



**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Fund for Americas Future

Report Covering the Period: From: 

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		3265.07
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	16039.55									
(c) Total Receipts (from Line 19) .....	23500.00	133761.02								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	39539.55	137026.09								
7. Total Disbursements (from Line 31) .....	17603.97	115090.51								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	21935.58	21935.58								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
Fund for Americas Future

Report Covering the Period: From: 

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	9

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) .....	7000.00	82741.02
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	7000.00	82741.02
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	14000.00	48520.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	21000.00	131261.02
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	2500.00	2500.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	23500.00	133761.02
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	23500.00	133761.02

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	15103.97	94540.59
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	15103.97	94540.59
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	19349.92
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	1200.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	17603.97	115090.51
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	17603.97	115090.51

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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) .....	21000.00	131261.02
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	21000.00	131261.02
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	15103.97	94540.59
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	15103.97	94540.59

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 16  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

NAME OF COMMITTEE (In Full)  
Fund for Americas Future

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

Mailing Address 1050 31st St., NW

City State Zip Code  
Washington DC 20007-4405

FEC ID number of contributing federal political committee. C C00024521

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt M M / D D / Y Y Y Y Y  
08 / 03 / 2009

**Transaction ID:** 90818.C1237

Amount of Each Receipt this Period 2500.00

Receipt

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

Mailing Address 1120 Connecticut Ave., NW

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. C C00004275

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt M M / D D / Y Y Y Y Y  
08 / 03 / 2009

**Transaction ID:** 90818.C1232

Amount of Each Receipt this Period 2500.00

Receipt

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

Mailing Address 1200 Wilson Blvd.

City State Zip Code  
Arlington VA 22209-2305

FEC ID number of contributing federal political committee. C C00142711

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt M M / D D / Y Y Y Y Y  
08 / 03 / 2009

**Transaction ID:** 90818.C1241

Amount of Each Receipt this Period 1000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... 6000.00

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

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

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

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

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NAME OF COMMITTEE (In Full)  
Fund for Americas Future

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

Mailing Address 1331 Pennsylvania Ave., NW, Ste. 5

City State Zip Code  
Washington DC 20004-1745

FEC ID number of contributing federal political committee. **C** C00163832

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
08 / 03 / 2009

**Transaction ID:** 90818.C1234

Amount of Each Receipt this Period  
5000.00

Receipt

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

Mailing Address PO Box 14000

City State Zip Code  
North Palm Beach FL 33408-0420

FEC ID number of contributing federal political committee. **C** C00064774

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 03 / 2009

**Transaction ID:** 90818.C1229

Amount of Each Receipt this Period  
1000.00

Receipt

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

Mailing Address 1111 N. Fairfax St.

City State Zip Code  
Alexandria VA 22314-1484

FEC ID number of contributing federal political committee. **C** C00012880

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
08 / 03 / 2009

**Transaction ID:** 90818.C1231

Amount of Each Receipt this Period  
1000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **7000.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 / 16
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Fund for Americas Future

<b>A.</b>	Full Name (Last, First, Middle Initial) The Shaw Group Inc. PAC		Date of Receipt
	Mailing Address 1725 Duke St., Ste. 400		<input type="text" value="08"/> / <input type="text" value="03"/> / <input type="text" value="2009"/>
	City Alexandria	State VA	Zip Code 22314-3470
	FEC ID number of contributing federal political committee. <b>C</b> C00104885		Transaction ID: 90818.C1240
	Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="1000.00"/> Receipt Aggregate Year-to-Date ▼ <input type="text" value="2000.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="1000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="14000.00"/>

**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 9 / 16
	<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)  
Fund for Americas Future

<b>A.</b>	Full Name (Last, First, Middle Initial) Michael W. Adcock		Date of Receipt MM / DD / YYYY 08 / 03 / 2009
	Mailing Address 5404 Backlick Woods Ct.		Transaction ID: 90818.C1230
	City Springfield	State VA	Zip Code 22151
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer Van Scoyoc & Assc	Occupation Vice President	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) William Andahazy		Date of Receipt MM / DD / YYYY 08 / 03 / 2009
	Mailing Address 8 Prospect Bay Dr., West		Transaction ID: 90818.C1238
	City Grasonville	State MD	Zip Code 21638-1184
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer Eta, Inc	Occupation Consultant	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) James L. Ervin		Date of Receipt MM / DD / YYYY 08 / 03 / 2009
	Mailing Address 116 Queen St.		Transaction ID: 90818.C1239
	City Alexandria	State VA	Zip Code 22314-2611
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer Eta, Inc	Occupation President	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3500.00	

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

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

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

FOR LINE NUMBER: PAGE 10 / 16  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Fund for Americas Future

**A.** Full Name (Last, First, Middle Initial)  
Jane G. Hipp  
Mailing Address 809 N. Quaker Ln.  
City Alexandria State VA Zip Code 22302-3416  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Homemaker  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 08 / 03 / 2009  
Transaction ID: 90818.C1243  
Amount of Each Receipt this Period 1000.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
Matthew R. Kambrod  
Mailing Address 915 Oyster Cove Dr.  
City Grasonville State MD Zip Code 21638-1080  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Kambrod Associates Occupation President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2000.00  
Date of Receipt 08 / 03 / 2009  
Transaction ID: 90818.C1236  
Amount of Each Receipt this Period 1000.00  
Receipt

**C.** Full Name (Last, First, Middle Initial)  
Hugh C. Lane, Jr.  
Mailing Address PO Box 538  
City Charleston State SC Zip Code 29402-0538  
FEC ID number of contributing federal political committee. **C**  
Name of Employer The Bank of South Carolina Occupation President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 08 / 26 / 2009  
Transaction ID: 90918.C1244  
Amount of Each Receipt this Period 1000.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3000.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

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

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NAME OF COMMITTEE (In Full)  
Fund for Americas Future

**A.** Full Name (Last, First, Middle Initial)  
Louie Perry, III

Mailing Address 314 Independence Ave., SE

City State Zip Code  
Washington DC 20003-1041

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

Name of Employer Occupation  
Cornerstone Government Affairs Vice President

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 03 / 2009

Transaction ID: 90818.C1235

Amount of Each Receipt this Period  
1000.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	7000.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)  
Fund for Americas Future

A.

Full Name (Last, First, Middle Initial)  
Coleman Minnesota Recount Committee

Mailing Address PO Box 14483

City State Zip Code  
Saint Paul MN 55114-

FEC ID number of contributing federal political committee. **C** C00457564

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	0	9

Transaction ID: 90818.C1242

Amount of Each Receipt this Period  
2500.00

Refund of Contribution Made

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

# 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 13 / 16

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

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NAME OF COMMITTEE (In Full)  
Fund for Americas Future

<p><b>A.</b> Full Name (Last, First, Middle Initial) Denise Bauld</p> <p>Mailing Address 239 E Queen St</p> <p>City Pendleton State SC Zip Code 29670-1336</p> <p>Purpose of Disbursement Consulting - strategy &amp; scheduling</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90818.E1539 <b>Date of Disbursement</b> 08 / 14 / 2009</p> <p>Amount of Each Disbursement this Period 875.00</p> <p>Category/Type CONSULTING - STRATEGY &amp; SCHEDULING</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) e2c Consulting, Inc.</p> <p>Mailing Address PO Box 29576</p> <p>City Washington State DC Zip Code 20017-</p> <p>Purpose of Disbursement Fundraising services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90918.E1548 <b>Date of Disbursement</b> 08 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 5126.87</p> <p>Category/Type FUNDRAISING SERVICES</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) e2c Consulting, Inc.</p> <p>Mailing Address PO Box 29576</p> <p>City Washington State DC Zip Code 20017-</p> <p>Purpose of Disbursement Fundraising services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90818.E1538 <b>Date of Disbursement</b> 08 / 14 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/Type FUNDRAISING SERVICES</p>

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

7001.87

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 14 / 16

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

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NAME OF COMMITTEE (In Full)  
Fund for Americas Future

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Nationwide Insurance</p> <p>Mailing Address 1034 Briargate Cir.</p> <p>City Columbia State SC Zip Code 29210-6539</p> <p>Purpose of Disbursement Liability Insurance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90818.E1532 <b>Date of Disbursement</b> 08 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p><b>LIABILITY INSURANCE</b></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Chase Card Services</p> <p>Mailing Address PO Box 15153</p> <p>City Wilmington State DE Zip Code 19886-5153</p> <p>Purpose of Disbursement CREDIT CARD: SEE BELOW</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90818.E1534 <b>Date of Disbursement</b> 08 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 1100.00</p> <p><b>CREDIT CARD: SEE BELOW</b></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Aristotle International, Inc.</p> <p>Mailing Address 205 Pennsylvania Ave SE</p> <p>City Washington State DC Zip Code 20003-1182</p> <p>Purpose of Disbursement Compliance Software</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90818.E1535 <b>Date of Disbursement</b> 08 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 900.00</p> <p><b>[MEMO ITEM]</b> <b>MEMO: COMPLIANCE SOFTWARE</b></p>

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

1600.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)  
Fund for Americas Future

A.	Full Name (Last, First, Middle Initial) Johnnys Half Shell	Transaction ID: 90818.E1536 Date of Disbursement 08 / 13 / 2009
	Mailing Address 400 N. Capitol St. NW	Amount of Each Disbursement this Period 200.00
	City Washington State DC Zip Code 20001-	
	Purpose of Disbursement PAC fundraising event deposit	[MEMO ITEM] MEMO: PAC FUNDRAISING EVE-NT DEPOSIT
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Derrick, Stubbs & Stith, LLP	Transaction ID: 90818.E1537 Date of Disbursement 08 / 13 / 2009
	Mailing Address 508 Hampton St	Amount of Each Disbursement this Period 75.00
	City Columbia State SC Zip Code 29201-2718	
	Purpose of Disbursement Accounting services	ACCOUNTING SERVICES
	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:	

C.	Full Name (Last, First, Middle Initial) Farmer Strategies, LLC	Transaction ID: 90818.E1540 Date of Disbursement 08 / 14 / 2009
	Mailing Address 7891 Broad River Rd.	Amount of Each Disbursement this Period 6400.00
	City Irmo State SC Zip Code 29063-	
	Purpose of Disbursement Fundraising compliance and office	FUNDRAISING COMPLIANCE AND OFFICE
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>6475.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>15076.87</b>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 16 / 16

<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)  
Fund for Americas Future

A.

Full Name (Last, First, Middle Initial)  
Inglis For Congress Committee

Mailing Address PO Box 210

City State Zip Code  
Travelers Rest SC 29690-

Purpose of Disbursement

Candidate Name  
ROBERT D INGLIS

Office Sought:  House  
 Senate  
 President

State: SC District: 04

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Transaction ID: 90818.E1533

Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

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