

National Campaign Fund

30011 Ivy Glenn Drive, Suite 223

Laguna Niguel

CA

92677

FEC ID No. C00437822

☒ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 1 / 2

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Campaign Fund	FEC IDENTIFICATION NUMBER C C00437822
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Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

Response Dynamics, Inc.

Date

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Amount

13871.45

Mailing Address

2070 Chain Bridge Rd # 520

City Vienna	State VA	Zip Code 22182
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Purpose of Expenditure
PostageCategory/
Type 003Office Sought: ☐ House State: _____
☐ Senate District: _____
☒ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
John McCainDisbursement For: ☐ Primary ☒ General 2008☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 956762.13

Transaction ID: EDT.E.217

Full Name (Last, First, Middle, Initial) of Payee

Direct Response Data Mngt

Date

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Amount

5586.20

Mailing Address

2070 Chain Bridge Rd # 520

City Vienna	State VA	Zip Code 22182
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Purpose of Expenditure
Data entryCategory/
Type 003Office Sought: ☐ House State: _____
☐ Senate District: _____
☒ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
John McCainDisbursement For: ☐ Primary ☒ General 2008☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 956762.13

Transaction ID: EDT.E.220

(a) SUBTOTAL of Itemized Independent Expenditures

19457.65

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures

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

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

24 / 48 HOUR NOTICE OF INDEPENDENT EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour NoticeSCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE OF 2 / 2
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Campaign Fund			FEC IDENTIFICATION NUMBER C C00437822		
Check if <input checked="" type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice					
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics, Inc.			Date M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 8		
Mailing Address 2070 Chain Bridge Rd # 520			Amount 9988.60		
City Vienna	State VA	Zip Code 22182	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential		
Purpose of Expenditure Mailing services		Category/ Type 003	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			Transaction ID: EDT.E.218		
956762.13					
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics, Inc.			Date M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 8		
Mailing Address 2070 Chain Bridge Rd # 520			Amount 20941.07		
City Vienna	State VA	Zip Code 22182	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential		
Purpose of Expenditure Postage		Category/ Type 003	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			Transaction ID: EDT.E.219		
956762.13					

(a) SUBTOTAL of Itemized Independent Expenditures	30929.67
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	50387.32
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	M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 8