

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
FREEDOM PROJECT; THE

Report Covering the Period: From:

M	M
1	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	1

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		255568.08
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	261822.00									
(c) Total Receipts (from Line 19)	83500.00	971931.89								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	345322.00	1227499.97								
7. Total Disbursements (from Line 31)	71756.63	953934.60								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	273565.37	273565.37								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
FREEDOM PROJECT; THE

Report Covering the Period: From:

M	M
1	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	1

D	D
3	0

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	12500.00	225500.00
(i) Itemized (use Schedule A)	0.00	2300.00
(ii) Unitemized	12500.00	227800.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	71000.00	726800.00
(c) Other Political Committees (such as PACs)	83500.00	954600.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees00	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	12567.18
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	4764.71
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))	83500.00	971931.89
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	83500.00	971931.89

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) 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.....	61756.63	498042.44
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	61756.63	498042.44
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	460892.16
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	-5000.00
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))..	71756.63	953934.60
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	71756.63	953934.60

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3	83500.00	954600.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	83500.00	954600.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	61756.63	498042.44
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	12567.18
38. Net Operating Expenditures (subtract Line 37 from Line 36)	61756.63	485475.26

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 37
	<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	

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

NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Sam Geduldig		Date of Receipt MM / DD / YYYY 11 / 14 / 2007
Mailing Address 1001 Pennsylvania Avenue NW Suite 750S		Transaction ID: SA11AI-5472-18837-c
City Washington State DC Zip Code 20004-2505	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00
Name of Employer Clark, Lytle & Geduldig Occupation Senior Partner	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Contribution
	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Mr. J. Brad Edwards		Date of Receipt MM / DD / YYYY 11 / 14 / 2007
Mailing Address 2422 Taylor Avenue		Transaction ID: SA11AI-5544-18849-c
City Alexandria State VA Zip Code 22302-3306	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1500.00
Name of Employer Jenkins Hill Consulting LLC Occupation Principal	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Contribution
	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) C. Robert Dotchin		Date of Receipt MM / DD / YYYY 11 / 14 / 2007
Mailing Address 412 N Saint Asaph Street		Transaction ID: SA11AI-5640-18855-c
City Alexandria State VA Zip Code 22314-2318	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00
Name of Employer The Advocacy Group Occupation Partner	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Contribution
	Aggregate Year-to-Date ▼ 1000.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 37
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial)
William Hecht

Mailing Address 2228 Arynness Drive

City Vienna State VA Zip Code 22181-3046

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

Name of Employer Hecht, Spencer & Associates
Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
11 / 14 / 2007

Transaction ID: SA11AI-5895-18834-c

Amount of Each Receipt this Period
5000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mark Isakowitz

Mailing Address 3198 Pond Mist Way

City Oak Hill State VA Zip Code 20171-1905

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

Name of Employer Fierce & Isakowitz
Occupation Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
11 / 14 / 2007

Transaction ID: SA11AI-6318-18854-c

Amount of Each Receipt this Period
1000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Harry Katrichis

Mailing Address 3000 K Street, NW Suite 500

City Washington State DC Zip Code 20007

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

Name of Employer Foley & Lardner LLP
Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4000.00

Date of Receipt
MM / DD / YYYY
11 / 14 / 2007

Transaction ID: SA11AI-8542-18858-c

Amount of Each Receipt this Period
1500.00

Contribution

SUBTOTAL of Receipts This Page (optional)	7500.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 37
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial)
Ann Clark

Mailing Address 9273 Lerwick Drive

City State Zip Code
Dublin OH 43017-9492

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 ▼
1000.00

Date of Receipt
MM / DD / YYYY
11 / 14 / 2007

Transaction ID: SA11AI-8983-18856-c

Amount of Each Receipt this Period
1000.00

Contribution

B. Full Name (Last, First, Middle Initial)
J. Davis

Mailing Address 33 W Higgins Road

City State Zip Code
South Barrington IL 60010-9115

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

Name of Employer Occupation
Davis Bankcorp. Chairman & CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
11 / 14 / 2007

Transaction ID: SA11AI-10155-18833-c

Amount of Each Receipt this Period
1000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	2000.00
TOTAL This Period (last page this line number only)	12500.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 37
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial)
CREDIT SUISSE SECURITIES (USA) GOVERNMENT ACTION FUND

Mailing Address 1155 21st Street NW
Suite 300

City Washington State DC Zip Code 20036-3312

FEC ID number of contributing federal political committee. **C** C00111559

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
1 1 / 1 4 / 2 0 0 7

Transaction ID: SA11C-3703-18845-c

Amount of Each Receipt this Period
5000.00

Contribution

B. Full Name (Last, First, Middle Initial)
US-CUBA DEMOCRACY POLITICAL ACTION COMMITTEE

Mailing Address 1200 W 49th Street

City Hialeah State FL Zip Code 33012-3217

FEC ID number of contributing federal political committee. **C** C00387720

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 7

Transaction ID: SA11C-3716-18847-c

Amount of Each Receipt this Period
2500.00

Contribution

C. Full Name (Last, First, Middle Initial)
MILLER BREWING COMPANY PAC

Mailing Address 3939 W Highland Boulevard

City Milwaukee State WI Zip Code 53208-2816

FEC ID number of contributing federal political committee. **C** C00102780

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
1 1 / 1 4 / 2 0 0 7

Transaction ID: SA11C-3747-18857-c

Amount of Each Receipt this Period
2500.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	10000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 37
	(check only one)	
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial)
MORGAN STANLEY & CO INCORPORATED BETTER GOVERNMENT FUND

Mailing Address 1221 Avenue Of The Americas
34FL

City State Zip Code
New York NY 10020-1001

FEC ID number of contributing federal political committee. **C** C00067215

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
1 1 / 1 4 / 2 0 0 7

Transaction ID: SA11C-3821-18861-c

Amount of Each Receipt this Period
5000.00

Contribution

B. Full Name (Last, First, Middle Initial)
AMERICAN PHYSICAL THERAPY ASSOCIATION PHYSICAL THERAPY POLITICAL ACTION COMMITTEE

Mailing Address 1111 N Fairfax Street

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 ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 7

Transaction ID: SA11C-3838-18835-c

Amount of Each Receipt this Period
5000.00

Contribution

C. Full Name (Last, First, Middle Initial)
GOLDMAN SACHS GROUP INC. POLITICAL ACTION COMMITTEE, THE

Mailing Address 101 Constitution Avenue, NW
Suite 1000E

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00350744

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
1 1 / 1 4 / 2 0 0 7

Transaction ID: SA11C-2047-18846-c

Amount of Each Receipt this Period
2500.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	12500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 37
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. OPPENHEIMER FUNDS INC. POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 7
Mailing Address 1295 State Street		Transaction ID: SA11C-8979-18859-c
City State Zip Code Springfield MA 01111-0001	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C C00367920	Contribution	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. T-MOBILE POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 7
Mailing Address 401 9th Street NW Suite 550		Transaction ID: SA11C-9343-18838-c
City State Zip Code Washington DC 20004-2141	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00361758	Contribution	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. American Clinical Laboratory Association Pac (acla Pac)		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 7
Mailing Address 1250 H Street NW Suite 880		Transaction ID: SA11C-10163-18844-c
City State Zip Code Washington DC 20005-5943	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C C00410084	Contribution	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	6500.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 / 37
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial) Novartis Political Action Committee		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 7
Mailing Address 701 Pennsylvania Avenue NW Suite 725		Transaction ID: SA11C-10157-18836-c
City State Zip Code Washington DC 20004-2608	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00033969	Contribution	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) Financial Services Roundtable PAC		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 7
Mailing Address 1001 Pennsylvania Avenue NW Suite 500		Transaction ID: SA11C-8244-18850-c
City State Zip Code Washington DC 20004-2508	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00193177	Contribution	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) Mastercard International Inc. Employees' Pac		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 7
Mailing Address 2000 Purchase Street		Transaction ID: SA11C-10159-18839-c
City State Zip Code Purchase NY 10577-2405	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00410274	Contribution	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	15000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 37
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. American Society of Anesthesiologists PAC		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 7
Mailing Address 1101 Vermont Avenue NW Suite 606		Transaction ID: SA11C-5060-18848-c
City State Zip Code Washington DC 20005-3528	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00255752		Contribution
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) B. Seniors Housing Pac		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 7
Mailing Address 5100 Wisconsin Avenue NW Suite 307		Transaction ID: SA11C-10160-18840-c
City State Zip Code Washington DC 20016-4130	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00325332		Contribution
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. KING & SPALDING NONPARTISAN COMMITTEE FOR GOOD GOVERNMENT		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 7
Mailing Address 1180 Peachtree Street NE		Transaction ID: SA11C-3998-18852-c
City State Zip Code Atlanta GA 30309-3531	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00204453		Contribution
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional) ▶	12500.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 37
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. AFLAC INCORPORATED POLITICAL ACTION COMMITTEE AFLAC PAC		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 4 / 2 0 0 7
Mailing Address 1932 Wynnton Road		Transaction ID: SA11C-4140-18853-c
City Columbus	State GA	Zip Code 31999-0001
FEC ID number of contributing federal political committee. C C00034157		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4500.00	

Full Name (Last, First, Middle Initial) B. AMERICAN COLLEGE OF SURGEONS PROFESSIONAL ASSOCIATION PAC		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 4 / 2 0 0 7
Mailing Address 1640 Wisconsin Avenue NW		Transaction ID: SA11C-4276-18842-c
City Washington	State DC	Zip Code 20007-7715
FEC ID number of contributing federal political committee. C C00382424		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) C. NATIONAL CITY CORPORATION POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 4 / 2 0 0 7
Mailing Address 1900 E 9th Street		Transaction ID: SA11C-4364-18851-c
City Cleveland	State OH	Zip Code 44114-3404
FEC ID number of contributing federal political committee. C C00141036		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	▶	9500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 / 37
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. American College Of Radiology Association (RADPAC)		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 4 / 2 0 0 7
Mailing Address 1891 Preston White Drive		Transaction ID: SA11C-10161-18841-c
City Reston	State VA	Zip Code 20191-4375
FEC ID number of contributing federal political committee. C C00343459		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) B. American College Of Cardiology Political Action Committee		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 4 / 2 0 0 7
Mailing Address 2400 N Street NW		Transaction ID: SA11C-10162-18843-c
City Washington	State DC	Zip Code 20037-1153
FEC ID number of contributing federal political committee. C C00375360		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional)	5000.00
TOTAL This Period (last page this line number only)	71000.00

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Mastercard		Transaction ID: SB21B-3605-10011-V Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 0 7
Mailing Address PO Box 70		Amount of Each Disbursement this Period 184.73
City Middletown State OH Zip Code 45042	[MEMO ITEM] Subitemization of Master-card	
Purpose of Disbursement Finance charge Candidate Name		001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Best Buy		Transaction ID: SB21B-3893-9984-V Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 0 7
Mailing Address 5799 Leesburg Pike		Amount of Each Disbursement this Period 177.42
City Falls Church State VA Zip Code 22041-2906	[MEMO ITEM] Subitemization of Master-card	
Purpose of Disbursement Computer equipment Candidate Name		001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. The Alamo Travel Group		Transaction ID: SB21B-4316-9993-V Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 0 7
Mailing Address 9000 Wurzbach Road		Amount of Each Disbursement this Period 25.00
City San Antonio State TX Zip Code 78240-1038	[MEMO ITEM] Subitemization of Master-card	
Purpose of Disbursement Gen. fund. travel reservation fee Candidate Name		002 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. The Alamo Travel Group		Transaction ID: SB21B-4316-9994-V Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 0 7
Mailing Address 9000 Wurzbach Road		Amount of Each Disbursement this Period 25.00
City San Antonio State TX Zip Code 78240-1038	Purpose of Disbursement Gen. fund. - travel reservation fee Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Subitemization of Master-card

Full Name (Last, First, Middle Initial) B. The Alamo Travel Group		Transaction ID: SB21B-4316-9995-V Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 0 7
Mailing Address 9000 Wurzbach Road		Amount of Each Disbursement this Period 25.00
City San Antonio State TX Zip Code 78240-1038	Purpose of Disbursement Gen. fund., travel reservation fee Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Subitemization of Master-card

Full Name (Last, First, Middle Initial) C. The Alamo Travel Group		Transaction ID: SB21B-4316-9996-V Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 0 7
Mailing Address 9000 Wurzbach Road		Amount of Each Disbursement this Period 25.00
City San Antonio State TX Zip Code 78240-1038	Purpose of Disbursement Gen. fund. - travel reservation fee Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Subitemization of Master-card

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Clark, Schaefer, Hackett & Company		Transaction ID: SB21B-6282-18870-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 160 N Breiel Boulevard		Amount of Each Disbursement this Period 45.00
City Middletown State OH Zip Code 45042-3806	Purpose of Disbursement Payroll processing Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) B. Whitaker Askew		Transaction ID: SB21B-3802-18872-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 3044 R Street NW		Amount of Each Disbursement this Period 1248.55
City Washington State DC Zip Code 20007-2962	Purpose of Disbursement Salary Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) C. First Financial Bank		Transaction ID: SB21B-3803-18886-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 7
Mailing Address 7795 Tylersville Road		Amount of Each Disbursement this Period 2186.00
City West Chester State OH Zip Code 45069-2592	Purpose of Disbursement Payroll taxes Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ▶

3479.55

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Office of Tax and Revenue		Transaction ID: SB21B-4077-18887-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 7
Mailing Address PO Box 96385		Amount of Each Disbursement this Period 251.00
City Washington State DC Zip Code 20090-6385	Purpose of Disbursement Payroll taxes Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) B. Capitol Associates III-X		Transaction ID: SB21B-4390-18862-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 5 / 2 0 0 7
Mailing Address 426 C Street NE		Amount of Each Disbursement this Period 1375.00
City Washington State DC Zip Code 20002-5818	Purpose of Disbursement Office rent Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) C. Washington Courier		Transaction ID: SB21B-9969-18868-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 7
Mailing Address 5520 Cherokee Avenue Suite 120		Amount of Each Disbursement this Period 96.35
City Alexandria State VA Zip Code 22312-2319	Purpose of Disbursement Courier Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ▶	1722.35
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)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Commonwealth of Virginia		Transaction ID: SB21B-8564-18885-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 7
Mailing Address PO Box 27264		Amount of Each Disbursement this Period 146.72
City Richmond State VA Zip Code 23261-7264	Purpose of Disbursement Payroll taxes Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Jessica Towhey		Transaction ID: SB21B-4392-18883-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 7
Mailing Address 618 N Carolina Avenue SE Apt. 3		Amount of Each Disbursement this Period 250.00
City Washington State DC Zip Code 20003-4392	Purpose of Disbursement Consulting, copywriting Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Clark, Schaefer, Hackett & Company		Transaction ID: SB21B-6282-18884-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 7
Mailing Address 160 N Breiel Boulevard		Amount of Each Disbursement this Period 45.00
City Middletown State OH Zip Code 45042-3806	Purpose of Disbursement Payroll processing Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	441.72
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

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

FOR LINE NUMBER: (check only one)

PAGE 21 / 37

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. New Media Communications		Transaction ID: SB21B-7123-18867-e Date of Disbursement																					
Mailing Address 3046 Brecksville Road		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	4		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y														
1	1		1	4		2	0	7															
City Richfield	State OH	Zip Code 44286-9399	Amount of Each Disbursement this Period																				
Purpose of Disbursement Website		001 Category/Type	4355.82																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

Full Name (Last, First, Middle Initial) B. Epiphany Productions		Transaction ID: SB21B-8930-18863-e Date of Disbursement																					
Mailing Address 104 Hume Avenue		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	5		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y														
1	1		0	5		2	0	7															
City Alexandria	State VA	Zip Code 22301-1015	Amount of Each Disbursement this Period																				
Purpose of Disbursement Consulting, generic fundraising		001 Category/Type	2591.58																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

Full Name (Last, First, Middle Initial) C. MDC & Associates, Inc.		Transaction ID: SB21B-9144-18864-e Date of Disbursement																					
Mailing Address fka DotterLydon, Inc. 1251 Dartmouth Court		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	5		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y														
1	1		0	5		2	0	7															
City Alexandria	State VA	Zip Code 22314-4784	Amount of Each Disbursement this Period																				
Purpose of Disbursement Compliance & bookkeeping		001 Category/Type	2500.00																				
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:																							

SUBTOTAL of Disbursements This Page (optional)	▶	9447.40
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)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. The Chicago Club		Transaction ID: SB21B-9826-18869-e
Mailing Address 81 E Van Buren Street		Date of Disbursement MM / DD / YYYY 11 / 14 / 2007
City Chicago	State IL	Zip Code 60605-1205
Purpose of Disbursement Gen. fund.-food & bev.	Amount of Each Disbursement this Period 2731.94	
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Bruce Gates		Transaction ID: SB21B-5055-18876-e
Mailing Address 4135 Seminary Road		Date of Disbursement MM / DD / YYYY 11 / 19 / 2007
City Alexandria	State VA	Zip Code 22304-1647
Purpose of Disbursement Adv. prmt. for gen. fund. food & bev	Amount of Each Disbursement this Period 10015.74	
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Whitaker Askew		Transaction ID: SB21B-3802-18879-e
Mailing Address 3044 R Street NW		Date of Disbursement MM / DD / YYYY 11 / 30 / 2007
City Washington	State DC	Zip Code 20007-2962
Purpose of Disbursement Salary	Amount of Each Disbursement this Period 1248.23	
Candidate Name	Category/Type 001	
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:		

SUBTOTAL of Disbursements This Page (optional)	13995.91
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)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

<p>A. Full Name (Last, First, Middle Initial) Kevin Mcgrann</p>		<p>Transaction ID: SB21B-4052-18866-e Date of Disbursement</p>	
<p>Mailing Address 150 N Carolina Avenue SE</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p>	
<p>City Washington State DC Zip Code 20003-1841</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="20.00"/></p>		
<p>Purpose of Disbursement Travel reimbursement Candidate Name</p>	<p><input type="text" value="001"/> Category/Type</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. Full Name (Last, First, Middle Initial) Kevin Mcgrann</p>		<p>Transaction ID: SB21B-4052-18873-e Date of Disbursement</p>	
<p>Mailing Address 150 N Carolina Avenue SE</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p>	
<p>City Washington State DC Zip Code 20003-1841</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="494.74"/></p>		
<p>Purpose of Disbursement Salary Candidate Name</p>	<p><input type="text" value="001"/> Category/Type</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>C. Full Name (Last, First, Middle Initial) Kevin Mcgrann</p>		<p>Transaction ID: SB21B-4052-18881-e Date of Disbursement</p>	
<p>Mailing Address 150 N Carolina Avenue SE</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p>	
<p>City Washington State DC Zip Code 20003-1841</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="495.17"/></p>		
<p>Purpose of Disbursement Salary Candidate Name</p>	<p><input type="text" value="001"/> Category/Type</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>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="1009.91"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Jessica Towhey		Transaction ID: SB21B-4392-18874-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 618 N Carolina Avenue SE Apt. 3		Amount of Each Disbursement this Period 250.00
City Washington State DC Zip Code 20003-4392		
Purpose of Disbursement Consulting, copywriting Candidate Name	003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Donald Seymour		Transaction ID: SB21B-10022-18882-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 7
Mailing Address 401 Holland Lane #609		Amount of Each Disbursement this Period 1228.29
City Alexandria State VA Zip Code 22314		
Purpose of Disbursement Salary Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Donald Seymour		Transaction ID: SB21B-10022-18877-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 7 / 2 0 0 7
Mailing Address 401 Holland Lane #609		Amount of Each Disbursement this Period 40.00
City Alexandria State VA Zip Code 22314		
Purpose of Disbursement Travel reimbursement Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1518.29
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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

<p>A. Full Name (Last, First, Middle Initial) Donald Seymour</p>		<p>Transaction ID: SB21B-10022-18891-e Date of Disbursement</p>	
<p>Mailing Address 401 Holland Lane #609</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p>	
<p>City Alexandria State VA Zip Code 22314</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1228.29"/></p>		
<p>Purpose of Disbursement Salary Candidate Name</p>	<p><input type="text" value="001"/> Category/Type</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. Full Name (Last, First, Middle Initial) Mastercard</p>		<p>Transaction ID: SB21B-3605-18875-e Date of Disbursement</p>	
<p>Mailing Address PO Box 70</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p>	
<p>City Middletown State OH Zip Code 45042</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="15307.07"/></p>		
<p>Purpose of Disbursement Credit card (see below) Candidate Name</p>	<p><input type="text" value="003"/> Category/Type</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>C. Full Name (Last, First, Middle Initial) Bruce Gates</p>		<p>Transaction ID: SB21B-5055-18889-e Date of Disbursement</p>	
<p>Mailing Address 4135 Seminary Road</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p>	
<p>City Alexandria State VA Zip Code 22304-1647</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="12153.35"/></p>		
<p>Purpose of Disbursement Adv. pmt. for gen. fund. greens fees Candidate Name</p>	<p><input type="text" value="003"/> Category/Type</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>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="28688.71"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Bruce Gates		Transaction ID: SB21B-5055-18890-e Date of Disbursement 11 / 19 / 2007
Mailing Address 4135 Seminary Road		Amount of Each Disbursement this Period 650.55
City Alexandria State VA Zip Code 22304-1647	Purpose of Disbursement Adv. Pmt., gen fund. lodging Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Grand Concourse		Transaction ID: SB21B-10168-9977-V Date of Disbursement 11 / 19 / 2007
Mailing Address 100 W Station Square Drive		Amount of Each Disbursement this Period 244.67
City Pittsburgh State PA Zip Code 15219-1175	Purpose of Disbursement Gen. fund., travel food & bev. Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Subitemization of Master-card

Full Name (Last, First, Middle Initial) C. Walt Disney Parks & Resorts		Transaction ID: SB21B-8695-9980-V Date of Disbursement 11 / 19 / 2007
Mailing Address PO Box 10000		Amount of Each Disbursement this Period 5000.00
City Lake Buena Vista State FL Zip Code 32830-1000	Purpose of Disbursement Gen.fund. - event deposit Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Subitemization of Master-card

SUBTOTAL of Disbursements This Page (optional) ▶	650.55
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)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Delta Air Lines		Transaction ID: SB21B-5296-10002-V Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 0 7
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 439.80
City Atlanta State GA Zip Code 30320-6001	[MEMO ITEM] Subitemization of Master-card	
Purpose of Disbursement Gen. fund. - travel airfare Candidate Name		002 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. FedEx		Transaction ID: SB21B-5414-9987-V Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 0 7
Mailing Address PO Box 1140		Amount of Each Disbursement this Period 21.08
City Memphis State TN Zip Code 38101-1140	[MEMO ITEM] Subitemization of Master-card	
Purpose of Disbursement Shipping Candidate Name		001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Johnny Mr. DeStefano		Transaction ID: SB21B-10021-18888-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 1000 New Jersey Ave., SE #1011		Amount of Each Disbursement this Period 400.87
City Washington State DC Zip Code 20003	[MEMO ITEM] Subitemization of Master-card	
Purpose of Disbursement Salary Candidate Name		001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	400.87
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 28 / 37

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

<p>A. Johnny Mr. DeStefano</p> <p>Full Name (Last, First, Middle Initial)</p>		<p>Transaction ID: SB21B-10021-18880-e</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p>
<p>Mailing Address 1000 New Jersey Ave., SE #1011</p>		<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="401.37"/></p>
<p>City Washington State DC Zip Code 20003</p>	<p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Category/Type <input type="text" value="001"/></p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	

<p>B. Capitol Hill Club</p> <p>Full Name (Last, First, Middle Initial)</p>		<p>Transaction ID: SB21B-5501-10010-V</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p>
<p>Mailing Address 300 1st Street SE</p>		<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="297.00"/></p>
<p>City Washington State DC Zip Code 20003-1801</p>	<p>Purpose of Disbursement Gen. fund. food & bev.</p> <p>Candidate Name</p> <p>Category/Type <input type="text" value="003"/></p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>[MEMO ITEM] Subitemization of Master-card</p>

<p>C. U.S. Airways</p> <p>Full Name (Last, First, Middle Initial)</p>		<p>Transaction ID: SB21B-5507-10001-V</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p>
<p>Mailing Address 2345 Crystal Drive</p>		<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="408.80"/></p>
<p>City Arlington State VA Zip Code 22227-0001</p>	<p>Purpose of Disbursement Gen. fund. - travel airfare</p> <p>Candidate Name</p> <p>Category/Type <input type="text" value="002"/></p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>[MEMO ITEM] Subitemization of Master-card</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="401.37"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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

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

FOR LINE NUMBER: (check only one)

PAGE 29 / 37

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. U.S. Airways		Transaction ID: SB21B-5507-9999-V Date of Disbursement 11 / 19 / 2007
Mailing Address 2345 Crystal Drive		Amount of Each Disbursement this Period 204.40
City Arlington State VA Zip Code 22227-0001	Purpose of Disbursement Gen. fund. - travel airfare Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Subitemization of Master-card
Category/Type: 002		

Full Name (Last, First, Middle Initial) B. U.S. Airways		Transaction ID: SB21B-5507-10000-V Date of Disbursement 11 / 19 / 2007
Mailing Address 2345 Crystal Drive		Amount of Each Disbursement this Period 361.40
City Arlington State VA Zip Code 22227-0001	Purpose of Disbursement Gen. fund. - travel airfare Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Subitemization of Master-card
Category/Type: 002		

Full Name (Last, First, Middle Initial) C. Ruth's Chris Steakhouse		Transaction ID: SB21B-10173-10009-V Date of Disbursement 11 / 19 / 2007
Mailing Address 724 9th Street NW		Amount of Each Disbursement this Period 3449.76
City Washington State DC Zip Code 20001-4505	Purpose of Disbursement Gen. fund. - food & bev. Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Subitemization of Master-card
Category/Type: 003		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)

PAGE 30 / 37

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

<p>A. Full Name (Last, First, Middle Initial) 123 Together.com</p>		<p>Transaction ID: SB21B-10075-9997-V Date of Disbursement</p>
<p>Mailing Address 111 S Bedford Street Suite 200</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p>
<p>City Burlington State MA Zip Code 01803-5145</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="74.94"/></p>	
<p>Purpose of Disbursement Internet</p>	<p><input type="text" value="001"/> Category/Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>	<p>[MEMO ITEM] Subitemization of Master-card</p>	

<p>B. Full Name (Last, First, Middle Initial) Congressional Liquors</p>		<p>Transaction ID: SB21B-6678-9989-V Date of Disbursement</p>
<p>Mailing Address 404 1st Street SE</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p>
<p>City Washington State DC Zip Code 20003-1826</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="20.60"/></p>	
<p>Purpose of Disbursement Mtg. expense food & bev.</p>	<p><input type="text" value="001"/> Category/Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>	<p>[MEMO ITEM] Subitemization of Master-card</p>	

<p>C. Full Name (Last, First, Middle Initial) American Airlines</p>		<p>Transaction ID: SB21B-6717-10003-V Date of Disbursement</p>
<p>Mailing Address NASA Building</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p>
<p>City Stennis Space Cent State MS Zip Code 39529</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="492.80"/></p>	
<p>Purpose of Disbursement Gen. fund. - travel airfare</p>	<p><input type="text" value="002"/> Category/Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>	<p>[MEMO ITEM] Subitemization of Master-card</p>	

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="0.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. American Airlines		Transaction ID: SB21B-6717-10004-V Date of Disbursement 11 / 19 / 2007
Mailing Address NASA Building		Amount of Each Disbursement this Period 1145.80
City Stennis Space Cent State MS Zip Code 39529	Purpose of Disbursement Gen. fund. - travel airfare Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Subitemization of Master-card

Full Name (Last, First, Middle Initial) B. Youssef 242		Transaction ID: SB21B-10170-9986-V Date of Disbursement 11 / 19 / 2007
Mailing Address 242 11th Avenue NE		Amount of Each Disbursement this Period 226.15
City Hickory State NC Zip Code 28601-3836	Purpose of Disbursement Gen. fund. - food & bev. Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Subitemization of Master-card

Full Name (Last, First, Middle Initial) C. Capitol Hill Club		Transaction ID: SB21B-5501-10012-V Date of Disbursement 11 / 19 / 2007
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 35.38
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement Mtg. expense food & bev. Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Subitemization of Master-card

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Capitol Hill Club		Transaction ID: SB21B-5501-9985-V Date of Disbursement 11 / 19 / 2007
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 5.84
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement Mtg. expense food & bev. Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Subitemization of Master-card

Full Name (Last, First, Middle Initial) B. Cosi		Transaction ID: SB21B-10015-9983-V Date of Disbursement 11 / 19 / 2007
Mailing Address 301 Pennsylvania Avenue, NW		Amount of Each Disbursement this Period 29.58
City Washington State DC Zip Code 20003	Purpose of Disbursement Mtg. expense food & bev. Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Subitemization of Master-card

Full Name (Last, First, Middle Initial) C. Cosi		Transaction ID: SB21B-10015-9988-V Date of Disbursement 11 / 19 / 2007
Mailing Address 301 Pennsylvania Avenue, NW		Amount of Each Disbursement this Period 32.43
City Washington State DC Zip Code 20003	Purpose of Disbursement Mtg. expense food & bev. Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Subitemization of Master-card

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Cosi Full Name (Last, First, Middle Initial) Mailing Address 301 Pennsylvania Avenue, NW City Washington State DC Zip Code 20003 Purpose of Disbursement Mtg. expense food & bev. Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-10015-9979-V Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 0 7 Amount of Each Disbursement this Period 32.43 [MEMO ITEM] Subitemization of Master-card
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B. Subway Full Name (Last, First, Middle Initial) Mailing Address 406 1st Street SE City Washington State DC Zip Code 20003-1869 Purpose of Disbursement Mtg. expense food & bev. Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-10054-10008-V Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 0 7 Amount of Each Disbursement this Period 209.94 [MEMO ITEM] Subitemization of Master-card
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C. RTJ Golf Club Full Name (Last, First, Middle Initial) Mailing Address One Turtle Point Drive City Lake Manassas State VA Zip Code 22065 Purpose of Disbursement Gen. fund. - greens fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-6217-10006-V Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 0 7 Amount of Each Disbursement this Period 892.50 [MEMO ITEM] Subitemization of Master-card
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Congressional Liquors		Transaction ID: SB21B-6678-9975-V Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 0 7
Mailing Address 404 1st Street SE		Amount of Each Disbursement this Period 8.89
City Washington State DC Zip Code 20003-1826	Purpose of Disbursement Mtg. expense food & bev.	
Candidate Name		001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Subitemization of Master-card

Full Name (Last, First, Middle Initial) B. Subway		Transaction ID: SB21B-10054-9976-V Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 0 7
Mailing Address 406 1st Street SE		Amount of Each Disbursement this Period 260.81
City Washington State DC Zip Code 20003-1869	Purpose of Disbursement Mtg. expense food & bev.	
Candidate Name		001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Subitemization of Master-card

Full Name (Last, First, Middle Initial) C. Subway		Transaction ID: SB21B-10054-9990-V Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 0 7
Mailing Address 406 1st Street SE		Amount of Each Disbursement this Period 39.16
City Washington State DC Zip Code 20003-1869	Purpose of Disbursement Mtg. expense food & bev.	
Candidate Name		001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Subitemization of Master-card

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

<p>A. Subway</p> <p>Full Name (Last, First, Middle Initial) Subway</p> <p>Mailing Address 406 1st Street SE</p> <p>City Washington State DC Zip Code 20003-1869</p> <p>Purpose of Disbursement Mtg. expense food & bev.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-10054-9991-V</p> <p>Date of Disbursement 11 / 19 / 2007</p> <p>Amount of Each Disbursement this Period 170.78</p> <p>001 Category/ Type</p> <p>[MEMO ITEM] Subitemization of Master-card</p>
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<p>B. Subway</p> <p>Full Name (Last, First, Middle Initial) Subway</p> <p>Mailing Address 406 1st Street SE</p> <p>City Washington State DC Zip Code 20003-1869</p> <p>Purpose of Disbursement Mtg. expense food & bev.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-10054-9981-V</p> <p>Date of Disbursement 11 / 19 / 2007</p> <p>Amount of Each Disbursement this Period 98.04</p> <p>001 Category/ Type</p> <p>[MEMO ITEM] Subitemization of Master-card</p>
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<p>C. Trattoria Alberto</p> <p>Full Name (Last, First, Middle Initial) Trattoria Alberto</p> <p>Mailing Address 506 8th Street SE</p> <p>City Washington State DC Zip Code 20003-2834</p> <p>Purpose of Disbursement Gen. fund. food & bev.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-10171-9992-V</p> <p>Date of Disbursement 11 / 19 / 2007</p> <p>Amount of Each Disbursement this Period 413.85</p> <p>003 Category/ Type</p> <p>[MEMO ITEM] Subitemization of Master-card</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

<p>A. Full Name (Last, First, Middle Initial) Cosi</p>		<p>Transaction ID: SB21B-10015-10007-V Date of Disbursement</p>	
<p>Mailing Address 301 Pennsylvania Avenue, NW</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/></p>	
<p>City Washington</p>	<p>State DC</p>	<p>Zip Code 20003</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="32.43"/></p>
<p>Purpose of Disbursement Mtg. expense food & bev.</p>		<p><input type="text" value="001"/> Category/ Type</p>	
<p>Candidate Name</p>		<p>[MEMO ITEM] Subitemization of Master-card</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="61756.63"/>

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Latta For Congress		Transaction ID: SB23-10167-18878-e Date of Disbursement 11 / 27 / 2007
Mailing Address 300 N Main Street		Amount of Each Disbursement this Period 5000.00
City Bowling Green	State OH Zip Code 43402-2423	
Purpose of Disbursement Contribution Candidate Name Robert Edward Latta		011 Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 05	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Va-1 Congressional Victory Committee		Transaction ID: SB23-10165-18865-e Date of Disbursement 11 / 05 / 2007
Mailing Address PO Box 40385		Amount of Each Disbursement this Period 5000.00
City Washington	State DC Zip Code 20016-0385	
Purpose of Disbursement Contribution Candidate Name		011 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ►

10000.00

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

10000.00