Amount of Each Receipt this Period  
1500.00

Check

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

Mailing Address 537 Jackson Blvd

City State Zip Code  
Nashville TN 37205

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

Name of Employer Symbion  
Occupation CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 4 / 2 0 0 7

Transaction ID: 1178307088577

Amount of Each Receipt this Period  
250.00

Check

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2250.00
<b>TOTAL</b> 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 / 80
	<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 Fund

**A.** Full Name (Last, First, Middle Initial)  
Beall D. Gary, Jr.

Mailing Address 3911 10th Avenue S

City Birmingham State AL Zip Code 35222-4207

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

Name of Employer Info requested Occupation Health Care Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2007

Transaction ID: 1178307481580

Amount of Each Receipt this Period  
500.00

Check

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

Mailing Address 7268 Crystal Spring Run

City Weeki Wachee State FL Zip Code 34607

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

Name of Employer HealthCare Occupation Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2007

Transaction ID: 1178549323829

Amount of Each Receipt this Period  
1000.00

Check

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

Mailing Address 83 Milburn Circle

City Pasadena State MD Zip Code 21122

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

Name of Employer National Cooperative Bank Occupation Managing Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
02 / 01 / 2007

Transaction ID: 1170704257506

Amount of Each Receipt this Period  
500.00

Check

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2000.00

**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 / 80
	<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 Fund

Full Name (Last, First, Middle Initial) <b>A. David B. Hall</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address 131 Pompano Road		Transaction ID: 1177084389751
City State Zip Code Woodland WA 98674	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Check	
Name of Employer Occupation Titan Health Corporation Chairman	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Richard G. Hanley</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7
Mailing Address 305 Sleeping Owl Point		Transaction ID: 1178307202089
City State Zip Code Lafayette CO 80026	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Check	
Name of Employer Occupation Info requested Health Care Executive	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. Allen D. Hecht</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7
Mailing Address 43 Wild Wood Drive		Transaction ID: 1178305512175
City State Zip Code Avon CT 06001	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Check	
Name of Employer Occupation Info requested Health Care Executive	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**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 / 80
	<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 Fund

Full Name (Last, First, Middle Initial) <b>A. R. E. Holding</b>		Date of Receipt M M / D D / Y Y Y Y 0 1 / 1 9 / 2 0 0 7	
Mailing Address 550 E. South Temple		<b>Transaction ID: 1169154161414</b>	
City State Zip Code Salt Lake City UT 84102	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C	Check		
Name of Employer Occupation The Sinclair Company Owner	Aggregate Year-to-Date ▼ 2500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. William Hollier</b>		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 7	
Mailing Address 12707 Westbrook Drive		<b>Transaction ID: 1174675306914</b>	
City State Zip Code Fairfax VA 22030	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C	Check		
Name of Employer Occupation Hollier LLC President	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Sandra Jones</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 13981 Paradise Lane		<b>Transaction ID: 1178307552609</b>	
City State Zip Code Dade City FL 33525	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	Check		
Name of Employer Occupation Ambulatory Strat. Inc. COO	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	4000.00
<b>TOTAL</b> 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 / 80
	<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 Fund

Full Name (Last, First, Middle Initial) <b>A. Ramakrishna Kanuri</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 7225 N Mobley Rd.		<b>Transaction ID: 1178307340553</b>	
City State Zip Code Odessa FL 33556	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>	Check		
Name of Employer Self Occupation Physician	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Timothy Kurth</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 3 / 2 0 0 7	
Mailing Address 333 Maryland Avenue NE		<b>Transaction ID: 1174675628024</b>	
City State Zip Code Washington DC 20002	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>	Check		
Name of Employer Lundquist Nethercuh & Gri-les Occupation VP	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Brent W. Lambert</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 500 Wyndemere Way #105		<b>Transaction ID: 1178307785851</b>	
City State Zip Code Naples FL 34105	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>	Check		
Name of Employer ASCOA Occupation Physician	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2000.00
<b>TOTAL</b> 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 15 / 80
	<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 Fund

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Jennifer Larkin Lukawski		Date of Receipt M M / D D / Y Y Y Y 03 / 26 / 2007	
Mailing Address 3101 Edgehill Dr		Transaction ID: 1174941064270	
City State Zip Code Alexandria VA 22302	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C	Check		
Name of Employer Barbour Griffith & Rogers LLC	Occupation Legislative Affairs		
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>B.</b> Diane Macpherson Major		Date of Receipt M M / D D / Y Y Y Y 03 / 23 / 2007	
Mailing Address 2232 Westwood Place		Transaction ID: 1174675164733	
City State Zip Code Falls Church VA 22043	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Check		
Name of Employer Bockorny & Petrizzo	Occupation Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Diane Macpherson Major		Date of Receipt M M / D D / Y Y Y Y 05 / 30 / 2007	
Mailing Address 2232 Westwood Place		Transaction ID: 1180556234941	
City State Zip Code Falls Church VA 22043	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Check		
Name of Employer Bockorny & Petrizzo	Occupation Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**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 / 80
	<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 Fund

**A.** Full Name (Last, First, Middle Initial)  
Thomas Mallon

Mailing Address 36 Regent Dr.

City State Zip Code  
Oak Brook IL 60523

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

Name of Employer Regent Surgical Health Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2007

Transaction ID: 1178306602168

Amount of Each Receipt this Period  
500.00

Check

**B.** Full Name (Last, First, Middle Initial)  
George J. Mannina, Jr.

Mailing Address 4101 Montpelier Rd

City State Zip Code  
Rockville MD 20853

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

Name of Employer O'Connor & Hannan Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
04 / 02 / 2007

Transaction ID: 1175542851538

Amount of Each Receipt this Period  
1000.00

Check

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

Mailing Address 4101 Montpelier Rd.

City State Zip Code  
Rockville MD 20853

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

Name of Employer Info requested Occupation Info requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
01 / 12 / 2007

Transaction ID: 1168965923040

Amount of Each Receipt this Period  
2500.00

Check

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4000.00
<b>TOTAL</b> 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 / 80
	<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 Fund

**A.** Full Name (Last, First, Middle Initial)  
Ken McDonald

Mailing Address 81 Concord Park W

City State Zip Code  
Nashville TN 37205

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

Name of Employer Am. Surgical Corp. Occupation Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2007

Transaction ID: 1178307441706

Amount of Each Receipt this Period  
500.00

Check

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

Mailing Address 2082 Grace Mannor Ct.

City State Zip Code  
McLean VA 22101

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

Name of Employer The McManus Group Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2007

Transaction ID: 1178305976345

Amount of Each Receipt this Period  
1000.00

Check

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

Mailing Address 963 Puritan

City State Zip Code  
Birmingham MI 48009

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

Name of Employer GLSCA Occupation Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2007

Transaction ID: 1178305840544

Amount of Each Receipt this Period  
500.00

Check

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2000.00

**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 / 80
	<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 Fund

**A.** Full Name (Last, First, Middle Initial)  
Mr. Lendell W. Porterfield

Mailing Address 1311 Dasher Ln

City Reston State VA Zip Code 20190

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

Name of Employer Van Scoyoc & Associates Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

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

Transaction ID: 1168965660878

Amount of Each Receipt this Period  
 2500.00

Check

**B.** Full Name (Last, First, Middle Initial)  
John G. Rex-Waller

Mailing Address 210 Broadway Ave

City Wilmette State IL Zip Code 60091

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

Name of Employer Info requested Occupation Info requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 3 / 1 2 / 2 0 0 7

Transaction ID: 1174672221802

Amount of Each Receipt this Period  
 1500.00

Check

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

Mailing Address 2680 Hayden View Dr.

City Coeur d'Alene State ID Zip Code 83815

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

Name of Employer Health South Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 4 / 2 0 0 7

Transaction ID: 1179859618132

Amount of Each Receipt this Period  
 250.00

Check

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4250.00
<b>TOTAL</b> 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 19 / 80
	<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 Fund

**A.** Full Name (Last, First, Middle Initial)  
Sarah H. Silberstein

Mailing Address 527 Colecroft Ct.

City State Zip Code  
Alexandria VA 22314

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

Name of Employer Occupation  
FASA Assistant Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2007

Transaction ID: 1178306449375

Amount of Each Receipt this Period  
750.00

Check

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

Mailing Address 1310 Bishop Lane

City State Zip Code  
Alexandria VA 22302

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

Name of Employer Occupation  
American Continental Group Lobbyist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
02 / 21 / 2007

Transaction ID: 1172692031734

Amount of Each Receipt this Period  
1000.00

Check

**C.** Full Name (Last, First, Middle Initial)  
Mr Charles E Snyder

Mailing Address 420 North Union Street

City State Zip Code  
Alexandria VA 22314

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

Name of Employer Occupation  
National Cooperative Bank President & CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
01 / 19 / 2007

Transaction ID: 1171478360294

Amount of Each Receipt this Period  
500.00

Check

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2250.00
<b>TOTAL</b> 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 20 / 80
	<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 Fund

Full Name (Last, First, Middle Initial) <b>A. Debra L. Stinchmob</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 11641 Charles Court		Transaction ID: 1179859457697	
City State Zip Code Farmington AR 72730	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	Check		
Name of Employer Progressive Surgical Solutions	Occupation Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Margaret E. Tighe</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 5800 1st Street N		Transaction ID: 1178306057176	
City State Zip Code Arlington VA 22203	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	Check		
Name of Employer Strategic Healthcare	Occupation Lobbyist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Ward H. White</b>		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 0 7	
Mailing Address 1133 21st Street N.W. Suite 900		Transaction ID: 1174940779742	
City State Zip Code Washington DC 20036-3351	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Check		
Name of Employer WHW Consulting, LLC	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1250.00
<b>TOTAL</b> 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 21 / 80
	(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 Fund

**A.** Full Name (Last, First, Middle Initial)  
Ronald Wisor

Mailing Address 6200 29th Street NW

City State Zip Code  
Washington DC 20015

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

Name of Employer Occupation  
Hogan & Hartson Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2007

Transaction ID: 1178308014141

Amount of Each Receipt this Period  
500.00

Check

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

Mailing Address 386 Fourth July Creek Road

City State Zip Code  
North Fork ID 83466

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

Name of Employer Occupation  
Info requested Info requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2007

Transaction ID: 1178304290401

Amount of Each Receipt this Period  
500.00

Check

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	41250.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 80
	<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 Fund

Full Name (Last, First, Middle Initial) <b>A. AFLAC Inc. PAC</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 30 / 2007	
Mailing Address 1932 Wynnton Road		<b>Transaction ID: 1180556739325</b>	
City State Zip Code Columbus GA 31999	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. <b>C C00034157</b>		Check	
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) <b>B. Abbott Laboratories EmployeePAC</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 22 / 2007	
Mailing Address 100 Abbott Park Road		<b>Transaction ID: 1172612038117</b>	
City State Zip Code Abbott Park IL 60064	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C C00040279</b>		Check	
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) <b>C. Altria Group Inc. PAC</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 19 / 2007	
Mailing Address 120 Park Avenue		<b>Transaction ID: 1182281827947</b>	
City State Zip Code New York NY 10017	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C C00089136</b>		Check	
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# 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 23 / 80
	<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 Fund

Full Name (Last, First, Middle Initial) <b>A. American Academy of Audiology, Inc. PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 6 / 2 0 0 7
Mailing Address 11730 Plaza America Drive Suite 300		<b>Transaction ID: 1174941198735</b>
City Reston State VA Zip Code 20190	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00342972	Check	
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>B. American Association for Justice</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 3 / 2 0 0 7
Mailing Address 1050 31st Street, NW		<b>Transaction ID: 1174679374450</b>
City Washington State DC Zip Code 20007	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. <b>C</b> C00024521	Check	
Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) <b>C. American Bankers Association PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 1 2 / 2 0 0 7
Mailing Address 1120 Connecticut Avenue NW		<b>Transaction ID: 1168966020911</b>
City Washington State DC Zip Code 20036	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. <b>C</b> C00004275	Check	
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>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	6000.00
<b>TOTAL</b> 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 24 / 80  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Freedom Fund

**A.** Full Name (Last, First, Middle Initial)  
American Bankers Association PAC

Mailing Address 1120 Connecticut Avenue NW

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 2 / 2 0 0 7

Transaction ID: 1175542958112

Amount of Each Receipt this Period  
2500.00

Check

**B.** Full Name (Last, First, Middle Initial)  
American Health Care Assoc. PAC

Mailing Address 1201 L Street, NW

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00006080

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 7

Transaction ID: 1180556792369

Amount of Each Receipt this Period  
2500.00

Check

**C.** Full Name (Last, First, Middle Initial)  
American Hospital Association PAC

Mailing Address 325 Seventh Street NW  
Suite 700

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00106146

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 2 / 2 2 / 2 0 0 7

Transaction ID: 1172612088302

Amount of Each Receipt this Period  
2500.00

Check

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 7500.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 80
	<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 Fund

Full Name (Last, First, Middle Initial) <b>A.</b> American Institute of Cerified Public Accountants PAC		Date of Receipt M M / D D / Y Y Y Y Y 03 / 20 / 2007
Mailing Address 201 Plaza Three		<b>Transaction ID:</b> 1174493913856
City State Zip Code Jersey City NJ 07311	FEC ID number of contributing federal political committee. <b>C</b> C00077321	Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	Check
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>B.</b> American Resort Development Assoc. Resort Owners Coalition PAC		Date of Receipt M M / D D / Y Y Y Y Y 03 / 26 / 2007
Mailing Address 1201 15th Street NW 4th Floor		<b>Transaction ID:</b> 1174941105925
City State Zip Code Washington DC 20005	FEC ID number of contributing federal political committee. <b>C</b> C00358663	Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	Check
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>C.</b> American Surgical Hospital Assoc. Inc. PAC		Date of Receipt M M / D D / Y Y Y Y Y 03 / 23 / 2007
Mailing Address PO Box 23220		<b>Transaction ID:</b> 1174675458813
City State Zip Code San Diego CA 92193	FEC ID number of contributing federal political committee. <b>C</b> C00394163	Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	Check
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	15000.00
<b>TOTAL</b> 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 26 / 80
	<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 Fund

Full Name (Last, First, Middle Initial) <b>A.</b> Anheuser-Busch Companies Inc. PAC		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address One Busch Place		Transaction ID: 1177084601930
City State Zip Code St. Louis MO 63118	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. <b>C</b> C00034488	Check	
Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Anheuser-Busch Companies Inc. PAC		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 7
Mailing Address One Busch Place		Transaction ID: 1183729015207
City State Zip Code St. Louis MO 63118	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. <b>C</b> C00034488	Check	
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>C.</b> Assurant Inc. PAC		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 7
Mailing Address PO Box 3050 501 W. Michigan Street		Transaction ID: 1183729144733
City State Zip Code Milwaukee WI 53201	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. <b>C</b> C00185694	Check	
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>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	7500.00
<b>TOTAL</b> 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 27 / 80  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Freedom Fund

**A.** Full Name (Last, First, Middle Initial)  
Bank of America Corporation PAC

Mailing Address 600 Peachtree St., NE  
3rd Floor

City Atlanta State GA Zip Code 30308-3615

FEC ID number of contributing federal political committee. **C** C00043489

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

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

Transaction ID: 1170704403315

Amount of Each Receipt this Period  
5000.00

Check

**B.** Full Name (Last, First, Middle Initial)  
Bear Stearns Political Campaign Committee

Mailing Address 383 MADISON AVENUE

City NEW YORK State NY Zip Code 10179

FEC ID number of contributing federal political committee. **C** C00127357

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 2 9 / 2 0 0 7

Transaction ID: 1183728936833

Amount of Each Receipt this Period  
1000.00

Check

**C.** Full Name (Last, First, Middle Initial)  
Blue Cross Blue Shield Association PAC

Mailing Address 1310 G Street NW

City Washington State DC Zip Code 20005

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 Y  
0 2 / 0 6 / 2 0 0 7

Transaction ID: 1170798896472

Amount of Each Receipt this Period  
2500.00

Check

**SUBTOTAL** of Receipts This Page (optional) ..... ► **8500.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 80
	<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 Fund

A. Full Name (Last, First, Middle Initial) Blue Cross Blue Shield Association PAC Mailing Address 1310 G Street NW City State Zip Code Washington DC 20005 FEC ID number of contributing federal political committee. <b>C</b> C00194746 Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 4000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 9 / 2 0 0 7 Transaction ID: 1177084472169 Amount of Each Receipt this Period 1500.00 Check
---	--	--

B. Full Name (Last, First, Middle Initial) Blue Cross Blue Shield Association PAC Mailing Address 1310 G Street NW City State Zip Code Washington DC 20005 FEC ID number of contributing federal political committee. <b>C</b> C00194746 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		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7 Transaction ID: 1180556838008 Amount of Each Receipt this Period 1000.00 Check
---	--	--

C. Full Name (Last, First, Middle Initial) Capital One Financial Corp. Assoc. Political Fund Mailing Address 1680 Capital One Drive Attn: 19050-1204 City State Zip Code McLean VA 22102 FEC ID number of contributing federal political committee. <b>C</b> C00326595 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		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 6 / 2 0 0 7 Transaction ID: 1174940737788 Amount of Each Receipt this Period 2500.00 Check
--	--	--

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5000.00
<b>TOTAL</b> 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 29 / 80
	<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 Fund

Full Name (Last, First, Middle Initial) <b>A. Council of Insurance Agents &amp; Brokers PAC</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 12 / 2007
Mailing Address 701 Pennsylvania Avenue NW No. 750		<b>Transaction ID: 1181680853787</b>
City State Zip Code Washington DC 20004	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00039578	Check	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Credit Suisse Securities (USA) Political Action Committee</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 29 / 2007
Mailing Address 1155 21st Street, NW Suite 300		<b>Transaction ID: 1175200942782</b>
City State Zip Code Washington DC 20036	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00111559	Check	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. DIRECTV GROUP INC. FUND - FEDERAL</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 23 / 2007
Mailing Address 444 North Capitol Street NW Suite 728		<b>Transaction ID: 1174675053800</b>
City State Zip Code Washington DC 20001	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00331991	Check	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	8000.00
<b>TOTAL</b> 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 30 / 80
	<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 Fund

Full Name (Last, First, Middle Initial) <b>A. Deloitte &amp; Touche PAC</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2007	
Mailing Address P.O. Box 365		<b>Transaction ID: 1185380327854</b>	
City State Zip Code Washington DC 20044	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C C00211318</b>	Check		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Direct Marketing Assoc. PAC</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2007	
Mailing Address 1111 19th St., NW Suite 1100		<b>Transaction ID: 1183728975426</b>	
City State Zip Code Washington DC 20036-3603	Amount of Each Receipt this Period 1500.00		
FEC ID number of contributing federal political committee. <b>C C00235309</b>	Check		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 1500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. ESOP AssociationPAC</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 22 / 2007	
Mailing Address 1726 M Street, NW Suite 501		<b>Transaction ID: 1169499366908</b>	
City State Zip Code Washington DC 20036	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C C00196089</b>	Check		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	7500.00
<b>TOTAL</b> 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 31 / 80
	<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 Fund

<b>A.</b> Full Name (Last, First, Middle Initial) Elizabeth Dole Committee, Inc. Mailing Address PO Box 2918 City Raleigh State NC Zip Code 27601 FEC ID number of contributing federal political committee. <b>C</b> C00369140 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		Date of Receipt <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>4</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 1177445219616 Amount of Each Receipt this Period <table border="1"> <tr> <td>5000.00</td> </tr> </table> Check	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	9		2	0	0	7	5000.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		0	9		2	0	0	7														
5000.00																							

<b>B.</b> Full Name (Last, First, Middle Initial) Energysolutions, LLC PAC Mailing Address 423 West 300 South Suite 200 City Salt Lake City State UT Zip Code 84101 FEC ID number of contributing federal political committee. <b>C</b> C00387878 Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3000.00		Date of Receipt <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>6</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 1183729315414 Amount of Each Receipt this Period <table border="1"> <tr> <td>3000.00</td> </tr> </table> Check	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	9		2	0	0	7	3000.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		2	9		2	0	0	7														
3000.00																							

<b>C.</b> Full Name (Last, First, Middle Initial) Ernst & Young PAC Mailing Address 1225 Connecticut Avenue NW Suite 800 City Washington State DC Zip Code 20036 FEC ID number of contributing federal political committee. <b>C</b> C00227744 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		Date of Receipt <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>4</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 1177084564244 Amount of Each Receipt this Period <table border="1"> <tr> <td>5000.00</td> </tr> </table> Check	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	9		2	0	0	7	5000.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		1	9		2	0	0	7														
5000.00																							

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>13000.00</b>
<b>TOTAL</b> 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 32 / 80
	<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 Fund

Full Name (Last, First, Middle Initial) <b>A. FASA INC PAC</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 04 / 2007	
Mailing Address 1012 CAMERON STREET		<b>Transaction ID: 1179860878741</b>	
City State Zip Code ALEXANDRIA VA 22314	Amount of Each Receipt this Period 1187.00		
FEC ID number of contributing federal political committee. <b>C C00424788</b>	Check		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 1187.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. FMR Corp. Federal PAC</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 12 / 2007	
Mailing Address 82 Devonshire St.		<b>Transaction ID: 1168965834262</b>	
City State Zip Code Boston MA 02109	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C C00380550</b>	Check		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. FPL PAC</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 02 / 2007	
Mailing Address 700 Universe Blvd. PO Box 14000		<b>Transaction ID: 1175543126479</b>	
City State Zip Code Juno Beach FL 33408	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C C00064774</b>	Check		
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>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	8687.00
<b>TOTAL</b> 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 33 / 80
	<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 Fund

Full Name (Last, First, Middle Initial) <b>A. Farmers Group, Inc. PAC</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 19 / 2007	
Mailing Address 591 Redwood Hwy. Bldg. 4000		<b>Transaction ID: 1182281498922</b>	
City State Zip Code Mill Valley CA 94941	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C C00135681</b>	Check		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Federal Home Loan Mortgage Corp. PAC</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 12 / 2007	
Mailing Address 6200 Jones Branch Road Mail Stop 604		<b>Transaction ID: 1168965978913</b>	
City State Zip Code McLean VA 22102	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C C00404129</b>	Check		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Federal Home Loan Mortgage Corp. PAC</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 12 / 2007	
Mailing Address 6200 Jones Branch Road Mail Stop 604		<b>Transaction ID: 1181681018622</b>	
City State Zip Code McLean VA 22102	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C C00404129</b>	Check		
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) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	6000.00
<b>TOTAL</b> 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 34 / 80
	<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 Fund

Full Name (Last, First, Middle Initial) <b>A. Federal National Mortgage Association PAC</b>		Date of Receipt M M / D D / Y Y Y Y 0 1 / 1 9 / 2 0 0 7	
Mailing Address 3900 Wisconsin Avenue NW		<b>Transaction ID: 1169154259864</b>	
City State Zip Code Washington DC 20016	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C C00393520</b>	Check		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Financial Planning Assoc. PAC</b>		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 7	
Mailing Address 1615 L St., NW Suite 650		<b>Transaction ID: 1174675495390</b>	
City State Zip Code Washington DC 20036	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C C00370130</b>	Check		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. HECLA</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 7	
Mailing Address 6500 N. Mineral Dr STE 200		<b>Transaction ID: 1181766645330</b>	
City State Zip Code Coeur d' Alene ID 83851	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C C00124016</b>	Check		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	4500.00
<b>TOTAL</b> 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 35 / 80
	<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 Fund

Full Name (Last, First, Middle Initial) <b>A.</b> HSBC North American PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address 2700 Sanders Road		Transaction ID: 1177084429327
City State Zip Code Prospect Heights IL 60070	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00033423	Check	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> Healthsouth PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7
Mailing Address One Healthsouth Pkwy		Transaction ID: 1178549940200
City State Zip Code Birmingham AL 35243	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C C00414649	Check	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> Ice Cream Milk & Cheese PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 3 / 2 0 0 7
Mailing Address 1250 H Street NW Suite 900		Transaction ID: 1174675014943
City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00128231	Check	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5500.00
<b>TOTAL</b> 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 36 / 80		
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
Freedom Fund

<b>A.</b> Full Name (Last, First, Middle Initial) Ice Cream Milk & Cheese PAC		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 7	
Mailing Address 1250 H Street NW Suite 900		<b>Transaction ID:</b> 1180556492430	
City Washington State DC Zip Code 20005	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b> C00128231		Check	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>B.</b> Full Name (Last, First, Middle Initial) International Council of Shopping Centers Inc. PAC		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 7	
Mailing Address 1033 N. Fairfax Street		<b>Transaction ID:</b> 1170798805771	
City Alexandria State VA Zip Code 22314	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b> C00217638		Check	
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>C.</b> Full Name (Last, First, Middle Initial) Investment Company Institute PAC		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 0 / 2 0 0 7	
Mailing Address 1401 H Street NW Suite 1200		<b>Transaction ID:</b> 1170703439730	
City Washington State DC Zip Code 20005	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b> C00105981		Check	
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>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	6000.00
<b>TOTAL</b> 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 37 / 80
	<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 Fund

**A.** Full Name (Last, First, Middle Initial)  
Investment Company Institute PAC

Mailing Address 1401 H Street NW  
Suite 1200

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00105981

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
06 / 29 / 2007

Transaction ID: 1183729212053

Amount of Each Receipt this Period  
2500.00

Check

**B.** Full Name (Last, First, Middle Initial)  
J.P.Morgan Chase & Co. State and Federal PAC

Mailing Address 270 Park Avenue

City State Zip Code  
New York NY 10169

FEC ID number of contributing federal political committee. **C** C00128512

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
04 / 02 / 2007

Transaction ID: 1175543182367

Amount of Each Receipt this Period  
2500.00

Check

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

Mailing Address Ms. Shannon Salmon  
1350 Eye Street, #1210

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00010983

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
MM / DD / YYYY  
02 / 01 / 2007

Transaction ID: 1170704668808

Amount of Each Receipt this Period  
2000.00

Check

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	7000.00
<b>TOTAL</b> 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 38 / 80		
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
Freedom Fund

<b>A.</b> Full Name (Last, First, Middle Initial) KPMG Partners/Principals & Employees PAC Mailing Address PO Box 18254 City Washington State DC Zip Code 20036 FEC ID number of contributing federal political committee. <b>C</b> C00280222 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		Date of Receipt <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>4</td><td>/</td><td>1</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 1177084307082 Amount of Each Receipt this Period <table border="1"> <tr> <td>2500.00</td> </tr> </table> Check	M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	1	9	/	2	0	0	7	2500.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	4	/	1	9	/	2	0	0	7														
2500.00																							

<b>B.</b> Full Name (Last, First, Middle Initial) Koch Industries Inc. PAC Mailing Address 655 15th St., NW Suite 445 City Washington State DC Zip Code 20005 FEC ID number of contributing federal political committee. <b>C</b> C00236489 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		Date of Receipt <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>2</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 1174493844344 Amount of Each Receipt this Period <table border="1"> <tr> <td>2500.00</td> </tr> </table> Check	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	2	0	/	2	0	0	7	2500.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	3	/	2	0	/	2	0	0	7														
2500.00																							

<b>C.</b> Full Name (Last, First, Middle Initial) Koch Industries Inc. PAC Mailing Address 655 15th St., NW Suite 445 City Washington State DC Zip Code 20005 FEC ID number of contributing federal political committee. <b>C</b> C00236489 Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3500.00		Date of Receipt <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>6</td><td>/</td><td>1</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 1181680681155 Amount of Each Receipt this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table> Check	M	M	/	D	D	/	Y	Y	Y	Y	0	6	/	1	2	/	2	0	0	7	1000.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	6	/	1	2	/	2	0	0	7														
1000.00																							

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>6000.00</b>
<b>TOTAL</b> 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 39 / 80
	<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 Fund

Full Name (Last, First, Middle Initial) <b>A.</b> Koch Industries Inc. PAC		Date of Receipt M M / D D / Y Y Y Y 06 / 19 / 2007
Mailing Address 655 15th St., NW Suite 445		Transaction ID: 1182281866228
City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00236489	Check	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 4500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> Koch Industries Inc. PAC		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2007
Mailing Address 655 15th St., NW Suite 445		Transaction ID: 1183734198464
City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b> C00236489	Check	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> MedCath Inc. Committee		Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2007
Mailing Address 10720 Sikes Place Suite 300		Transaction ID: 1174493647540
City State Zip Code Charlotte NC 28277	Amount of Each Receipt this Period 4000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00380204	Check	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 4000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5500.00
<b>TOTAL</b> 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 40 / 80
	<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 Fund

Full Name (Last, First, Middle Initial) <b>A. Medimmune Inc. PAC</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2007	
Mailing Address One MedImmune Way		<b>Transaction ID: 1183729050082</b>	
City State Zip Code Gaithersberg MD 20878	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C C00399725</b>	Check		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Microsoft Corporation PAC</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 12 / 2007	
Mailing Address 16011 NE 36th Way Box 97017		<b>Transaction ID: 1168965798779</b>	
City State Zip Code Redmond WA 98073	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C C00227546</b>	Check		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Mortgage Bankers Assoc. of America PAC</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 04 / 2007	
Mailing Address 1919 Pennsylvania Avenue NW		<b>Transaction ID: 1180990152321</b>	
City State Zip Code Washington DC 20006	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C C00004812</b>	Cash		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	6000.00
<b>TOTAL</b> 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 41 / 80
	<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 Fund

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

Mailing Address 805 15th Street NW  
STE 700

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00417634

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 12 / 2007

Transaction ID: 1181766867232

Amount of Each Receipt this Period  
2000.00

Check

**B.** Full Name (Last, First, Middle Initial)  
NOVAMED INC POLITICAL ACTION COMMITTEE

Mailing Address 980 NORTH MICHIGAN AVENUE STE 1620

City State Zip Code  
CHICAGO IL 60611

FEC ID number of contributing federal political committee. **C** C00428086

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 04 / 2007

Transaction ID: 1179860695431

Amount of Each Receipt this Period  
1000.00

Check

**C.** Full Name (Last, First, Middle Initial)  
National Assoc. of Convenience Stores PAC

Mailing Address 1600 Duke Street

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00126763

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
02 / 02 / 2007

Transaction ID: 1185388718814

Amount of Each Receipt this Period  
5000.00

Check

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	8000.00
<b>TOTAL</b> 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 42 / 80
	<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 Fund

Full Name (Last, First, Middle Initial) <b>A.</b> National Association Mutual Insurance Companies		Date of Receipt M M / D D / Y Y Y Y 05 / 30 / 2007	
Mailing Address PO Box 68700		<b>Transaction ID:</b> 1180556695889	
City Indianapolis	State IN	Zip Code 46268	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. <b>C</b> C00170258		Check	
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>B.</b> National Multi Housing Council PAC		Date of Receipt M M / D D / Y Y Y Y 03 / 12 / 2007	
Mailing Address 1850 M Street NW Suite 540		<b>Transaction ID:</b> 1174671869474	
City Washington	State DC	Zip Code 20036	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. <b>C</b> C00130773		Check	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> New York Life PAC		Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2007	
Mailing Address 51 Madison Avenue Suite 910		<b>Transaction ID:</b> 1174493960432	
City New York	State NY	Zip Code 10010	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. <b>C</b> C00158881		Check	
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>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	6000.00
<b>TOTAL</b> 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 43 / 80
	<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 Fund

Full Name (Last, First, Middle Initial) <b>A.</b> New York Life PAC		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 7
Mailing Address 51 Madison Avenue Suite 910		Transaction ID: 1181681106586
City State Zip Code New York NY 10010	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00158881		Check
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4500.00	

Full Name (Last, First, Middle Initial) <b>B.</b> New York Stock Exchange, Inc. Member PAC		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 7
Mailing Address 801 Pennsylvania Avenue NW Suite 630		Transaction ID: 1181680756667
City State Zip Code Washington DC 20004	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00200188		Check
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>C.</b> PACIFIC PULMONARY SERVICES POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 7
Mailing Address 88 ROWLAND WAY SUITE 300		Transaction ID: 1174675535075
City State Zip Code Novato CA 94945	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00403998		Check
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	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	4000.00
<b>TOTAL</b> 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 44 / 80
	<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	

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 Fund

Full Name (Last, First, Middle Initial) <b>A. Pfizer Inc. PAC</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 12 / 2007	
Mailing Address 235 East 42nd St.		<b>Transaction ID: 1174672019374</b>	
City State Zip Code New York NY 10017	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C C00016683</b>	Check		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Physical Therapy PAC</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 06 / 2007	
Mailing Address 1111 N. Fairfax Street		<b>Transaction ID: 1170798844692</b>	
City State Zip Code Alexandria VA 22314	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C C00012880</b>	Check		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Physical Therapy PAC</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 26 / 2007	
Mailing Address 1111 N. Fairfax Street		<b>Transaction ID: 1174941139784</b>	
City State Zip Code Alexandria VA 22314	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C C00012880</b>	Check		
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) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	7500.00
<b>TOTAL</b> 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 45 / 80
	<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 Fund

Full Name (Last, First, Middle Initial) <b>A. Pottlatch Employees' Political Fund</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 11 / 2007	
Mailing Address 601 W. Riverside Ave. Suite 1100		<b>Transaction ID: 1181763064570</b>	
City State Zip Code Spokane WA 99201	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. <b>C C00041608</b>		Check	
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) <b>B. PriceWaterhouseCoopers PAC</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 06 / 2007	
Mailing Address 1900 K Street, NW		<b>Transaction ID: 1170798950939</b>	
City State Zip Code Washington DC 20006	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C C00107235</b>		Check	
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) <b>C. PriceWaterhouseCoopers PAC</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 02 / 2007	
Mailing Address 1900 K Street, NW		<b>Transaction ID: 1175543052545</b>	
City State Zip Code Washington DC 20006	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C C00107235</b>		Check	
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ 5000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	7000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**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 46 / 80
	<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 Fund

Full Name (Last, First, Middle Initial) <b>A. PropertyCasualtyInsurersAssociationofAmericaPAC</b>		Date of Receipt M M / D D / Y Y Y Y Y 06 / 11 / 2007	
Mailing Address 2600 South River Road		<b>Transaction ID: 1185388622458</b>	
City State Zip Code Des Plaines IL 60018	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b> C00066472	Check		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. SECURITIES INDUSTRY AND FINANCIAL MARKETS ASSOCIATION POLITICAL ACTION COMMITTEE</b>		Date of Receipt M M / D D / Y Y Y Y Y 05 / 29 / 2007	
Mailing Address 1425 K Street NW 7th Floor		<b>Transaction ID: 1180541011321</b>	
City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b> C00431312	Check		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. SECURITIES INDUSTRY AND FINANCIAL MARKETS ASSOCIATION POLITICAL ACTION COMMITTEE</b>		Date of Receipt M M / D D / Y Y Y Y Y 05 / 29 / 2007	
Mailing Address 1425 K Street NW 7th Floor		<b>Transaction ID: 1180541046038</b>	
City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b> C00431312	Check		
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) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	7500.00
<b>TOTAL</b> 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 47 / 80
	<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 Fund

Full Name (Last, First, Middle Initial) <b>A. Seniors Housing PAC</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2007
Mailing Address 5100 Wisconsin Avenue, NW Suite 307		<b>Transaction ID: 1174493764472</b>
City State Zip Code Washington DC 20016	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. <b>C</b> C00325332	Check	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Seniors Housing PAC</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 12 / 2007
Mailing Address 5100 Wisconsin Avenue, NW Suite 307		<b>Transaction ID: 1181680975452</b>
City State Zip Code Washington DC 20016	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. <b>C</b> C00325332	Check	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Southwest Airlines Pilots' Association PAC</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 30 / 2007
Mailing Address 1450 Empire Central Drive Suite 737		<b>Transaction ID: 1180556187256</b>
City State Zip Code Dallas TX 75247	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00360669	Check	
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) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	10000.00
<b>TOTAL</b> 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 48 / 80
	<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 Fund

Full Name (Last, First, Middle Initial) <b>A.</b> Sun PAC		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 1 / 2 0 0 7	
Mailing Address 1735 Market ST		<b>Transaction ID:</b> 1172691984486	
City Philadelphia	State PA	Amount of Each Receipt this Period 2500.00	
Zip Code 19103		Check	
FEC ID number of contributing federal political committee. <b>C</b> C00025346			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> The Financial Services Roundtable PAC		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 7	
Mailing Address 1001 Pennsylvania Ave. Suite 500 South		<b>Transaction ID:</b> 1175542992829	
City Washington	State DC	Amount of Each Receipt this Period 2500.00	
Zip Code 20004		Check	
FEC ID number of contributing federal political committee. <b>C</b> C00193177			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> The GlaxoSmithKline PAC		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 7	
Mailing Address Five Moore Drive		<b>Transaction ID:</b> 1180556540787	
City Research Triangle	State NC	Amount of Each Receipt this Period 1000.00	
Zip Code 27709		Check	
FEC ID number of contributing federal political committee. <b>C</b> C00199703			
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		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	6000.00
<b>TOTAL</b> 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 49 / 80		
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
Freedom Fund

Full Name (Last, First, Middle Initial) <b>A.</b> The Goldman Sachs Group, Inc. PAC		Date of Receipt M M / D D / Y Y Y Y 04 / 02 / 2007
Mailing Address 1101 Pennsylvania Avenue NW		<b>Transaction ID:</b> 1175542892708
City State Zip Code Washington DC 20004	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. <b>C</b> C00350744	Check	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> The Home Depot PAC		Date of Receipt M M / D D / Y Y Y Y 03 / 12 / 2007
Mailing Address 2455 Paces Ferry Road, NW		<b>Transaction ID:</b> 1174672061840
City State Zip Code Atlanta GA 30339-4024	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. <b>C</b> C00284885	Check	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> The Home Depot PAC		Date of Receipt M M / D D / Y Y Y Y 04 / 19 / 2007
Mailing Address 2455 Paces Ferry Road, NW		<b>Transaction ID:</b> 1177084527745
City State Zip Code Atlanta GA 30339-4024	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. <b>C</b> C00284885	Check	
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) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	7500.00
<b>TOTAL</b> 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 50 / 80
	<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 Fund

Full Name (Last, First, Middle Initial) <b>A.</b> The St. Paul Travelers Companies, Inc. PAC		Date of Receipt M M / D D / Y Y Y Y 03 / 12 / 2007
Mailing Address One Tower Square		<b>Transaction ID:</b> 1174671826710
City State Zip Code Hartford CT 06183	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. <b>C</b> C00376376	Check	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> The Travelers Companies, Inc. PAC		Date of Receipt M M / D D / Y Y Y Y 06 / 12 / 2007
Mailing Address One Tower Square		<b>Transaction ID:</b> 1181766977792
City State Zip Code Hartford CT 06183	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00376376	Check	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> Union Pacific Corp. Fund for Effective Govt		Date of Receipt M M / D D / Y Y Y Y 03 / 23 / 2007
Mailing Address 600 Thirteenth Street NW Suite 340		<b>Transaction ID:</b> 1174675669741
City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. <b>C</b> C00010470	Check	
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>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	6000.00
<b>TOTAL</b> 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 51 / 80
	<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 Fund

Full Name (Last, First, Middle Initial) <b>A. United Parcel Service Inc. PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7		
Mailing Address 55 Glenlake Parkway, NE		<b>Transaction ID: 1179860504668</b>		
City State Zip Code Atlanta GA 30328	Amount of Each Receipt this Period 5000.00		Check	
FEC ID number of contributing federal political committee. <b>C</b> C00064766				
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ 5000.00			

Full Name (Last, First, Middle Initial) <b>B. Wachovia Corp. Employees Good Govt Federal Fund</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 2 / 2 0 0 7		
Mailing Address 301 S College Street		<b>Transaction ID: 1174671966157</b>		
City State Zip Code Charlotte NC 28288	Amount of Each Receipt this Period 2500.00		Check	
FEC ID number of contributing federal political committee. <b>C</b> C00012518				
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ 2500.00			

Full Name (Last, First, Middle Initial) <b>C. Washington Group International PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 1 / 2 0 0 7		
Mailing Address 2345 Crystal Drive Suite 708		<b>Transaction ID: 1172692107528</b>		
City State Zip Code Arlington VA 22202	Amount of Each Receipt this Period 5000.00		Check	
FEC ID number of contributing federal political committee. <b>C</b> C00097550				
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ 5000.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	12500.00
<b>TOTAL</b> 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 52 / 80
	(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 Fund

**A.** Full Name (Last, First, Middle Initial)  
WineandSpirits WholesalersofAmerica PAC

Mailing Address 805 Fifteenth Street NW  
Suite 430

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00147173

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 / 20 / 2007

Transaction ID: 1185379402040

Amount of Each Receipt this Period  
2500.00

Check

**B.** Full Name (Last, First, Middle Initial)  
Zeneca, Inc. PAC (formerly AstraZeneca)

Mailing Address 1800 Concord Pike  
PO Box 15438

City State Zip Code  
Wilmington DE 19850

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 21 / 2007

Transaction ID: 1172692153276

Amount of Each Receipt this Period  
5000.00

Check

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	7500.00
<b>TOTAL</b> This Period (last page this line number only) .....	228187.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 53 / 80	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Freedom Fund

**A.** Full Name (Last, First, Middle Initial)  
Mike Crapo for U.S. Senate

Mailing Address P.O. Box 1948

City State Zip Code  
Boise ID 83701

FEC ID number of contributing federal political committee. **C** C00330886

Name of Employer Occupation

Receipt For: 010"  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
844.80

Date of Receipt  

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

Transaction ID: 1179153328243

Amount of Each Receipt this Period  
844.80

Check

Reimbursement for airfare

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	844.80
<b>TOTAL</b> This Period (last page this line number only) .....	▶	844.80

**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 54 / 80

<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

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 Fund

Full Name (Last, First, Middle Initial) <b>A. Jake Ball</b>		<b>Transaction ID:</b> 1181764322062 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 1 / 2 0 0 7
Mailing Address 2237 E. Greenmeadow Ct.		Amount of Each Disbursement this Period 250.00
City Meridan State ID Zip Code 83642	Purpose of Disbursement PAC fundraising commission 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>B. Jake Ball</b>		<b>Transaction ID:</b> 1181766039701 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 1 / 2 0 0 7
Mailing Address 2237 E. Greenmeadow Ct.		Amount of Each Disbursement this Period 865.73
City Meridan State ID Zip Code 83642	Purpose of Disbursement PAC fundraising event expenses 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>C. Albertson's</b>		<b>Transaction ID:</b> 1181766272259 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 1 / 2 0 0 7
Mailing Address 6999 Jackrabbit Lane		Amount of Each Disbursement this Period 236.38
City Belgrade State MT Zip Code 59714	Purpose of Disbursement PAC supplies for fundraising event 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) ▼

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1115.73
<b>TOTAL</b> 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 55 / 80

<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 Fund

Full Name (Last, First, Middle Initial) <b>A. Enterprise Rent-A-Car</b>		<b>Transaction ID:</b> 1181766364726 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 1 / 2 0 0 7
Mailing Address 2123 First Avenue, North		Amount of Each Disbursement this Period 336.56
City Billings State MT Zip Code 59103	<b>[MEMO ITEM]</b>	
Purpose of Disbursement PAC rental car expense 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>B. Bank of America</b>		<b>Transaction ID:</b> 1173214522709 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 0 7
Mailing Address 1825 E Buckeye Rd		Amount of Each Disbursement this Period 736.30
City Phoenix State AZ Zip Code 85034	<b>[MEMO ITEM]</b>	
Purpose of Disbursement PAC reimbursement for fundraising event 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>C. Delta Airlines</b>		<b>Transaction ID:</b> 1185389668996 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 0 7
Mailing Address 1629 K St., NW Suite 501		Amount of Each Disbursement this Period 736.30
City Washington State DC Zip Code 20006	<b>[MEMO ITEM]</b>	
Purpose of Disbursement PAC traveling expense 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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	736.30
<b>TOTAL</b> 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 Fund

Full Name (Last, First, Middle Initial) <b>A. C2 Group</b>		<b>Transaction ID:</b> 1182890998099 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 03 / 12 / 2007
Mailing Address 101 Constitution Ave., NW Suite 900		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20001	In-kind contribution	
Purpose of Disbursement PAC in-kind contribution		Category/ Type 011
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>B. Mrs Susan Crapo</b>		<b>Transaction ID:</b> 1170084233216 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 01 / 26 / 2007
Mailing Address 2005 Charlotte Drive		Amount of Each Disbursement this Period 5000.00
City Idaho Falls State ID Zip Code 83402	Category/ Type 001	
Purpose of Disbursement PAC fundraising retainer 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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Mrs Susan Crapo</b>		<b>Transaction ID:</b> 1173124784776 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 03 / 05 / 2007
Mailing Address 2005 Charlotte Drive		Amount of Each Disbursement this Period 2500.00
City Idaho Falls State ID Zip Code 83402	Category/ Type 001	
Purpose of Disbursement PAC fundraising retainer 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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	8500.00
<b>TOTAL</b> 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 Fund

Full Name (Last, First, Middle Initial) <b>A. Mrs Susan Crapo</b>		<b>Transaction ID:</b> 1175182035970 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 2 8 / 2 0 0 7
Mailing Address 2005 Charlotte Drive		Amount of Each Disbursement this Period 2500.00
City Idaho Falls State ID Zip Code 83402	Purpose of Disbursement PAC fundraising retainer fee expense 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>B. Mrs Susan Crapo</b>		<b>Transaction ID:</b> 1175201059870 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 2 9 / 2 0 0 7
Mailing Address 2005 Charlotte Drive		Amount of Each Disbursement this Period 695.90
City Idaho Falls State ID Zip Code 83402	Purpose of Disbursement PAC mileage reimbursement 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>C. Mrs Susan Crapo</b>		<b>Transaction ID:</b> 1177093967320 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address 2005 Charlotte Drive		Amount of Each Disbursement this Period 2500.00
City Idaho Falls State ID Zip Code 83402	Purpose of Disbursement PAC fundraising retainer fee 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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5695.90
<b>TOTAL</b> 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)

PAGE 58 / 80

<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 Fund

Full Name (Last, First, Middle Initial) <b>A. Mrs Susan Crapo</b>		<b>Transaction ID: 1181682774032</b> Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2007
Mailing Address 2005 Charlotte Drive		Amount of Each Disbursement this Period 2500.00
City Idaho Falls State ID Zip Code 83402	Purpose of Disbursement PAC fundraising retainer expense 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>B. Mr Peter Fischer</b>		<b>Transaction ID: 1173210504946</b> Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2007
Mailing Address 236 F Street, NE		Amount of Each Disbursement this Period 44.50
City Washington State DC Zip Code 20002	Purpose of Disbursement PAC food and beverage 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>C. Mr Peter Fischer</b>		<b>Transaction ID: 1173301630467</b> Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2007
Mailing Address 236 F Street, NE		Amount of Each Disbursement this Period 1268.57
City Washington State DC Zip Code 20002	Purpose of Disbursement PAC traveling expenses, food and beverag 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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3813.07</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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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 Fund

Full Name (Last, First, Middle Initial) <b>A. Enterprise Rent-A-Car</b>		Transaction ID: 1173301977747 Date of Disbursement 03 / 05 / 2007
Mailing Address 1414 Hwy 6		Amount of Each Disbursement this Period 308.22
City Sugarland State TX Zip Code 77478	Purpose of Disbursement PAC traveling expenses 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]
Category/Type: 001		

Full Name (Last, First, Middle Initial) <b>B. Northwest Airlines</b>		Transaction ID: 1173301853409 Date of Disbursement 03 / 05 / 2007
Mailing Address 2700 Lone Oak Parkway		Amount of Each Disbursement this Period 893.69
City Eagan State MN Zip Code 55121	Purpose of Disbursement PAC traveling expenses 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]
Category/Type: 001		

Full Name (Last, First, Middle Initial) <b>C. Mr Peter Fischer</b>		Transaction ID: 1173303526902 Date of Disbursement 03 / 07 / 2007
Mailing Address 236 F Street, NE		Amount of Each Disbursement this Period 24.00
City Washington State DC Zip Code 20002	Purpose of Disbursement PAC 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) ▼	[MEMO ITEM]
Category/Type: 001		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	24.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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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 Fund

Full Name (Last, First, Middle Initial) <b>A. Mr Peter Fischer</b>		<b>Transaction ID: 1179946597961</b> Date of Disbursement 04 / 10 / 2007	
Mailing Address 236 F Street, NE		Amount of Each Disbursement this Period 46.50	
City Washington State DC Zip Code 20002	Purpose of Disbursement PAC food and beverage expense	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>B. Mr Peter Fischer</b>		<b>Transaction ID: 1181763502390</b> Date of Disbursement 04 / 19 / 2007	
Mailing Address 236 F Street, NE		Amount of Each Disbursement this Period 220.40	
City Washington State DC Zip Code 20002	Purpose of Disbursement PAC food and beverage	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>C. Monocle on Capitol Hill</b>		<b>Transaction ID: 1181763581154</b> Date of Disbursement 04 / 19 / 2007	
Mailing Address 1st & D Streets NE		Amount of Each Disbursement this Period 69.90	
City Washington State DC Zip Code 20515	Purpose of Disbursement PAC food and beverage expense	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) ▼		

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	266.90
<b>TOTAL</b> 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 Fund

Full Name (Last, First, Middle Initial) <b>A. U.S. Senate Restaurant</b>		<b>Transaction ID:</b> 1181763628763 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address First & C Streets NE		Amount of Each Disbursement this Period 60.50
City Washington State DC Zip Code 20510	[MEMO ITEM]	
Purpose of Disbursement PAC food and beverage 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>B. U.S. Senate Restaurant</b>		<b>Transaction ID:</b> 1181763677027 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address First & C Streets NE		Amount of Each Disbursement this Period 90.00
City Washington State DC Zip Code 20510	[MEMO ITEM]	
Purpose of Disbursement PAC food and beverage 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>C. Mr Peter Fischer</b>		<b>Transaction ID:</b> 1182805370496 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 5 / 2 0 0 7
Mailing Address 236 F Street, NE		Amount of Each Disbursement this Period 49.00
City Washington State DC Zip Code 20002	[MEMO ITEM]	
Purpose of Disbursement PAC travel reimbursement 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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	49.00
<b>TOTAL</b> 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 Fund

Full Name (Last, First, Middle Initial) <b>A. Denise Hoehne</b>		<b>Transaction ID:</b> 1177093916416 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address 5651 Northwall Place		Amount of Each Disbursement this Period 860.29
City Boise State ID Zip Code 83703	Purpose of Disbursement PAC mileage reimbursement 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>B. Denise Hoehne</b>		<b>Transaction ID:</b> 1182805324012 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 5 / 2 0 0 7
Mailing Address 5651 Northwall Place		Amount of Each Disbursement this Period 671.24
City Boise State ID Zip Code 83703	Purpose of Disbursement PAC mileage reimbursement 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>C. Lagana Printing</b>		<b>Transaction ID:</b> 1181682630477 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 7
Mailing Address 513 C Street NE		Amount of Each Disbursement this Period 2007.91
City Washington State DC Zip Code 20002	Purpose of Disbursement PAC printing for fundraising event 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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3539.44</b>
<b>TOTAL</b> 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 63 / 80

<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 Fund

Full Name (Last, First, Middle Initial) <b>A. Linda E. Daniel &amp; Associates</b>		<b>Transaction ID:</b> 1171476671572 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 1 8 / 2 0 0 7
Mailing Address 128 North Columbus St.		Amount of Each Disbursement this Period 5839.02
City Alexandria State VA Zip Code 22314	001 Category/ Type	
Purpose of Disbursement PAC fundraising fees and shipping expens Candidate Name		
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>B. The Caucus Room</b>		<b>Transaction ID:</b> 1171476782897 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 1 8 / 2 0 0 7
Mailing Address 401 9th Street NW		Amount of Each Disbursement this Period 250.00  <b>[MEMO ITEM]</b>
City Washington State DC Zip Code 20001	001 Category/ Type	
Purpose of Disbursement PAC rental for fundraising event Candidate Name		
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>C. Linda E. Daniel &amp; Associates</b>		<b>Transaction ID:</b> 1172694904074 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 7
Mailing Address 128 North Columbus St.		Amount of Each Disbursement this Period 7111.21
City Alexandria State VA Zip Code 22314	001 Category/ Type	
Purpose of Disbursement PAC fundraising retainer and commision Candidate Name		
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	12950.23
<b>TOTAL</b> 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 64 / 80

<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 Fund

<p><b>A.</b> Full Name (Last, First, Middle Initial) Linda E. Daniel &amp; Associates</p>		<p><b>Transaction ID:</b> 1174941264639 <b>Date of Disbursement</b></p>	
<p>Mailing Address 128 North Columbus St.</p>		<p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p>	
<p>City Alexandria State VA Zip Code 22314</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3000.00"/></p>		
<p>Purpose of Disbursement PAC fundraising retainer fee</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 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>	<p>State: District:</p>		

<p><b>B.</b> Full Name (Last, First, Middle Initial) Linda E. Daniel &amp; Associates</p>		<p><b>Transaction ID:</b> 1177441617809 <b>Date of Disbursement</b></p>	
<p>Mailing Address 128 North Columbus St.</p>		<p><input type="text" value="0"/> <input type="text" value="4"/> / <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>City Alexandria State VA Zip Code 22314</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="8826.21"/></p>		
<p>Purpose of Disbursement PAC fundraising retainer &amp; event expense</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 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>	<p>State: District:</p>		

<p><b>C.</b> Full Name (Last, First, Middle Initial) Johnny's Half Shell</p>		<p><b>Transaction ID:</b> 1177441757820 <b>Date of Disbursement</b></p>	
<p>Mailing Address 2002 P Street NW</p>		<p><input type="text" value="0"/> <input type="text" value="4"/> / <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>City Washington State DC Zip Code 20036</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1500.95"/></p>		
<p>Purpose of Disbursement PAC fundraising event expense</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 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>	<p>State: District:</p>		

[MEMO ITEM]

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="11826.21"/></p>
<p><b>TOTAL</b> 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)

<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 Fund

Full Name (Last, First, Middle Initial) <b>A. Rosa Mexicana</b>		Transaction ID: 1177441696713 Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2007
Mailing Address 575 7th St., NW		Amount of Each Disbursement this Period 2266.50
City Washington State DC Zip Code 20004	Purpose of Disbursement PAC fundraising event 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) ▼	[MEMO ITEM]
Category/Type: 001		

Full Name (Last, First, Middle Initial) <b>B. Linda E. Daniel &amp; Associates</b>		Transaction ID: 1179931183818 Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2007
Mailing Address 128 North Columbus St.		Amount of Each Disbursement this Period 5417.50
City Alexandria State VA Zip Code 22314	Purpose of Disbursement PAC fundraising retainer and travel 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]
Category/Type: 001		

Full Name (Last, First, Middle Initial) <b>C. Linda E. Daniel &amp; Associates</b>		Transaction ID: 1181764662415 Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2007
Mailing Address 128 North Columbus St.		Amount of Each Disbursement this Period 7861.17
City Alexandria State VA Zip Code 22314	Purpose of Disbursement PAC fundraising retainer fee & expenses 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]
Category/Type: 001		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	13278.67
<b>TOTAL</b> 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 66 / 80

<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 Fund

Full Name (Last, First, Middle Initial) <b>A. Linda E. Daniel &amp; Associates</b>		<b>Transaction ID: 1182282835240</b> Date of Disbursement 06 / 19 / 2007
Mailing Address 128 North Columbus St.		Amount of Each Disbursement this Period 5845.47
City Alexandria State VA Zip Code 22314	Purpose of Disbursement PAC fundraising retainer 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) ▼	001 Category/Type

Full Name (Last, First, Middle Initial) <b>B. Occasions Caterers</b>		<b>Transaction ID: 1168962753037</b> Date of Disbursement 01 / 12 / 2007
Mailing Address 5458 3rd Street, NE		Amount of Each Disbursement this Period 1638.53
City Washington State DC Zip Code 20011	Purpose of Disbursement PAC fundraising event 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) ▼	001 Category/Type

Full Name (Last, First, Middle Initial) <b>C. Progressive Distributions Incorporated</b>		<b>Transaction ID: 1177445284598</b> Date of Disbursement 04 / 02 / 2007
Mailing Address 9227 Hampton Overlook		Amount of Each Disbursement this Period 1407.73
City Capitol Heights State MD Zip Code 20743	Purpose of Disbursement PAC fundraising mailing 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) ▼	001 Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>8891.73</b>
<b>TOTAL</b> 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 67 / 80

<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 Fund

Full Name (Last, First, Middle Initial) <b>A. Progressive Distributions Incorporated</b>		<b>Transaction ID:</b> 1182282645697 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 9 / 2 0 0 7
Mailing Address 9227 Hampton Overlook		Amount of Each Disbursement this Period 1289.51
City Capitol Heights State MD Zip Code 20743	Purpose of Disbursement PAC copying and shipping expense Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) <b>B. Sun Valley Company</b>		<b>Transaction ID:</b> 1178736891426 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7
Mailing Address PO Box 10		Amount of Each Disbursement this Period 12547.83
City Sun Valley State ID Zip Code 83353	Purpose of Disbursement PAC fundraising event-food/hotel/beverag 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>C. Visa</b>		<b>Transaction ID:</b> 1171477015172 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 2 6 / 2 0 0 7
Mailing Address PO Box 15153		Amount of Each Disbursement this Period 827.99
City Wilmington State DE Zip Code 19886	Purpose of Disbursement PAC traveling and food expenses 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

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	14665.33
<b>TOTAL</b> 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)

PAGE 68 / 80

<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 Fund

Full Name (Last, First, Middle Initial) <b>A. Delta Airlines</b>		Transaction ID: 1171477072139 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 6 / 2 0 0 7
Mailing Address 1629 K St., NW Suite 501		Amount of Each Disbursement this Period 731.30
City Washington State DC Zip Code 20006	[MEMO ITEM]	
Purpose of Disbursement PAC traveling expense 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>B. Visa</b>		Transaction ID: 1173216489249 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 7
Mailing Address PO Box 15153		Amount of Each Disbursement this Period 781.60
City Wilmington State DE Zip Code 19886	[MEMO ITEM]	
Purpose of Disbursement PAC traveling expenses 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>C. Delta Airlines</b>		Transaction ID: 1173216578978 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 7
Mailing Address 1629 K St., NW Suite 501		Amount of Each Disbursement this Period 781.60
City Washington State DC Zip Code 20006	[MEMO ITEM]	
Purpose of Disbursement PAC traveling expenses 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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	781.60
<b>TOTAL</b> 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 69 / 80

<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 Fund

Full Name (Last, First, Middle Initial) <b>A. Visa</b>		<b>Transaction ID:</b> 1174594834758	
Mailing Address PO Box 15153		Date of Disbursement MM / DD / YYYY 03 / 19 / 2007	
City Wilmington	State DE	Zip Code 19886	Amount of Each Disbursement this Period 156.00
Purpose of Disbursement PAC food and beverage expense		001 Category/ Type	
Candidate Name			
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>B. Visa</b>		<b>Transaction ID:</b> 1181763192958	
Mailing Address PO Box 15153		Date of Disbursement MM / DD / YYYY 04 / 19 / 2007	
City Wilmington	State DE	Zip Code 19886	Amount of Each Disbursement this Period 230.40
Purpose of Disbursement PAC food and beverage expense		001 Category/ Type	
Candidate Name			
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>C. Monocle on Capitol Hill</b>		<b>Transaction ID:</b> 1181763324065	
Mailing Address 1st & D Streets NE		Date of Disbursement MM / DD / YYYY 04 / 19 / 2007	
City Washington	State DC	Zip Code 20515	Amount of Each Disbursement this Period 69.90
Purpose of Disbursement PAC food and beverage expense		001 Category/ Type	
Candidate Name			
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:			

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>386.40</b>
<b>TOTAL</b> 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 70 / 80

<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 Fund

Full Name (Last, First, Middle Initial) <b>A. Senators Dining Room</b>		Transaction ID: 1181763271926 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address Washington		Amount of Each Disbursement this Period 70.50
City Washington State DC Zip Code 20510	[MEMO ITEM]	
Purpose of Disbursement PAC food and beverage expense		001 Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Senators Dining Room</b>		Transaction ID: 1181763374174 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address Washington		Amount of Each Disbursement this Period 90.00
City Washington State DC Zip Code 20510	[MEMO ITEM]	
Purpose of Disbursement PAC food and beverage expense		001 Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Visa</b>		Transaction ID: 1181763759994 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 7
Mailing Address PO Box 15153		Amount of Each Disbursement this Period 1156.60
City Wilmington State DE Zip Code 19886	001 Category/Type	
Purpose of Disbursement PAC traveling 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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1156.60
<b>TOTAL</b> 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 Fund

Full Name (Last, First, Middle Initial) <b>A. Delta Airlines</b>		Transaction ID: 1181763930569 Date of Disbursement MM / DD / YYYY 06 / 12 / 2007
Mailing Address 1629 K St., NW Suite 501		Amount of Each Disbursement this Period 1126.60
City Washington State DC Zip Code 20006	Purpose of Disbursement PAC traveling expense 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) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. Visa</b>		Transaction ID: 1182282256423 Date of Disbursement MM / DD / YYYY 06 / 19 / 2007
Mailing Address PO Box 15153		Amount of Each Disbursement this Period 3479.75
City Wilmington State DE Zip Code 19886	Purpose of Disbursement PAC fundraising event expense 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>C. Eagle Ridge Ranch</b>		Transaction ID: 1182282389749 Date of Disbursement MM / DD / YYYY 06 / 19 / 2007
Mailing Address 3438 Old Shotgun Road		Amount of Each Disbursement this Period 1772.10
City Island Park State ID Zip Code 83429	Purpose of Disbursement PAC fundraising event expense 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) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3479.75
<b>TOTAL</b> 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 Fund

Full Name (Last, First, Middle Initial) <b>A. TroutHunter</b>		<b>Transaction ID:</b> 1182282306641 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 06 / 19 / 2007
Mailing Address 3327 N. Highway 20		Amount of Each Disbursement this Period 440.00
City Island Park State ID Zip Code 83429	[MEMO ITEM]	
Purpose of Disbursement PAC fundraising event expense 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>B. W. Millar &amp; Company</b>		<b>Transaction ID:</b> 1180556076323 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 05 / 30 / 2007
Mailing Address 1335 14th Street NW		Amount of Each Disbursement this Period 330.29
City Washington State ID Zip Code 20005	[MEMO ITEM]	
Purpose of Disbursement PAC fundraising event expense 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>C. Willard Intercontinental Hotel</b>		<b>Transaction ID:</b> 1179152495655 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 03 / 28 / 2007
Mailing Address Three Ravinia Drive Suite 2900		Amount of Each Disbursement this Period 249.22
City Atlanta State ID Zip Code 30346-2149	[MEMO ITEM]	
Purpose of Disbursement PAC fundraising event 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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	579.51
<b>TOTAL</b> 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 73 / 80

<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 Fund

Full Name (Last, First, Middle Initial) <b>A. Williams &amp; Jensen, PLLC</b>		<b>Transaction ID: 1172865470771</b>
Mailing Address 1155 21st Street NW Suite 300		Date of Disbursement MM / DD / YYYY 03 / 02 / 2007
City Washington	State DC	Amount of Each Disbursement this Period 4070.33
Zip Code 20036		
Purpose of Disbursement PAC legal retainer fee, copying and cour		001 Category/ Type
Candidate Name		
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>B. Williams and Jensen</b>		<b>Transaction ID: 1183752318743</b>
Mailing Address 1155 21st Street NW Suite 300		Date of Disbursement MM / DD / YYYY 06 / 19 / 2007
City Washington	State DC	Amount of Each Disbursement this Period 3104.61
Zip Code 20036		
Purpose of Disbursement PAC legal retainer fee and copying charg		001 Category/ Type
Candidate Name		
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>7174.94</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>98911.31</b>

**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 Fund

Full Name (Last, First, Middle Initial) <b>A. COLLINS FOR SENATOR</b>		Transaction ID: 1174677914297 Date of Disbursement 03 / 08 / 2007
Mailing Address PO BOX 1096		Amount of Each Disbursement this Period 5000.00
City BANGOR State ME Zip Code 04402	011 Category/ Type	
Purpose of Disbursement PAC political contribution		
Candidate Name Susan M. Collins		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ME District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. COLLINS FOR SENATOR</b>		Transaction ID: 1174677958967 Date of Disbursement 03 / 08 / 2007
Mailing Address PO BOX 1096		Amount of Each Disbursement this Period 5000.00
City BANGOR State ME Zip Code 04402	011 Category/ Type	
Purpose of Disbursement PAC political contribution		
Candidate Name Susan M. Collins		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ME District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Elizabeth Dole Committee, Inc.</b>		Transaction ID: 1174678060822 Date of Disbursement 03 / 08 / 2007
Mailing Address PO Box 2918		Amount of Each Disbursement this Period 5000.00
City Raleigh State NC Zip Code 27601	011 Category/ Type	
Purpose of Disbursement PAC political contribution		
Candidate Name Elizabeth Hanford Dole		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	15000.00
<b>TOTAL</b> 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 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 Fund

Full Name (Last, First, Middle Initial) <b>A. Elizabeth Dole Committee, Inc.</b>		Transaction ID: 1174678119319 Date of Disbursement 03 / 08 / 2007	
Mailing Address PO Box 2918		Amount of Each Disbursement this Period 5000.00	
City Raleigh State NC Zip Code 27601	Purpose of Disbursement PAC political contribution Candidate Name Elizabeth Hanford Dole	011 Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Gordon Smith for U.S. Senate Committee</b>		Transaction ID: 1174677265435 Date of Disbursement 03 / 08 / 2007	
Mailing Address 228 S. Washington Street Suite 115		Amount of Each Disbursement this Period 5000.00	
City Alexandria State VA Zip Code 22314	Purpose of Disbursement PAC political contribution Candidate Name Gordon H. Smith	011 Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Gordon Smith for U.S. Senate Committee</b>		Transaction ID: 1174677328776 Date of Disbursement 03 / 08 / 2007	
Mailing Address 228 S. Washington Street Suite 115		Amount of Each Disbursement this Period 5000.00	
City Alexandria State VA Zip Code 22314	Purpose of Disbursement PAC political contribution Candidate Name Gordon H. Smith	011 Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	15000.00
<b>TOTAL</b> 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 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 Fund

Full Name (Last, First, Middle Initial) <b>A. National Republican Senatorial Committee</b>		<b>Transaction ID:</b> 1173214265439 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 7
Mailing Address 425 2nd Street SE		Amount of Each Disbursement this Period 15000.00
City Washington State DC Zip Code 20002	Purpose of Disbursement PAC political contribution Candidate Name Category/Type 011	
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>B. Norm Coleman for U.S. Senate</b>		<b>Transaction ID:</b> 1174677626857 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 7
Mailing Address 1410 Energy Park Drive #11		Amount of Each Disbursement this Period 5000.00
City St. Paul State MN Zip Code 55108	Purpose of Disbursement PAC political contribution Candidate Name Norm Coleman Category/Type 011	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Norm Coleman for U.S. Senate</b>		<b>Transaction ID:</b> 1174677693510 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 7
Mailing Address 1410 Energy Park Drive #11		Amount of Each Disbursement this Period 5000.00
City St. Paul State MN Zip Code 55108	Purpose of Disbursement PAC political contribution Candidate Name Norm Coleman Category/Type 011	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	25000.00
<b>TOTAL</b> 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)

PAGE 77 / 80

<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 Fund

Full Name (Last, First, Middle Initial) <b>A. Pat Roberts for U.S. Senate</b>		Transaction ID: 1175202433871 Date of Disbursement 03 / 29 / 2007
Mailing Address P.O. Box 433		Amount of Each Disbursement this Period 5000.00
City Great Bend	State KS	
Zip Code 67530		
Purpose of Disbursement PAC political contribution		011 Category/ Type
Candidate Name Pat Roberts		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: KS District: 00		

Full Name (Last, First, Middle Initial) <b>B. Pat Roberts for U.S. Senate</b>		Transaction ID: 1175202477932 Date of Disbursement 03 / 29 / 2007
Mailing Address P.O. Box 433		Amount of Each Disbursement this Period 5000.00
City Great Bend	State KS	
Zip Code 67530		
Purpose of Disbursement PAC political contribution		011 Category/ Type
Candidate Name Pat Roberts		
Office Sought: <input type="checkbox"/> House <input checked="" 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: KS District: 00		

Full Name (Last, First, Middle Initial) <b>C. People for Pete Domenici Committee</b>		Transaction ID: 1180540287994 Date of Disbursement 05 / 29 / 2007
Mailing Address PO Box 93656		Amount of Each Disbursement this Period 5000.00
City Albuquerque	State NM	
Zip Code 87119		
Purpose of Disbursement PAC political contribution		011 Category/ Type
Candidate Name Pete V. Domenici		
Office Sought: <input type="checkbox"/> House <input checked="" 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: NM District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	15000.00
<b>TOTAL</b> 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 Fund

Full Name (Last, First, Middle Initial) <b>A. People for Pete Domenici Committee</b>		<b>Transaction ID:</b> 1180540336742 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 7
Mailing Address PO Box 93656		Amount of Each Disbursement this Period 5000.00
City Albuquerque State NM Zip Code 87119	011 Category/ Type	
Purpose of Disbursement PAC political contribution		
Candidate Name Pete V. Domenici		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NM District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Sali for Congress Committee</b>		<b>Transaction ID:</b> 1182438253082 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 7
Mailing Address PO Box 71		Amount of Each Disbursement this Period 5000.00
City Kuna State ID Zip Code 83634	011 Category/ Type	
Purpose of Disbursement PAC political contribution		
Candidate Name William Sali		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ID District: 01	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Sali for Congress Committee</b>		<b>Transaction ID:</b> 1182438290987 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 7
Mailing Address PO Box 71		Amount of Each Disbursement this Period 5000.00
City Kuna State ID Zip Code 83634	011 Category/ Type	
Purpose of Disbursement PAC political contribution		
Candidate Name William Sali		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ID District: 01	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	15000.00
<b>TOTAL</b> 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)

PAGE 79 / 80

<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 Fund

Full Name (Last, First, Middle Initial) <b>A. Team Sununu</b>		<b>Transaction ID:</b> 1174677157393 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 7
Mailing Address PO Box 500		Amount of Each Disbursement this Period 5000.00
City Rye State NH Zip Code 03870	011 Category/ Type	
Purpose of Disbursement PAC political contribution		
Candidate Name John E. Sununu		
Office Sought: <input type="checkbox"/> House <input checked="" 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: NH District:		

Full Name (Last, First, Middle Initial) <b>B. Team Sununu</b>		<b>Transaction ID:</b> 1174677212578 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 7
Mailing Address PO Box 500		Amount of Each Disbursement this Period 5000.00
City Rye State NH Zip Code 03870	011 Category/ Type	
Purpose of Disbursement PAC political contribution		
Candidate Name John E. Sununu		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NH District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	10000.00
<b>TOTAL</b> This Period (last page this line number only) .....	95000.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 80 / 80

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

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NAME OF COMMITTEE (In Full)  
Freedom Fund

Full Name (Last, First, Middle Initial) <b>A. International Council of Shopping Centers Inc. PAC</b>		Transaction ID: 1171571172003
Mailing Address 1033 N. Fairfax Street		Date of Disbursement 02 / 12 / 2007
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement PAC refund of contribution		Amount of Each Disbursement this Period 2500.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		001 Category/ Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	2500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	2500.00