10030304485

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

FEC FORM 3X Rev. 12/2004

							Office Us	e Only	A STATE OF THE STA
1. NAME OF COMMITTEE (OR PRINT ▼		mple: If typing the lines.	g, type	12FE4M			M. All
LIBER	TY COM	MITTE	F, 7	HE	<u> </u>		· :	· · · · · · · ·	
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ADDRESS (number	and street)	337 W	est.	ANDE	ERSC	ON Z	PORIL	24	
Check if d than previous reported. (DUTH A	FUCL	<i>10</i>	 -	04	HH 1	1911-i	3574
	ICATION NUMBER		CITY A			STATE A		ZIP CODE	A
c003	324871	3	. IS THIS REPORT	X NE	EW) . OR	All (A	MENDED)		<u> </u>
4. TYPE OF RE (Choose One)	EPORT (b)	Report	Feb 20 (M2)	en e	ay 20 (M5) n 20 (M6)	4.4	20 (M8) 20 (M9)	Yes Yes	ov 20 (M11) on-Election ar Only) oc 20 (M12)
(a) Quarterly F		7.5 2.54	Apr 20 (M4)	57 c.s.	1 20 (M7)	Oct	20 (M10)	(Ne Yes	on-Election ar Only) un 31 (YE)
April 1 Quarte	erly Report (Q1)	(c) 12-Day	,to a	Primary (12P)		General	(12G)	Ru	noff (12R)
Octob	erly Report (Q2)	PRE-Election Report for the	•	Convention (12	2C) .	Special (
Janua		Ele	ection on	M M /	D D /	Y Y Y Y		in the State of	. 192 %
Report	11 Mid-Year t (Non-election Only) (MY)	(d) 30-Day POST-Election Report for the		General (30G)		Runoff (30R)	Sp	ecial (30S)
Termin (TER)	nation Report	Ele	ection on	м м /	0 0 /	y y Y y		in the State of	
! 5. Covering Period	b/	01 20	IĎ	through	03	31	20	10	
•	examined this Repo		.)	ledge and bel	lief it is true	e, correct and	complete		-
Type or Print Name	of Treasurer //	MRILS	10 1	ζ , ω	EHL	1116			
Signature of Treasu	rer Mar	elyn 8	·W	chlu	29 D	ate D	4 %	5 2	010
NOTE: Cubminetes of	f falso exampous a	r incomplata inform	ation mar art	iest the market	o pignine 4-1	e Danast ta #	a nonellic-	o of a H o	C 8497~

Office

Use Only

Write or Type Committee Name

COMMITTEE, THE COO32481

From: 01 01 2010 To: 03 37 2

Report Covering the Period:

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2010		2.139.41
	(b) Cash on Hand at Beginning of Reporting Period	, 2139.41	
	(c) Total Receipts (from Line 19)	. 5.66488	, 5.661.88
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	780129	7801.29
7.	Total Disbursements (from Line 31)	5939.83	. 5939.83
3.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	, 1861.46	1,861.46
€.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	, , . O	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	, , . O .	·

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

Page 3

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

COMMITTEE, THE

Report Covering the Period:

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)	3,066.88	3,066.88		
	(ii) Uniternized (iii) TOTAL (add Lines 11(a)(i) and (ii)▶	2595.00 5661.88	2595.00 5661.88		
	(b) Political Party Committees	Commence of the comment of the comme	The second secon		
12.	Totals to Line 33, page 5) Transfers From Affiliated/Other Party Committees	, 5,661.88	, <i>5661.8</i> 8		
13.	'All Loans Received				
	Loan Repayments Received Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	3	The second secon		
	Refunds of Contributions Made to Federal Candidates and Other Political Committees	, ,	, , ,		
	Other Federal Receipts (Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds (a) Non-Federal Account	, ,	, , ,		
	(from Schedule H3)(b) Levin Funds (from Schedule H5)	, , .	, , , .		
	(c) Total Transfers (add 18(a) and 18(b))	, ,	, ,		
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	5.661.88	5.661.88		
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	, 5.661.88 5.661.88	, 5,661.88 , 5661.88		

1003030448

of Disbursements

Page 4 FEC Form 3X (Rev. 02/2003) **COLUMN A COLUMN B** II. Disbursements **Total This Period** Calendar Year-to-Date 21. Operating Expenditures: Allocated Federal/Non-Federal Activity (from Schedule H4) Federal Share (ii) Non-Federal Share..... (b) Other Federal Operating Expenditures (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶ 22. Transfers to Affiliated/Other Party Committees..... Contributions to Federal Candidates/Committees and Other Political Committees...... 24. Independent Expenditures 26. Loan Repayments Made..... Loans Made..... Refunds of Contributions To: Individuals/Persons Other (a) Than Political Committees Political Party Committees (b) Other Political Committees (such as PACs)..... **Total Contribution Refunds** (d) (add Lines 28(a), (b), and (c)).......... ▶ 29. Other Disbursements 30. Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity (from Schedule H6) (i) Federal Share (ii) "Levin" Share..... Federal Election Activity Paid Entirely (b) With Federal Funds Total Federal Election Activity (add ... Lines 30(a)(i), 30(a)(ii) and 30(b)).... ▶ 31. Total Disbursements (add Lines 21(c), 22, 5,93,9.83 5,93,9.83 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) 5,939.83 from Line 31).....

10030304489

DETAILED SUMMARY PAGE

PAGE

C00324871

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Ex-

penditures

of Disbursements.

COLUMN A
Total This Period

Calendar Year-to-Date

Calendar Year-to-Date

Calendar Year-to-Date

5661.88

5.661.88

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS)X)	Use separate schedule(a) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE / OF S (check only one) 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using NAME OF COMMITTEE (in Full)	ng the name and a	ddress of any political comm	ry person for the purpose of soliciting contributions littles to solicit contributions from such committee. 24 CO0324871
A. TAYLOR, CHR. Mailing Address City FEC ID number of contributing federal political committee. Name of Employer	ISTIN DRIVE State OH CI Occupation	E 25/1/83	Date of Receipt 27 23 2010 Amount of Each Receipt this Period 14381
Receipt For: Primary General Other (specify)		EMAKER Year-to-Date V	7
B. Halling Address City City Full Name (Last, First, Middle Initial) City C	DRIV State	NE Zin Code	Date of Receipt O.Z ' 23' 2070
FEC ID number of contributing tederal political committee. Name of Employer	C	14483	Amount of Each Receipt this Period
Receipt For: Primary General Other (specify)	Aggregate	TEMPKEN Year-to-Date ▼ 2.153	7
Full Name (Last, First, Middle Initial) C. TAYLOR Mailing Address City	IRIST, DRI State	NE ZO, COGO UN 3	Date of Receipt
FEC ID number of contributing federal political committee. Name of Employer	C:	disconnection of the second	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General Other (specify) ▼		Year-to-Date V	7
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SCHEDULE A (FEC Form TEMIZED RECEIPTS		FOR LINE NUMBER: PAGE (check only one)
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Full Name (Last, First, Middle initial)	USTINIE	Date of Receipt
Mailing Address ESME	DRIVE	172 128 128 128 128 128 128 128 128 128 12
GIRDON	State Zip Code OLJ H4483	
FEC ID number of contributing federal political committee.	G	Amount of Each Receipt this Per
Name of Employer	POMEMBKER	
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Full Name (Last, First, Middle Initial)	IRISTINE	Date of Receipt
Mailing Address ESME		03' 73' 20
CINGIRARD	04 State 411483	Amount of Each Receipt this Peri
FEC ID number of contributing tederal political committee.	C C C C C C C C C C C C C C C C C C C	121
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Name of Employer	Occupation	
Place For.	Occupation HONEMAKER Aggregate Year-to-Date Y	
N/A Beceint For	HOMEMAKER	
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Receipt For: Primary ☐ General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mailing Address E.S.M.E.	HOMEMAKER Aggregate Year-to-Date V HRISTINE DRIVE	Date of Receipt
Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial)	HOMEMAKER Aggregate Year-to-Date V	Date of Receipt 23 22 Amount of Each Receipt this Period
Receipt For: Primary ☐ General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mailing Address E.S.M.E.	HOMEMAKER Aggregate Year-to-Date V HRISTINE DRIVE	03 73 20
Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Mailing Address City FEC ID number of contributing	Aggregate Year-to-Date Y Aggregate Year-to-Date Y ARISTINE DRIVE State Ci Cocupation	Amount of Each Receipt this Perio
Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Mailing Address City FEC (D number of contributing federal political committee.	Aggregate Year-to-Date V Aggregate Year-to-Date V ARISTINE DRIVE State C C C C C C C C C C C C C	Amount of Each Receipt this Perio

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

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	(check only one)	PAGE OF OF O
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A. Last, First, Middle Initial) A. Last, First, Middle Initial) Mailing Address City BAY VILLAGE A. CRESTVIE State	DAVIO A. W DRIVE	Date of Receipt	2010
FEC ID number of contributing federal political committee.		Amount of Each Receip	ot this Period
Classiat For:	EO Year-to-Date ▼ /00.00		.
Full Name (Last, First, Middle Initial) B. <u>WILDER MUTH</u> DAY Mailing Address City BAY VILLAGE State		Date of Receipt O2 25 Amount of Each Receip	
FEC ID number of contributing federal political committee. Name of Employer Occupation	Z.E.O.	Amount of Each Neces	100.00
Receipt For: Primary General Other (specify) ▼	Year-to-Date ▼ 200,00		. ; ;
c. WILDER Middle Initial) Mailing Address City BAY VILLAGE State	WIDE DRIVE	Date of Receipt O3 19 Amount of Each Receipt	2.010 this Period
FEC ID number of contributing federal political committee. Name of Employer Occupation Paceipt For: Primary General Aggregate	C.E.D. Year-to-Date ▼		100.00
Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)			300.00

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SCHEDULE A (FEC Form 3X)

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SCHEDULE A (FEC FORM 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) 11a
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NAME OF COMMITTEE (In Full)		
LIBERTY COM	MITTEE, THE	200324871
	MAS A.	Date of Receipt
	MMOCK DR.	03 15 2010
BONITA SPA	11065 FL 34134	_ · · · · · · · · · · · · · · · · · · ·
FEC ID number of contributing federal political committee.	С	250,00
Name of Employer W/A	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) B. MARCHETTI	EDWARD R.	Date of Receipt
Mailing Address HARBOR	DAKS CT	01 28 2010
BONITH SPRI	NGS FL 34134	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation KETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) C. SABO SOO/2		Date of Receipt
Mailing Address HICKOR	Y DRIVE	01 23 2010
WALTON HIL	State OH COOR 44/46	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer	Occupation HOMEMAKER	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
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		any person for the purpose of soliciting contributions mmittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
	MITTEE, THE	C00324871
	9LICE	Date of Receipt
	CHESTER AV	E 01262010
City MASSILLON	State Zip Code 64'	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.0
Name of Employer	Occupation HOMEMAKE	·C
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	550.0	00 0
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Mailing Address		
Oih.	State 7in Code	<u> </u>
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FEC ID number of contributing federal political committee.	С	
Name of Employer	Occupation	
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Full Name (Last, First, Middle Initial)		
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FEC ID number of contributing federal political committee.	С	
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Receipt For: Primary General	Aggregate Year-to-Date ▼	

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS		FOR LINE NUMBER: (check only one) 21b 22 22 27 28a 28	PAGE / OF //2 24 25 26 29 30
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NAME OF COMMITTEE (In Full) LIBERTY COMMIT	and the large of the second	C00324	
Full Name (Last, First, Middle Initial) A. AMERICAN EX Mailing Address BOX 1270	FRESS	Date of Disbur	sement 26 / 20 / 6
City FUDARK NS Purpose of Disbursement			h Disbursement this Period
President C		7)-7	
B. / CONTACT COR Mailing Address MERIDAN	1 PKWY #1	Date of Disburs	94 2010
Purpose of Disbursement WEB HOSTING Candidate Name	T	egory/ ype:	Disbursement this Period
	nt For: rimary General ther (specify)	MEM	1
Full Name (Last, First, Middle Initial) C. THE OFFICE Mailing Address MAIN	57	Date of Disburse	ement 2010
Purpose of Disbursement PLA-L	70 Code 310	02 Amount of Each	Disbursement this Period
· -		pgory/ /pei /NEM AM E	10: EXP. DISE
SUBTOTAL of Disbursements This Page (optional)	•		315.19

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

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Mailing Address	0108 2010
City MASSILLON State Zip &	74646
Purpose of Disbursement POSTIAGE	OO/ Amount of Each Disbursement this Pe
Candidate Name	Category/
Office Sought: House Disbursement For:	
Senate Primary ☐ G President Other (specify) ▼ State:	General MEMO: AM EXP DIS
Full Name (Last, First, Middle Initial)	
B. OFFICE MAX	Date of Disbursement
Mailing Address / 1010010/ WAV	E, 01 10 2010
City MASSILLON State Zip Co	14646
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Office Sought: House Disbursement For: Senate Primary G	General MEMO:
President Other (specify)	AM EXP. DI
Full Name (Last, First, Middle Initial) C	Date of Disbursement
· · · · · · · · · · · · · · · · · · ·	M M / D D / Y Y Y Y
Mailing Address	
City State Zip Co	ode
Purpose of Disbursement	

Disbursement For:

Primary

Other (specify)

FOR LINE NUMBER:

Date of Disbursement

(check only one)

7 21b

Use separate schedule(s)

for each category of the

Detailed Summary Page

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.

SCHEDULE B (FEC Form 3X)

ITEMIZED DISBURSEMENTS

NAME OF COMMITTEE (In Full)

Amount of Each Disbursement this Period

Category/ Type

General

Candidate Name

House

Senate

District:

SUBTOTAL of Disbursements This Page (optional)...

President

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

Office Sought:

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SCHEDULE B (FEC Form 3X)		FOR LINE N	I IMPED:	PAGE OF	72
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	Detailed Summary Page	21b	22 23 28b	24 25] 26 ~~.
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NAME OF COMMITTEE (In Full)					
LIBERTY COMMIT	TEE, THE	<u> </u>	032487	7/	. :
	40.0	ĺ	Date of Disbursemen	nt .	
- AMERICAN EX	(PRESS		02 72	וצעימעוי	ı
Mailing Address BOX 1270				2010	<u> </u>
NEWARK NJ	tate Zip Code 0 7 / 0 / - /	1270			
Purpose of Disbursement OREDIT CARD DA	TYMENT [Amount of Each Dist	oursement this Perio	od
Candidate Name		Category/		378.8	
Office Sought: House Disbursem		Туре		210.0:	21
	Primary General	Ì		1.	
	Other (specify)	.		!	
State: District: Full Name (Last, First, Middle Initial)				<u>i</u>	
B		1	Date of Disbursemen	t ¦	
OFFICE MAX			27 24	" [3272]	l
Halling Address 4333 LINCOLN	INAY E				j
City MASSILLON &	tate Zip Code 464	46	·		
Purpose of Disbursement	TING E	2077	Amount of Each Disb	ursement this Perio	ad
Candidate Name		Category/		11207	ठो।
Office Sought: House Disbursem	ant For	Туре	70 F M 0	برعما	ע
, , , , , , , , , , , , , , , , , , , ,	Primary General		MEMO		_
hand I hand	Other (specify)		AM. EX	P. DIS	
Full Name (Last, First, Middle Initial)				- :	
C. BOB EVANS RE			Date of Disbursemen		
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"MIDDLE AURE HT	tate Of Code 14/	30		· ,	
Purpose of Disbursement Purpose of Disbursement		110	Amount of Each Disb	i umomod this Desis	
Candidate Name		Category/	Amount of Each Diso	4 4 4 4 4 4	<u>a</u>)
Office Sought: House Disbursem	ent For:	Туре	man	21.03	<u> </u>
Senate	Primary General	•	MEMO.		-
President State: District:	Other (specify)	/	AM. EXI	o. DISL	9
SUBTOTAL of Disbursements This Page (optional))		378.83	3
TOTAL This Period (last page this line number only).					

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SCHEDULE B (FEC Form 3X)		LINE NUMBER:
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	Detailed Summary Page	27 28a 28b 28c 29 30
Any information copied from such Reports and States or for commercial purposes, other than using the name	nents may not be sold or used by an	y person for the purpose of soliciting contributions ittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		Y Handa
LIBERTY COMMIT	TEE, THE	C00324871
Full Name (Last, First, Middle Initial)		
* I CONTACT CORI		Date of Disbursement
Mailing Address 2635 MERIOAN	PKWY #100	9 69 67 8070
DURHAM NO Purpose of Dispursement	tate Zip Code 227/3	
WEB HOSTING	00	Amount of Each Disbursement this Period
Candidate Name	Catego	7.72
	Primary General	MEMO!
State: District:	Other (specify)	AM EXP DISB.
Full Name (Last, First, Middle Initial) B. The state of the state o		Date of Disbursement
BOB EVANS KE	STAURANT	
Mailing Address E. BAGL	ey.	02 04 2010
MIDOLEBURG HIS	ate 014 Zip Code 14130	·
Purpose of Disbursement MEAL	000	2 Amount of Each Disbursement this Period
Candidate Name	Categor	in the section of the
	Туре	
Office Sought: House Disbursem	- ·	MEMO:
	rimary ☐ General Other (specify) ▼	AM EXP DISB
Full Name (Last, First, Middle Initial)		
C. STAPLES	·	Date of Disbursement
Mailing Address MEDINA		02 10 2010
	ate Zip Code	
Purpose of Disbursement	day to common	
OFFICE SUPPL. Candidate Name	Category	Amount of Each Disbursement this Period
Office Sought: House Disburseme		mrm
	rimary General ther (specify) The control of the	MEMO!
State: District:	· · · · · · · · · · · · · · · · · · ·	AM EXP DISB
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Any information copied from such Reports and State or for commercial purposes, other than using the na	ements may not be sold or use ame and address of any politics	ed by any pen al committee t	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			was the same and the same
LIBERTY COMMI	TTEE, THE	T a	00324871
Full Name (Last, First, Middle Initial)			414 1 2 3 1 1
AMERICAN E	EXPRESS		Date of Disbursement
Mailing Address			02 16 2010
City	State Zip Code		
• 1		•	
Purpose of Disbursement MEMBERSHIP	FEE	001	Amount of Each Disburgament this Period
Candidate Name	*	Category/	(19800
Office Sought: House Disburse	ement For:	Туре	MEMO!
Senate	Primary General		<u>'</u>
President State: District:	Other (specify)		AM EXP DISB.
Full Name (Last, First, Middle Initial)			
	PRESS		Date of Disbursement
Melling Address	MESS		02 16 2010
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