

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

The Legacy Committee Political Action Committee

ADDRESS (number and street)

30011 Ivy Glenn Drive, Ste 223

☐ Check if different than previously reported. (ACC)

Laguna Niguel

CA

92677

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00429084

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☒ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

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

Type or Print Name of Treasurer James Lacy

Signature of Treasurer

James Lacy

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

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

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

The Legacy Committee Political Action Committee

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
10		01		2008

To:

M M	/	D D	/	Y Y Y Y Y
10		15		2008

	COLUMN A This Period	COLUMN B Calendar Year-to-Date															
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2008</td></tr></table>	Y	Y	Y	Y	Y	2008						<table><tr><td colspan="5">19507.91</td></tr></table>	19507.91				
Y	Y	Y	Y	Y													
2008																	
19507.91																	
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="5">33878.77</td></tr></table>	33878.77															
33878.77																	
(c) Total Receipts (from Line 19) .....	<table><tr><td colspan="5">89622.05</td></tr></table>	89622.05					<table><tr><td colspan="5">843086.19</td></tr></table>	843086.19									
89622.05																	
843086.19																	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="5">123500.82</td></tr></table>	123500.82					<table><tr><td colspan="5">862594.10</td></tr></table>	862594.10									
123500.82																	
862594.10																	
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="5">71441.77</td></tr></table>	71441.77					<table><tr><td colspan="5">810535.05</td></tr></table>	810535.05									
71441.77																	
810535.05																	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<table><tr><td colspan="5">52059.05</td></tr></table>	52059.05					<table><tr><td colspan="5">52059.05</td></tr></table>	52059.05									
52059.05																	
52059.05																	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE

## of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

The Legacy Committee Political Action Committee

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
10			01			2008			

To:

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2008			

**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

28937.50

776678.05

(ii) Unitemized .....

60684.55

60684.55

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

89622.05

837362.60

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

89622.05

837362.60

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

5000.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

723.59

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c)).....▶

89622.05

843086.19

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

89622.05

843086.19

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	11515.37	93538.64
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	11515.37	93538.64
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7000.00	7000.00
24. Independent Expenditures (use Schedule E) .....	40534.40	687651.41
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	5000.00	5000.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	7392.00	9512.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	7392.00	9512.00
29. Other Disbursements .....	0.00	7833.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	71441.77	810535.05
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	71441.77	810535.05

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	89622.05	837362.60
34. Total Contribution Refunds (from Line 28(d)) .....	7392.00	9512.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	82230.05	827850.60
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	11515.37	93538.64
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	11515.37	93538.64

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A-N5HCB  
.

Form/Schedule: F3XA  
Transaction ID :

Audit adjustments

Form/Schedule:  
Transaction ID:

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 7 OF 59

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

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NAME OF COMMITTEE (In Full)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. MRS BETTY A BERRY**

Mailing Address 23154 GAINFORD ST

City State Zip Code  
 WOODLAND HILLS CA 91364

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 01 2008

**Transaction ID : INCA4464**

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

## **B. MR ROBERT C COWEN**

Mailing Address 2756 INDIAN SPRINGS RD

City State Zip Code  
 MARIANNA FL 32446

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

599.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 01 2008

**Transaction ID : INCA4393**

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

## **C. MRS THERESA FIORENTINO**

Mailing Address 1515 HILL DR

City State Zip Code  
 LOS ANGELES CA 90041

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4712.12

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 01 2008

**Transaction ID : INCA4459**

Amount of Each Receipt this Period

100.00

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

500.00

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

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NAME OF COMMITTEE (In Full)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. MR DONALD R JONES**

Mailing Address 9 1/2 TROTTERS LN

City  
NANTUCKET

State  
MA

Zip Code  
2554

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WOODS HOLE STEAMSHIP AUTHORITY

Occupation

RETIRED TERMINAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 01 / 2008

**Transaction ID : INCA4350**

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**B. MRS ESTELLE LINDSEY**

Mailing Address 184 MOUNT CARMEL RD

City

PRENTISS

State

MS

Zip Code

39474

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 01 / 2008

**Transaction ID : INCA4410**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. MS LOUISE M RUCKER**

Mailing Address 3712 HEATH ST

City

GREENSBORO

State

NC

Zip Code

27401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1259.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 01 / 2008

**Transaction ID : INCA4374**

Amount of Each Receipt this Period

100.00

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

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

350.00



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

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NAME OF COMMITTEE (In Full)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. COL EDWIN S SCHICK JR**

Mailing Address 55056 COUNTRY CLUB DR  
PO BOX 997

City State Zip Code  
YUCCA VALLEY CA 92284

FEC ID number of contributing  
federal political committee.

C

Name of Employer

U.S.M.C.

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 01 / 2008

**Transaction ID : INCA4470**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. MS CATHERINE W DAWKINS**

Mailing Address 135 LAURELWOOD DR

City State Zip Code  
TYRONE GA 30290

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 02 / 2008

**Transaction ID : INCA4385**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. REV DON DERIVAUX**

Mailing Address 2440 BALLGROUND RD

City State Zip Code  
VICKSBURG MS 39183

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DIOCESE OF JACKSON

Occupation

RETIRED CATHOLIC PRIEST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 02 / 2008

**Transaction ID : INCA4406**

Amount of Each Receipt this Period

50.00

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

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

2570.00

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

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NAME OF COMMITTEE (In Full)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. MR WILLIAM E FRIPP JR**

Mailing Address 2224 SHADYVIEW DR

City  
CHARLOTTE

State Zip Code  
NC 28210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MOSELEY ARCHITECTS

Occupation  
RETIRED ARCHITECT/ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 02 / 2008

**Transaction ID : INCA4378**

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**B. MRS SUSAN H ISBELL**

Mailing Address 3051 MARTINTOWN RD

City  
EDGEFIELD

State Zip Code  
SC 29824

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 02 / 2008

**Transaction ID : INCA4382**

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**C. MRS SUSAN H ISBELL**

Mailing Address 3051 MARTINTOWN RD

City  
EDGEFIELD

State Zip Code  
SC 29824

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 02 / 2008

**Transaction ID : INCA4383**

Amount of Each Receipt this Period

100.00

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

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

500.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. MR ALVIN E LIEDSTRAND**

Mailing Address 1228 ROSSMOOR PKWY APT 123

City State Zip Code  
 WALNUT CREEK CA 94595

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 02 2008

**Transaction ID : INCA4477**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. MRS ESTELLE LINDSEY**

Mailing Address 184 MOUNT CARMEL RD

City State Zip Code  
 PRENTISS MS 39474

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 HOMEMAKER

Occupation  
 HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 02 2008

**Transaction ID : INCA4411**

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**C. MS WINIFRED F OETJEN**

Mailing Address 1201 GARFIELD AVE UNIT 214

City State Zip Code  
 ALBERT LEA MN 56007

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 02 2008

**Transaction ID : INCA4421**

Amount of Each Receipt this Period

175.00

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

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

350.00

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 12 OF 59

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

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NAME OF COMMITTEE (In Full)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. MR ROBERT SUNDERLAND**

Mailing Address 953 PYRITE AVE

City

HENDERSON

State

NV

Zip Code

89011

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

3560.00

Date of Receipt

10 / 02 / 2008

Transaction ID : INCA4456

Amount of Each Receipt this Period

175.00

Full Name (Last, First, Middle Initial)

**B. DR MAX G WALTER**

Mailing Address 1809 CROSSBOW

City

EDMOND

State

OK

Zip Code

73034

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OU HSC

Occupation

PHYSICIAN

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

10 / 02 / 2008

Transaction ID : INCA4433

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**C. MR JOHN D ADDISON**

Mailing Address 2005 RIDGE AVE N

City

TIFTON

State

GA

Zip Code

31794

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1145.00

Date of Receipt

10 / 03 / 2008

Transaction ID : INCA4389

Amount of Each Receipt this Period

25.00

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

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

400.00

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

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NAME OF COMMITTEE (In Full)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. MS FRANCES A BARR**

Mailing Address 1130 BURNS AVE

City State Zip Code  
CINCINNATI OH 45215

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

TEACHER/HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 03 / 2008

**Transaction ID : INCA4412**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. MRS BETTY A BERRY**

Mailing Address 23154 GAINFORD ST

City State Zip Code  
WOODLAND HILLS CA 91364

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 03 / 2008

**Transaction ID : INCA4465**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. MRS RUTH BUSSE**

Mailing Address 315 SPRING CREEK CIR

City State Zip Code  
SCHAUMBURG IL 60173

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 03 / 2008

**Transaction ID : INCA4424**

Amount of Each Receipt this Period

100.00

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

250.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. MR PHILIP O GEIER JR**

Mailing Address 6000 REDBIRD HOLLOW LN

City State Zip Code  
CINCINNATI OH 45243

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 03 / 2008

**Transaction ID : INCA4414**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. DR FRANCIS X HURLEY**

Mailing Address 113 CHARLESBERRY LN

City State Zip Code  
CHAPEL HILL NC 27517

FEC ID number of contributing  
federal political committee.

C

Name of Employer

U.S. ARMY RESEARCH OFFICE

Occupation

SCIENCE MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 03 / 2008

**Transaction ID : INCA4377**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. MRS CLAUDIA C SHANKS**

Mailing Address 4215 HARDING PIKE APT 310  
WINDSOR TOWERS

City State Zip Code  
NASHVILLE TN 37205

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 03 / 2008

**Transaction ID : INCA4402**

Amount of Each Receipt this Period

300.00

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

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

650.00

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

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NAME OF COMMITTEE (In Full)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. MR PERRY R SWANSON**

Mailing Address 1700 GRANDVIEW AVE APT 403

City

PITTSBURGH

State

PA

Zip Code

15211

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

10 / 03 / 2008

Transaction ID : INCA4365

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**B. MR JOHN COYNE JR**

Mailing Address 10 BERGEN AVE

City

VOORHEES

State

NJ

Zip Code

8043

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

700.00

Date of Receipt

10 / 06 / 2008

Transaction ID : INCA4354

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. MR SERGIO P DALMAU**

Mailing Address 600 GRAPETREE DR APT 7ES

City

KEY BISCAVNE

State

FL

Zip Code

33149

FEC ID number of contributing  
federal political committee.

C

Name of Employer

P.T.E. STRAND CO., INC.

Occupation

CIVIL ENGINEER/BUSINESS OWNER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

900.00

Date of Receipt

10 / 06 / 2008

Transaction ID : INCA4397

Amount of Each Receipt this Period

200.00

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

500.00

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

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

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NAME OF COMMITTEE (In Full)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. REV DON DERIVAUX**

Mailing Address 2440 BALLGROUND RD

City State Zip Code  
 VICKSBURG MS 39183

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DIOCESE OF JACKSON

Occupation

RETIRED CATHOLIC PRIEST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 06 2008

**Transaction ID : INCA4407**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **B. MRS GLENNIS E KOVACOVICH**

Mailing Address 94 PIONEER CT

City State Zip Code  
 SAN RAMON CA 94583

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 06 2008

**Transaction ID : INCA4475**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **C. MR ALVIN E LIEDSTRAND**

Mailing Address 1228 ROSSMOOR PKWY APT 123

City State Zip Code  
 WALNUT CREEK CA 94595

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 06 2008

**Transaction ID : INCA4478**

Amount of Each Receipt this Period

350.00

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

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

450.00



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NAME OF COMMITTEE (In Full)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. MS WINIFRED F OETJEN**

Mailing Address 1201 GARFIELD AVE UNIT 214

City State Zip Code  
 ALBERT LEA MN 56007

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 06 2008

Transaction ID : INCA4422

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. MR JOHN V RUY BARBOSA**

Mailing Address 13417 W CROWN RIDGE DR

City State Zip Code  
 SUN CITY WEST AZ 85375

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 06 2008

Transaction ID : INCA4452

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. MR DANIEL A SARVER**

Mailing Address 11956 FARLEY ST

City State Zip Code  
 OVERLAND PARK KS 66213

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SARVER WELLNESS, INC.

Occupation

SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 06 2008

Transaction ID : INCA4428

Amount of Each Receipt this Period

50.00

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

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

175.00

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

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NAME OF COMMITTEE (In Full)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. MR DANIEL A SARVER**

Mailing Address 11956 FARLEY ST

City

OVERLAND PARK

State

KS

Zip Code

66213

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SARVER WELLNESS, INC.

Occupation

SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 06 / 2008

Transaction ID : INCA4427

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**B. MR HARRY W SHADE**

Mailing Address 11701 W 21ST PL

City

LAKEWOOD

State

CO

Zip Code

80215

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

10 / 06 / 2008

Transaction ID : INCA4445

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. MR ROBERT SUNDERLAND**

Mailing Address 953 PYRITE AVE

City

HENDERSON

State

NV

Zip Code

89011

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3560.00

Date of Receipt

10 / 06 / 2008

Transaction ID : INCA4457

Amount of Each Receipt this Period

125.00

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

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

375.00

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

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NAME OF COMMITTEE (In Full)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. MRS MARTHA H TURNEY**

Mailing Address 1361 E BOOT RD # 265

City State Zip Code  
 WEST CHESTER PA 19380

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 06 2008

**Transaction ID : INCA4372**

Amount of Each Receipt this Period

190.00

Full Name (Last, First, Middle Initial)

**B. MR HENRY L WELLS**

Mailing Address 6018 MADRA AVE

City State Zip Code  
 SAN DIEGO CA 92120

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SAN DIEGO TRUCK CENTER

Occupation

RETIRED MECHANIC/HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 06 2008

**Transaction ID : INCA4468**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. CAPT JAMES E WESTFALL**

Mailing Address 1035 MAYFLOWER AVE

City State Zip Code  
 MELBOURNE FL 32940

FEC ID number of contributing  
federal political committee.

C

Name of Employer

U.S. NAVY

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 06 2008

**Transaction ID : INCA4396**

Amount of Each Receipt this Period

200.00

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

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

490.00

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

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NAME OF COMMITTEE (In Full)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. MRS ETHEL G BONNER**

Mailing Address 1224 VILLAGE CREEK LN APT P4

City State Zip Code  
MOUNT PLEASANT SC 29464

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

RETIRED/HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 07 / 2008

**Transaction ID : INCA4379**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **B. MR ROBERT F BUNN**

Mailing Address 1319 CARTER RD

City State Zip Code  
SACRAMENTO CA 95864

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 07 / 2008

**Transaction ID : INCA4486**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **C. MRS RUTH BUSSE**

Mailing Address 315 SPRING CREEK CIR

City State Zip Code  
SCHAUMBURG IL 60173

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 07 / 2008

**Transaction ID : INCA4425**

Amount of Each Receipt this Period

100.00

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

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

700.00

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

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NAME OF COMMITTEE (In Full)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. MR JOHN H GEIMAN**

Mailing Address 541 W WALNUT ST

City  
HANOVER

State Zip Code  
PA 17331

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3065.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 07 / 2008

Transaction ID : INCA4366

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. MRS ELLEN P HOAG**

Mailing Address 728 NORRISTOWN RD APT C110

City  
AMBLER

State Zip Code  
PA 19002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 07 / 2008

Transaction ID : INCA4369

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**C. MR GEORGE C KUNKEL**

Mailing Address 9552 HIGHEDGE DR

City  
DALLAS

State Zip Code  
TX 75238

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HUNT PETROLEUM CORP.

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 07 / 2008

Transaction ID : INCA4437

Amount of Each Receipt this Period

100.00

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

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

320.00

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

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NAME OF COMMITTEE (In Full)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. MS BARBARA MEEKER**

Mailing Address 9430 VIA SALERNO

City State Zip Code  
BURBANK CA 91504

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

PUBLIC SCHOOL TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 07 / 2008

Transaction ID : INCA4466

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**B. MR GAINES M CROOK**

Mailing Address 7568 CHAMINADE AVE

City State Zip Code  
CANOGA PARK CA 91304

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

ELECTRONICS ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 08 / 2008

Transaction ID : INCA4462

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. MS LOUISE M RUCKER**

Mailing Address 3712 HEATH ST

City State Zip Code  
GREENSBORO NC 27401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1259.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 08 / 2008

Transaction ID : INCA4375

Amount of Each Receipt this Period

75.00

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

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

375.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. MRS MARTHA SUMMERS**

Mailing Address 3177 S GRANT ST

City  
ENGLEWOOD

State Zip Code  
CO 80113

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

805.50

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 08 / 2008

Transaction ID : INCA4443

Amount of Each Receipt this Period

202.50

Full Name (Last, First, Middle Initial)

**B. MR HENRY L WELLS**

Mailing Address 6018 MADRA AVE

City  
SAN DIEGO

State Zip Code  
CA 92120

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SAN DIEGO TRUCK CENTER

Occupation

RETIRED MECHANIC/HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 08 / 2008

Transaction ID : INCA4469

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. MS MARY T BEATTIE**

Mailing Address PO BOX 297

City  
BRONXVILLE

State Zip Code  
NY 10708

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 09 / 2008

Transaction ID : INCA4358

Amount of Each Receipt this Period

50.00

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

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

352.50

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. MR JOHN COYNE JR**

Mailing Address 10 BERGEN AVE

City State Zip Code  
 VOORHEES NJ 8043

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 09 2008

**Transaction ID : INCA4355**

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**B. MR HARRY E KNOX JR**

Mailing Address 101 N WOODGREEN WAY

City State Zip Code  
 GREENVILLE SC 29615

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 09 2008

**Transaction ID : INCA4380**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. MR HARRY W SHADE**

Mailing Address 11701 W 21ST PL

City State Zip Code  
 LAKEWOOD CO 80215

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 09 2008

**Transaction ID : INCA4446**

Amount of Each Receipt this Period

50.00

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

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

350.00



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

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NAME OF COMMITTEE (In Full)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. LORAN F WILKENS**

Mailing Address 625 S MAIN ST

City  
HESSTON

State Zip Code  
KS 67062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 09 / 2008

Transaction ID : INCA4429

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. MR PHILIP O GEIER JR**

Mailing Address 6000 REDBIRD HOLLOW LN

City  
CINCINNATI

State Zip Code  
OH 45243

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 10 / 2008

Transaction ID : INCA4415

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. MRS ANNE M HARPER**

Mailing Address 85 SCOTTSDALE DR

City  
TROY

State Zip Code  
MI 48084

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

MUSIC TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 10 / 2008

Transaction ID : INCA4417

Amount of Each Receipt this Period

100.00

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

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

700.00

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

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NAME OF COMMITTEE (In Full)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. MR EUGENE J IDONE**

Mailing Address 75 HENRY ST

City

BROOKLYN

State

NY

Zip Code

11201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

926.00

Date of Receipt

10 / 10 / 2008

Transaction ID : INCA4361

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**B. DR MAX G WALTER**

Mailing Address 1809 CROSSBOW

City

EDMOND

State

OK

Zip Code

73034

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OU HSC

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

10 / 10 / 2008

Transaction ID : INCA4434

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. MR JOHN D ADDISON**

Mailing Address 2005 RIDGE AVE N

City

TIFTON

State

GA

Zip Code

31794

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1145.00

Date of Receipt

10 / 13 / 2008

Transaction ID : INCA4390

Amount of Each Receipt this Period

75.00

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

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

375.00

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

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NAME OF COMMITTEE (In Full)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. MRS NORA O BARNETT**

Mailing Address 143 N JANIN CIR

City State Zip Code  
 PORTLAND TX 78374

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 13 2008

**Transaction ID : INCA4441**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. MS FRANCES A BARR**

Mailing Address 1130 BURNS AVE

City State Zip Code  
 CINCINNATI OH 45215

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

TEACHER/HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 13 2008

**Transaction ID : INCA4413**

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**C. MS MARY T BEATTIE**

Mailing Address PO BOX 297

City State Zip Code  
 BRONXVILLE NY 10708

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 13 2008

**Transaction ID : INCA4359**

Amount of Each Receipt this Period

100.00

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

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

350.00

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

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NAME OF COMMITTEE (In Full)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. MR GEORGE W COMANICH**

Mailing Address 5104 TAMARACH DR

City

BAYTOWN

State

TX

Zip Code

77521

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

10 / 13 / 2008

Transaction ID : INCA4440

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B. COL PAUL D COPHER RET**

Mailing Address 9032 E 33RD PL

City

TUCSON

State

AZ

Zip Code

85710

FEC ID number of contributing  
federal political committee.

C

Name of Employer

U.S. AIR FORCE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

10 / 13 / 2008

Transaction ID : INCA4454

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**C. MS CATHERINE W DAWKINS**

Mailing Address 135 LAURELWOOD DR

City

TYRONE

State

GA

Zip Code

30290

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

10 / 13 / 2008

Transaction ID : INCA4387

Amount of Each Receipt this Period

100.00

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

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

600.00

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

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NAME OF COMMITTEE (In Full)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. MS CATHERINE W DAWKINS**

Mailing Address 135 LAURELWOOD DR

City  
TYRONE

State Zip Code  
GA 30290

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 13 / 2008

**Transaction ID : INCA4386**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **B. REV DON DERIVAUX**

Mailing Address 2440 BALLGROUND RD

City  
VICKSBURG

State Zip Code  
MS 39183

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DIOCESE OF JACKSON

Occupation

RETIRED CATHOLIC PRIEST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 13 / 2008

**Transaction ID : INCA4408**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **C. MISS IOLA M EBENDORF**

Mailing Address 120 S CLIFTON ST

City  
BRUSH

State Zip Code  
CO 80723

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 13 / 2008

**Transaction ID : INCA4448**

Amount of Each Receipt this Period

100.00

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

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

300.00

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

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NAME OF COMMITTEE (In Full)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. MR JOHN H GEIMAN**

Mailing Address 541 W WALNUT ST

City State Zip Code  
HANOVER PA 17331

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3065.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 13 / 2008

**Transaction ID : INCA4367**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. MS JOYCE B HEINRICH**

Mailing Address 1148 BAYBERRY DR RM 109

City State Zip Code  
WATERTOWN WI 53098

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 13 / 2008

**Transaction ID : INCA4419**

Amount of Each Receipt this Period

3950.00

Full Name (Last, First, Middle Initial)

**C. MR DONALD R JONES**

Mailing Address 9 1/2 TROTTERS LN

City State Zip Code  
NANTUCKET MA 2554

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WOODS HOLE STEAMSHIP AUTHORITY

Occupation

RETIRED TERMINAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 13 / 2008

**Transaction ID : INCA4351**

Amount of Each Receipt this Period

300.00

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

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

4300.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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<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)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. MR DONALD R JONES**

Mailing Address 9 1/2 TROTTERS LN

City  
NANTUCKETState  
MAZip Code  
2554FEC ID number of contributing  
federal political committee.

C

Name of Employer

WOODS HOLE STEAMSHIP AUTHORITY

Occupation

RETIRED TERMINAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2008

Transaction ID : INCA4352

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. MR LLOYD E MC KEMEY**

Mailing Address 5109 NE 44TH ST

City  
KANSAS CITYState  
MOZip Code  
64117FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

MINISTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2068.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2008

Transaction ID : INCA4426

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. MS MARIE J PAPILLON**

Mailing Address 16426 NE 31ST AVE

City  
NORTH MIAMI BEACHState  
FLZip Code  
33160FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2008

Transaction ID : INCA4399

Amount of Each Receipt this Period

300.00

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

900.00

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. MS VERONA LEE PATRICK**

Mailing Address 1810 E DIVISION ST APT 208

City State Zip Code  
MOUNT VERNON WA 98274

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 13 / 2008

**Transaction ID : INCA4490**

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**B. MR HARRY W SHADE**

Mailing Address 11701 W 21ST PL

City State Zip Code  
LAKEWOOD CO 80215

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 13 / 2008

**Transaction ID : INCA4447**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. MRS ALICE E SUMIDA**

Mailing Address 2309 SW 1ST AVE APT 1545

City State Zip Code  
PORTLAND OR 97201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 13 / 2008

**Transaction ID : INCA4488**

Amount of Each Receipt this Period

1000.00

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

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

1300.00



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

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NAME OF COMMITTEE (In Full)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. MR ROBERT SUNDERLAND**

Mailing Address 953 PYRITE AVE

City State Zip Code  
 HENDERSON NV 89011

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3560.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 13 2008

**Transaction ID : INCA4458**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. MS ELIZABETH WISKEMANN**

Mailing Address 357 HIGHLAND AVE

City State Zip Code  
 SAN RAFAEL CA 94901

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 13 2008

**Transaction ID : INCA4479**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. MR JOHN D ADDISON**

Mailing Address 2005 RIDGE AVE N

City State Zip Code  
 TIFTON GA 31794

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1145.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 14 2008

**Transaction ID : INCA4391**

Amount of Each Receipt this Period

25.00

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

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

625.00

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

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NAME OF COMMITTEE (In Full)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. MR WILLIAM J CARTER**

Mailing Address 4700 LAVISTA RD

City  
TUCKER

State Zip Code  
GA 30084

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 14 / 2008

**Transaction ID : INCA4384**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. MRS GRACE K COHANE**

Mailing Address 3335 UTOPIA PKWY

City  
FLUSHING

State Zip Code  
NY 11358

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 14 / 2008

**Transaction ID : INCA4362**

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**C. MR JOHN COYNE JR**

Mailing Address 10 BERGEN AVE

City  
VOORHEES

State Zip Code  
NJ 8043

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 14 / 2008

**Transaction ID : INCA4356**

Amount of Each Receipt this Period

200.00

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

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

1400.00

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

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NAME OF COMMITTEE (In Full)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. MR GAINES M CROOK**

Mailing Address 7568 CHAMINADE AVE

City State Zip Code  
 CANOGA PARK CA 91304

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

ELECTRONICS ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 14 2008

**Transaction ID : INCA4463**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. REV DON DERIVAUX**

Mailing Address 2440 BALLGROUND RD

City State Zip Code  
 VICKSBURG MS 39183

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DIOCESE OF JACKSON

Occupation

RETIRED CATHOLIC PRIEST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 14 2008

**Transaction ID : INCA4409**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. MR JOHN H GEIMAN**

Mailing Address 541 W WALNUT ST

City State Zip Code  
 HANOVER PA 17331

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3065.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 14 2008

**Transaction ID : INCA4368**

Amount of Each Receipt this Period

200.00

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

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

350.00

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

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NAME OF COMMITTEE (In Full)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. MRS REBECCA P IVANS**

Mailing Address 807 LA JOLLA RANCHO RD

City State Zip Code  
LA JOLLA CA 92037

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 14 2008

**Transaction ID : INCA4467**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

## **B. MR HARRY E KNOX JR**

Mailing Address 101 N WOODGREEN WAY

City State Zip Code  
GREENVILLE SC 29615

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 14 2008

**Transaction ID : INCA4381**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **C. MR GEORGE C KUNKEL**

Mailing Address 9552 HIGHEDGE DR

City State Zip Code  
DALLAS TX 75238

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HUNT PETROLEUM CORP.

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 14 2008

**Transaction ID : INCA4439**

Amount of Each Receipt this Period

100.00

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

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

1200.00

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

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NAME OF COMMITTEE (In Full)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. MR GEORGE C KUNKEL**

Mailing Address 9552 HIGHEDGE DR

City State Zip Code  
DALLAS TX 75238

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HUNT PETROLEUM CORP.

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 14 / 2008

**Transaction ID : INCA4438**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. MRS JOY G LEDBETTER**

Mailing Address 626 W WASHINGTON AVE

City State Zip Code  
JONESBORO AR 72401

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 14 / 2008

**Transaction ID : INCA4432**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. MR HENRY L LEONARDI**

Mailing Address 432 CALLE DE LA MESA

City State Zip Code  
NOVATO CA 94949

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LEONARDI PROPERTIES

Occupation  
PROPERTY MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1190.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 14 / 2008

**Transaction ID : INCA4480**

Amount of Each Receipt this Period

100.00

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

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

1200.00

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

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NAME OF COMMITTEE (In Full)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. MS LOUISE M RUCKER**

Mailing Address 3712 HEATH ST

City Greensboro State NC Zip Code 27401

FEC ID number of contributing federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1259.00

Date of Receipt

10 / 14 / 2008

Transaction ID : INCA4376

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**B. MR JOHN V RUY BARBOSA**

Mailing Address 13417 W CROWN RIDGE DR

City Sun City West State AZ Zip Code 85375

FEC ID number of contributing federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

10 / 14 / 2008

Transaction ID : INCA4453

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. MRS MARTHA SUMMERS**

Mailing Address 3177 S GRANT ST

City Englewood State CO Zip Code 80113

FEC ID number of contributing federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

805.50

Date of Receipt

10 / 14 / 2008

Transaction ID : INCA4444

Amount of Each Receipt this Period

300.00

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

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

475.00

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

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NAME OF COMMITTEE (In Full)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. MRS MARTHA H TURNEY**

Mailing Address 1361 E BOOT RD # 265

City State Zip Code  
 WEST CHESTER PA 19380

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 14 2008

**Transaction ID : INCA4373**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. MR JAMES F VAN VALKENBURG**

Mailing Address 535 GRADYVILLE RD # B125

City State Zip Code  
 NEWTOWN SQUARE PA 19073

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 14 2008

**Transaction ID : INCA4371**

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**C. MR JOHN D ADDISON**

Mailing Address 2005 RIDGE AVE N

City State Zip Code  
 TIFTON GA 31794

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1145.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 15 2008

**Transaction ID : INCA4392**

Amount of Each Receipt this Period

75.00

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

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

375.00

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

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NAME OF COMMITTEE (In Full)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. MRS NORA O BARNETT**

Mailing Address 143 N JANIN CIR

City  
PORTLAND

State Zip Code  
TX 78374

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 15 / 2008

Transaction ID : INCA4442

Amount of Each Receipt this Period

130.00

Full Name (Last, First, Middle Initial)

**B. MS MARY T BEATTIE**

Mailing Address PO BOX 297

City  
BRONXVILLE

State Zip Code  
NY 10708

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 15 / 2008

Transaction ID : INCA4360

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**C. MS MARY B BOSTICK**

Mailing Address 2528 NE HERITAGE CREEK DR

City  
LAWTON

State Zip Code  
OK 73507

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

HOMEMAKER

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 15 / 2008

Transaction ID : INCA4435

Amount of Each Receipt this Period

500.00

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

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

780.00



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

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NAME OF COMMITTEE (In Full)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. MR ROBERT F BUNN**

Mailing Address 1319 CARTER RD

City State Zip Code  
 SACRAMENTO CA 95864

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 15 2008

**Transaction ID : INCA4487**

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B. MR SOLOMON COOK**

Mailing Address 303 STATE ROUTE 37

City State Zip Code  
 HOGANSBURG NY 13655

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 15 2008

**Transaction ID : INCA4364**

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

**C. MR SERGIO P DALMAU**

Mailing Address 600 GRAPETREE DR APT 7ES

City State Zip Code  
 KEY BISCAINE FL 33149

FEC ID number of contributing  
federal political committee.

C

Name of Employer

P.T.E. STRAND CO., INC.

Occupation

CIVIL ENGINEER/BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 15 2008

**Transaction ID : INCA4398**

Amount of Each Receipt this Period

300.00

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

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

950.00

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

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NAME OF COMMITTEE (In Full)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. MISS IOLA M EBENDORF**

Mailing Address 120 S CLIFTON ST

City  
BRUSH

State  
CO

Zip Code  
80723

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 15 / 2008

Transaction ID : INCA4449

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**B. MRS THERESA FIORENTINO**

Mailing Address 1515 HILL DR

City

LOS ANGELES

State

CA

Zip Code

90041

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4712.12

Date of Receipt

10 / 15 / 2008

Transaction ID : INCA4460

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. MRS ANNE M HARPER**

Mailing Address 85 SCOTTSDALE DR

City

TROY

State

MI

Zip Code

48084

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

MUSIC TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2550.00

Date of Receipt

10 / 15 / 2008

Transaction ID : INCA4418

Amount of Each Receipt this Period

200.00

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

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

500.00

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

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NAME OF COMMITTEE (In Full)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. MRS ELLEN P HOAG**

Mailing Address 728 NORRISTOWN RD APT C110

City State Zip Code  
 AMBLER PA 19002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 15 2008

**Transaction ID : INCA4370**

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**B. MS CHRISTINE T HOWCROFT**

Mailing Address 155 FIRE TOWER RD

City State Zip Code  
 SOMERVILLE TN 38068

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GSN TRUCKING INC

Occupation

TRUCK DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 15 2008

**Transaction ID : INCA4403**

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**C. MR JAMES S KERNAN JR**

Mailing Address 273 CLINTON ST

City State Zip Code  
 WHITESBORO NY 13492

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 15 2008

**Transaction ID : INCA4363**

Amount of Each Receipt this Period

350.00

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

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

850.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 44 OF 59

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

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NAME OF COMMITTEE (In Full)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. MRS GLENNIS E KOVACOVICH**

Mailing Address 94 PIONEER CT

City

SAN RAMON

State

CA

Zip Code

94583

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 15 / 2008

Transaction ID : INCA4476

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**B. MR HENRY L LEONARDI**

Mailing Address 432 CALLE DE LA MESA

City

NOVATO

State

CA

Zip Code

94949

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LEONARDI PROPERTIES

Occupation

PROPERTY MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1190.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 15 / 2008

Transaction ID : INCA4481

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. MR HENRY L LEONARDI**

Mailing Address 432 CALLE DE LA MESA

City

NOVATO

State

CA

Zip Code

94949

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LEONARDI PROPERTIES

Occupation

PROPERTY MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1190.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 15 / 2008

Transaction ID : INCA4482

Amount of Each Receipt this Period

50.00

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

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

350.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. MRS MARILYN PAOLICELLI**

Mailing Address 1043 SOLDIER HILL RD

City  
ORADELL

State  
NJ

Zip Code  
7649

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 15 / 2008

**Transaction ID : INCA4353**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. MS VERONA LEE PATRICK**

Mailing Address 1810 E DIVISION ST APT 208

City

MOUNT VERNON

State

WA

Zip Code

98274

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 15 / 2008

**Transaction ID : INCA4491**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. MR WILLIAM T RASMUSSEN**

Mailing Address 13935 PEARL LN

City

MORENO VALLEY

State

CA

Zip Code

92555

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 15 / 2008

**Transaction ID : INCA4471**

Amount of Each Receipt this Period

200.00

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

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

800.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. LORAN F WILKENS**

Mailing Address 625 S MAIN ST

City  
HESSTON

State Zip Code  
KS 67062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 15 / 2008

Transaction ID : INCA4430

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

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

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

600.00

28937.50

<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

## The Legacy Committee Political Action Committee

2376.46

5000.00

1282.50

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. Western Conservative Political Action Conference**

Mailing Address 30011 Ivy Glenn Dr. #223

City Laguna Niguel State CA Zip Code 92677

Purpose of Disbursement  
Conservative action conference event fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 10 / 2008

**Transaction ID : EXPB2517**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

## **B. Bank of America**

Mailing Address PO Box 37176

City San Francisco State CA Zip Code 94137

Purpose of Disbursement  
Merchant & Bank Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 15 / 2008

**Transaction ID : EXPB5347**

Amount of Each Disbursement this Period

856.41

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

2856.41

11515.37



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 49 OF 59

<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)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Committee To Re-Elect Congressman Dana Rohrabacher**

Mailing Address 101 Main Street, Suite 380

City	State	Zip Code
Huntington Beach	CA	92648

Purpose of Disbursement  
Contribution

011

Candidate Name

**Dana Rohrabacher**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input 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: CA District: 46

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2008

**Transaction ID : EXPB2532**

Amount of Each Disbursement this Period

										2000.00
--	--	--	--	--	--	--	--	--	--	---------

Full Name (Last, First, Middle Initial)

**B. John McCain for President 2008**

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement  
Contribution

011

Candidate Name

**John McCain**Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input checked="" type="checkbox"/> President

Disbursement For: 2008

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2008

**Transaction ID : EXPB2527**

Amount of Each Disbursement this Period

										5000.00
--	--	--	--	--	--	--	--	--	--	---------

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

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:

Date of Disbursement

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

Amount of Each Disbursement this Period

--	--	--	--	--	--	--	--	--	--

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

										7000.00
--	--	--	--	--	--	--	--	--	--	---------

										7000.00
--	--	--	--	--	--	--	--	--	--	---------

# **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)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☒ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. National Campaign Fund**

Mailing Address 30011 Ivy Glenn Drive, Ste 223

City Laguna Niguel State CA Zip Code 92677

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 10 / 2008

**Transaction ID : PAYB2526**

Amount of Each Disbursement this Period

5000.00

## **B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

## **C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

5000.00

5000.00

	21b		22		23		24		25		26
	27	X	28a		28b		28c		29		30b

# The Legacy Committee Political Action Committee

**A. MRS VIRGINIA H BARNES**

Three 7-segment displays are shown, each with a different number of segments lit. The first display shows '10' with 4 segments lit (top, bottom, left, right). The second display shows '15' with 5 segments lit (top, bottom, left, right, and the middle horizontal segment). The third display shows '2008' with 7 segments lit (all segments except the top-left one). The displays are separated by slashes.

010

2099.00

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Full Name (Last, First, Middle Initial)

### B. MS RHODA W COBB

Three 16x16 LED displays are shown, each displaying a number. The first display shows '10', the second shows '15', and the third shows '2008'. Each display has a 4x4 grid of segments at the top, with the first two displays having 'M' and 'D' labels above their respective grids, and the third display having 'Y' labels above its grid. The displays are connected to a common ground and a common power supply.

Mailing Address 7 STUYVESANT RD

City	State	Zip Code
ASHEVILLE	NC	28803

Purpose of Disbursement	Returned Contribution

010

Transaction ID : EXPB5363

Amount of Each Disbursement this Period

800.00

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

Full Name (Last, First, Middle Initial)

**C. MRS WANDA CRAWLEY**

Date of Disbursement

Three 7-segment displays are shown, each with a different number of segments lit. The first display shows '10' with 4 segments lit. The second display shows '15' with 5 segments lit. The third display shows '2008' with 7 segments lit. The displays are separated by slashes.

Mailing Address 1213 PRESTWICKE DR

City	State	Zip Code
HERRIN	IL	62948

[illegible]

010

Transaction ID : EXPB5365

Amount of Each Disbursement this Period

649.00

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

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

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

3548.00

# **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 52 OF 59

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☒ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**The Legacy Committee Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. MRS MARY L MELTZER**

Mailing Address 14 EDGECOMB RD

City BINGHAMTON State NY Zip Code 13905

Purpose of Disbursement  
Returned Contribution

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
 State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
 10 15 2008

**Transaction ID : EXPB5362**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. MR FRANK K OSHITA**

Mailing Address 533 PALMA DR

City SALINAS State CA Zip Code 93901

Purpose of Disbursement  
Returned Contribution

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
 State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
 10 15 2008

**Transaction ID : EXPB5364**

Amount of Each Disbursement this Period

2350.00

Full Name (Last, First, Middle Initial)

**C. MR Z K STRZALKOWSKI**

Mailing Address 6 DANDELION DR

City BOILING SPRINGS State PA Zip Code 17007

Purpose of Disbursement  
Returned Contribution

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
 State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
 10 15 2008

**Transaction ID : EXPB5360**

Amount of Each Disbursement this Period

494.00

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

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

3844.00

7392.00

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 53 OF 59

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : PAYC1604

The Legacy Committee Political Action Committee

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

National Campaign Fund

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 30011 Ivy Glenn Drive, Ste 223

City Laguna Niguel

State CA

ZIP Code 92677

Original Amount of Loan

5000.00

Cumulative Payment To Date

5000.00

Balance Outstanding at Close of This Period

0.00

**TERMS**

Date Incurred

MM / DD / YYYY  
06 / 06 / 2008

Date Due

MM / DD / YYYY  
None

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

0.00

**TOTALS** This Period (last page in this line only)..... ►

0.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

 PAGE 54 OF 59  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>The Legacy Committee Political Action Committee</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00429084       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>		

Full Name (Last, First, Middle Initial) of Payee <b>Direct Response Data</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 06 / 2008	
Mailing Address 2070 Chain Bridge Road, Suite 520		Amount <span style="border: 1px solid black; padding: 2px;">993.23</span>	
City Vienna	State VA	Zip Code 22182	Transaction ID : EDTEALC277
Purpose of Expenditure Data Entry	Category/ Type 003	Office Sought: <input type="checkbox"/> House    State: _____ <input type="checkbox"/> Senate    District: _____ <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: John McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2008 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">597122.11</span>			

Full Name (Last, First, Middle Initial) of Payee <b>Fulfillment Management</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 06 / 2008	
Mailing Address 2070 Chain Bridge Rd., Ste 520		Amount <span style="border: 1px solid black; padding: 2px;">3935.70</span>	
City Vienna	State CA	Zip Code 22182	Transaction ID : EDTEALC278
Purpose of Expenditure Mailings	Category/ Type 003	Office Sought: <input type="checkbox"/> House    State: _____ <input type="checkbox"/> Senate    District: _____ <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: John McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2008 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">597122.11</span>			

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">4928.93</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

James Lacy

[Electronically Filed]

Date

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 10 / 19 / 2011

Signature

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

 PAGE 55 OF 59  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>The Legacy Committee Political Action Committee</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00429084       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>		

Full Name (Last, First, Middle Initial) of Payee <b>Mid America Printing</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 06 / 2008	
Mailing Address 2070 Chain Bridge Road, Suite 520		Amount <span style="border: 1px solid black; padding: 2px;">5387.56</span>	
City Vienna	State VA	Zip Code 22182	Transaction ID : <b>EDTEALC275</b>
Purpose of Expenditure Printing	Category/ Type <span style="border: 1px solid black; padding: 2px;">003</span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: John McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">597122.11</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>Response Dynamics, Inc.</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 06 / 2008	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount <span style="border: 1px solid black; padding: 2px;">3818.64</span>	
City Vienna	State VA	Zip Code 22182	Transaction ID : <b>EDTEALC276</b>
Purpose of Expenditure Postage	Category/ Type <span style="border: 1px solid black; padding: 2px;">003</span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: John McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">597122.11</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">9206.20</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

James Lacy

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 19 / 2011

Signature

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

 PAGE 56 OF 59  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>The Legacy Committee Political Action Committee</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00429084         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M / D D / Y Y Y Y Y Y         </div>	

Full Name (Last, First, Middle Initial) of Payee <b>OC Rep. Leadership Voter Guide</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M / D D / Y Y Y Y Y Y         </div>
Mailing Address 30011 Ivy Glenn Dr. #223		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           5000.00         </div>
City Laguna Niguel	State CA	
Purpose of Expenditure Advertising	Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: John McCain		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">           597122.11         </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2008 <input type="checkbox"/> Other (specify) _____

Transaction ID : EDTEALC280

Full Name (Last, First, Middle Initial) of Payee <b>Save Proposition 13</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M / D D / Y Y Y Y Y Y         </div>
Mailing Address 30011 Ivy Glenn Dr. #223		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           15000.00         </div>
City Laguna Niguel	State CA	
Purpose of Expenditure Advertising	Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: John McCain		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">           597122.11         </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2008 <input type="checkbox"/> Other (specify) _____

Transaction ID : EDTEALC279

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">20000.00</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;"> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

James Lacy

Signature

[Electronically Filed]

Date

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



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

 PAGE 57 OF 59  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>The Legacy Committee Political Action Committee</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00429084       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>		

Full Name (Last, First, Middle Initial) of Payee <b>Direct Response Data</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 13 / 2008	
Mailing Address 2070 Chain Bridge Road, Suite 520		Amount <span style="border: 1px solid black; padding: 2px;">1606.79</span>	
City Vienna	State VA	Zip Code 22182	<b>Transaction ID : EDTEALC281</b>
Purpose of Expenditure Data Entry	Category/ Type 003	Office Sought: <input type="checkbox"/> House    State: _____ <input type="checkbox"/> Senate    District: _____ <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: John McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2008 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">597122.11</span>			

Full Name (Last, First, Middle Initial) of Payee <b>Fulfillment Management</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 13 / 2008	
Mailing Address 2070 Chain Bridge Rd., Ste 520		Amount <span style="border: 1px solid black; padding: 2px;">1445.51</span>	
City Vienna	State CA	Zip Code 22182	<b>Transaction ID : EDTEALC282</b>
Purpose of Expenditure Mailings	Category/ Type 003	Office Sought: <input type="checkbox"/> House    State: _____ <input type="checkbox"/> Senate    District: _____ <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: John McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2008 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">597122.11</span>			

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">3052.30</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

James Lacy

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 19 / 2011

Signature

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

 PAGE 58 OF 59  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>The Legacy Committee Political Action Committee</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00429084       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>		

Full Name (Last, First, Middle Initial) of Payee <b>Mid America Printing</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 13 / 2008	
Mailing Address 2070 Chain Bridge Road, Suite 520		Amount <span style="border: 1px solid black; padding: 2px;">516.81</span>	
City Vienna	State VA	Zip Code 22182	<b>Transaction ID : EDTEALC283</b> Office Sought: <input type="checkbox"/> House    State: _____ <input type="checkbox"/> Senate    District: _____ <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Purpose of Expenditure Printing		Category/ Type <span style="border: 1px solid black; padding: 2px;">003</span>	
Name of Federal Candidate Supported or Opposed by Expenditure: John McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2008 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">597122.11</span>			

Full Name (Last, First, Middle Initial) of Payee <b>Response Dynamics, Inc.</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 13 / 2008	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount <span style="border: 1px solid black; padding: 2px;">2712.36</span>	
City Vienna	State VA	Zip Code 22182	<b>Transaction ID : EDTEALC284</b> Office Sought: <input type="checkbox"/> House    State: _____ <input type="checkbox"/> Senate    District: _____ <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Purpose of Expenditure Postage	Category/ Type <span style="border: 1px solid black; padding: 2px;">003</span>		
Name of Federal Candidate Supported or Opposed by Expenditure: John McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2008 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">597122.11</span>			

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">3229.17</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

James Lacy

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 19 / 2011

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 59 OF 59  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>The Legacy Committee Political Action Committee</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00429084
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee <b>The Best List, Inc.</b>		Date MM / DD / YYYY 10 / 13 / 2008
Mailing Address 2070 Chain Bridge Rd., suite 520		Amount 117.80
City Vienna	State VA	
Purpose of Expenditure Lists	Category/ Type 003	Transaction ID : EDTEALC285
Name of Federal Candidate Supported or Opposed by Expenditure: John McCain		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 597122.11		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2008 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee		Date MM / DD / YYYY
Mailing Address		Amount
City	State	
Purpose of Expenditure	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	117.80
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures.....	40534.40

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

James Lacy

[Electronically Filed]

Date

MM / DD / YYYY  
10 / 19 / 2011

Signature