

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

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Free and Strong America PAC, Inc.

ADDRESS (number and street)

80 Hayden Avenue

☐Check if different
than previously
reported. (ACC)

Lexington

MA

02421

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00449280

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☒July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

01

01

2011

through

06

30

2011

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

Type or Print Name of Treasurer

Darrell Crate

Signature of Treasurer

Electronically Filed by Darrell Crate

Date

07

28

2011

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

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

A. Form/Schedule : **F3XN**

Transaction ID :

Previously, Free and Strong America PAC, Inc. ("FSA") was associated with five state political action committees registered in Iowa, South Carolina, New Hampshire, Michigan, and Alabama (the "State PACs"). As Schedule H reflects, joint administrative expenses were allocated among FSA and the State PACs in accordance with Commission regulations. On or before March 31, 2011, FSA began its wind-down phase. It severed ties with each of the State PACs and stopped allocating expenses, such that all expenses are now paid with federal funds.

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Free and Strong America PAC, Inc.

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1		796207.59
(b) Cash on Hand at Beginning of Reporting Period	796207.59	
(c) Total Receipts (from Line 19)	3037611.16	3037611.16
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	3833818.75	3833818.75
7. Total Disbursements (from Line 31)	3530394.05	3530394.05
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	303424.70	303424.70
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	98.33	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Free and Strong America PAC, Inc.

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

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)	1971910.99	1971910.99
(ii) Unitemized	420169.91	420169.91
(iii) TOTAL (add Lines 11(a)(i) and (ii)	2392080.90	2392080.90
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	12000.00	12000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	2404080.90	2404080.90
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	3616.91	3616.91
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	264991.96	264991.96
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	364921.39	364921.39
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	364921.39	364921.39
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	3037611.16	3037611.16
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	2672689.77	2672689.77

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.....	364929.92	364929.92	
(ii) Non-Federal Share.....	364921.39	364921.39	
(b) Other Federal Operating Expenditures.....	2309781.37	2309781.37	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	3039632.68	3039632.68	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	412000.00	412000.00	
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	38261.37	38261.37	
(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))	38261.37	38261.37	
29. Other Disbursements.....	40500.00	40500.00	
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))..	3530394.05	3530394.05	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3165472.66	3165472.66	

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)	2404080.90	2404080.90
34. Total Contribution Refunds (from Line 28(d))	38261.37	38261.37
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2365819.53	2365819.53
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	2674711.29	2674711.29
37. Offsets to Operating Expenditures (from Line 15, page 3)	3616.91	3616.91
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2671094.38	2671094.38

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

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

FOR LINE NUMBER: PAGE 7 / 970

(check only one)

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

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

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. JOHN C. ABERCROMBIE

Mailing Address 710 E. 200 N.

City

BOUNTIFUL

State

UT

Zip Code

84010-3607

FEC ID number of contributing
federal political committee.

C

Name of Employer
CORPORATION OF THE PRESID-
ING BISHOP

Occupation

COMPUTER TECHNICAL SUPPORT REPRESENTAT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 8 / 2 0 1 1

Transaction ID: SA11.416811

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. DOROTHY M. ABLES

Mailing Address 7 SHADOW LAWN STREET

City

HOUSTON

State

TX

Zip Code

77005-1834

FEC ID number of contributing
federal political committee.

C

Name of Employer
SPECTRA ENERGY

Occupation

CHIEF ADMINISTRATIVE OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.420419

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. J. MICHAEL ABLES

Mailing Address 7 SHADOW LAWN STREET

City

HOUSTON

State

TX

Zip Code

77005-1834

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

INVESTMENTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.420429

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. KENNETH S. ABRAMOWITZ

Mailing Address P.O. BOX 958

City

SOUTHPORT

State

CT

Zip Code

06890-0958

FEC ID number of contributing
federal political committee.

C

Name of Employer
ANALYST/EXECUTIVE

Occupation

N.G.N. CAPITAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.407218

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. MORRIE K. ABRAMSON

Mailing Address 1000 UPTOWN PARK BLVD. #144

City

HOUSTON

State

TX

Zip Code

77056-3247

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 1 1

Transaction ID: SA11.417293

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. EBBY HALLIDAY ACERS

Mailing Address 8515 PRESTON ROAD

City

DALLAS

State

TX

Zip Code

75225-3217

FEC ID number of contributing
federal political committee.

C

Name of Employer
EBBY HALLIDAY INC.

Occupation

REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

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

Transaction ID: SA11.406955

Amount of Each Receipt this Period

375.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6375.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 9 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MS. EBBY HALLIDAY ACERS

Mailing Address 8515 PRESTON ROAD

City

DALLAS

State

TX

Zip Code

75225-3217

FEC ID number of contributing
federal political committee.

C

Name of Employer
EBBY HALLIDAY INC.Occupation
REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	4	/	2	0	1	1

Transaction ID: SA11.416504

Amount of Each Receipt this Period

375.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WILLIAM F. ACHTMEYER

Mailing Address 34 1/2 BEACON ST.
APT. 4N

City

BOSTON

State

MA

Zip Code

02108-1423

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE PARTHENON GROUPOccupation
CHAIRMAN & C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.411040

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. MICHAEL J. ADAMSKI

Mailing Address P.O. BOX 26

City

WORTH

State

IL

Zip Code

60482-0026

FEC ID number of contributing
federal political committee.

C

Name of Employer
MICHAEL J. ADAMSKI CPA LT-D.Occupation
CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	4	/	2	0	1	1

Transaction ID: SA11.407933

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5625.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 10 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. RICHARD P. ADAMS

Mailing Address 150 BUTLER STREET

City

KINGSTON

State

PA

Zip Code

18704-5212

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

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

Transaction ID: SA11.407484

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RICHARD P. ADAMS

Mailing Address 150 BUTLER STREET

City

KINGSTON

State

PA

Zip Code

18704-5212

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

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

Transaction ID: SA11.412341

Amount of Each Receipt this Period

45.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RICHARD P. ADAMS

Mailing Address 150 BUTLER STREET

City

KINGSTON

State

PA

Zip Code

18704-5212

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 7 / 2 0 1 1

Transaction ID: SA11.415584

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

245.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 11 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

RAANAN AGUS

Mailing Address 200 WEST STREET

City

NEW YORK

State

NY

Zip Code

10282-2102

FEC ID number of contributing
federal political committee.

C

Name of Employer
GOLDMAN SACH & CO.

Occupation
FINANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 5 / 2 0 1 1

Transaction ID: SA11.411608

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WILLIE J. ALEXANDER

Mailing Address 50 BRIAR HOLLOW
SUITE 320 EAST

City

HOUSTON

State

TX

Zip Code

77027-9300

FEC ID number of contributing
federal political committee.

C

Name of Employer
W.J ALEXANDER & ASSOCIATE-
S, P.C.

Occupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.420386

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DALE ALLEN

Mailing Address 208 LYNWOOD TERRACE

City

NASHVILLE

State

TN

Zip Code

37205-2914

FEC ID number of contributing
federal political committee.

C

Name of Employer
MILLER & MARTIN

Occupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 8 / 2 0 1 1

Transaction ID: SA11.416824

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. DARYL L. ALLEN

Mailing Address P.O. BOX 675310

City

RANCHO SANTA FE

State

CA

Zip Code

92067-5310

FEC ID number of contributing
federal political committee.

C

Name of Employer
USANA

Occupation
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 8 / 2 0 1 1

Transaction ID: SA11.415623

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. DENISE D. ALLEN

Mailing Address 18503 CHERRYTREE GROVE DRIVE

City

HOUSTON

State

TX

Zip Code

77084-4405

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 0 / 2 0 1 1

Transaction ID: SA11.414802

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. GAIL HOLMES ALLEN

Mailing Address 4500 WILLIAMS ROAD

City

FORT WORTH

State

TX

Zip Code

76116-8810

FEC ID number of contributing
federal political committee.

C

Name of Employer
DOUBLE DOVE RANCH

Occupation
HORSE BREEDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 5 / 2 0 1 1

Transaction ID: SA11.411623

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6750.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 13 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. KENNETH R. ALLEN

Mailing Address 3784 GROVE AVENUE

City

PALO ALTO

State

CA

Zip Code

94303-4536

FEC ID number of contributing
federal political committee.

C

Name of Employer

KILPATRICK TOWNSEND & STOKTON L.L.P.

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 1 1

Transaction ID: SA11.417331

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROBERT ALLEN

Mailing Address P.O. BOX 675310

City

RANCHO SANTA FE

State

CA

Zip Code

92067-5310

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
AUTHOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 8 / 2 0 1 1

Transaction ID: SA11.415626

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. MARIA ALLWIN

Mailing Address 65 UPPER CROSS ROAD

City

GREENWICH

State

CT

Zip Code

06831-2702

FEC ID number of contributing
federal political committee.

C

Name of Employer
TREVOR DAY SCHOOL N.Y.C.

Occupation
ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.409591

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6750.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 14 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

DR. AIHAM J. ALSAMMARAE

Mailing Address 117 COVINGTON COURT

City

OAK BROOK

State

IL

Zip Code

60523-2575

FEC ID number of contributing
federal political committee.

C

Name of Employer
K.C.I. ENGINEERING CONSUL-
TANTS

Occupation

C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: SA11.409898

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. AIHAM J. ALSAMMARAE

Mailing Address 117 COVINGTON COURT

City

OAK BROOK

State

IL

Zip Code

60523-2575

FEC ID number of contributing
federal political committee.

C

Name of Employer
K.C.I. ENGINEERING CONSUL-
TANTS

Occupation

C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: SA11.413273

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. AIHAM J. ALSAMMARAE

Mailing Address 117 COVINGTON COURT

City

OAK BROOK

State

IL

Zip Code

60523-2575

FEC ID number of contributing
federal political committee.

C

Name of Employer
K.C.I. ENGINEERING CONSUL-
TANTS

Occupation

C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 4 / 2 0 1 1

Transaction ID: SA11.424131

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 15 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. CHRISTOPHER D. AMATO

Mailing Address 4431 ESQUIRE CIRCLE

City

NAPERVILLE

State

IL

Zip Code

60564-6164

FEC ID number of contributing
federal political committee.

C

Name of Employer
E*TRADE

Occupation
TRADER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.409610

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. BRETT J. ANDERSON

Mailing Address 1273 W. 1300 S.

City

WOODS CROSS

State

UT

Zip Code

84087-2269

FEC ID number of contributing
federal political committee.

C

Name of Employer
COMPUTECH CONSULTING

Occupation
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.417678

Amount of Each Receipt this Period

300.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ROBERT E. ARBOGAST

Mailing Address 12900 STATE ROUTE 56 S.E.

City

MOUNT STERLING

State

OH

Zip Code

43143-9146

FEC ID number of contributing
federal political committee.

C

Name of Employer
ONE WILLOW WOOD COMPANY

Occupation
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 2 / 2 0 1 1

Transaction ID: SA11.414000

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

800.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 16 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

DR. TOM ARNOLD

Mailing Address 2345 CLAREMONT LANE

City

HOUSTON

State

TX

Zip Code

77019-5809

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 7 / 2 0 1 1

Transaction ID: SA11.408719

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. TOM ARNOLD

Mailing Address 2345 CLAREMONT LANE

City

HOUSTON

State

TX

Zip Code

77019-5809

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 1 1

Transaction ID: SA11.417290

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ROBERT J. ASPER

Mailing Address 2312 WELTON PLACE

City

ATLANTA

State

GA

Zip Code

30338-5345

FEC ID number of contributing
federal political committee.

C

Name of Employer
LOCKHEED & MARTIN AERONAU-
TICS COMPANY

Occupation

FINANCIAL/COST ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 7 / 2 0 1 1

Transaction ID: SA11.406026

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1200.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 17 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. ROBERT J. ASPER

Mailing Address 2312 WELTON PLACE

City

ATLANTA

State

GA

Zip Code

30338-5345

FEC ID number of contributing
federal political committee.

C

Name of Employer
LOCKHEED & MARTIN AERONAU-
TICS COMPANY

Occupation

FINANCIAL/COST ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

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

Transaction ID: SA11.407049

Amount of Each Receipt this Period

375.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. SIDNEY J. ATKIN

Mailing Address 875 RIO VIRGIN DRIVE #247

City

ST. GEORGE

State

UT

Zip Code

84790-7861

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	7	/	2	0	1	1

Transaction ID: SA11.410528

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. THOMAS P. ATKINS

Mailing Address 1201 EDGECLIFF PLACE
APARTMENT 1061

City

CINCINNATI

State

OH

Zip Code

45206-2898

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	3	/	2	0	1	1

Transaction ID: SA11.406337

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

3375.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 18 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. CLAIRE H. AUSTIN

Mailing Address 2603 WILDWOOD DRIVE

City

MONTGOMERY

State

AL

Zip Code

36111-1723

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE AUSTIN GROUP, L.L.C.

Occupation

GOVERNMENTAL AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 0 / 2 0 1 1

Transaction ID: SA11.414890

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. MELISSA N. BABSON

Mailing Address 12045 S.W. BREYMAN AVENUE

City

PORTLAND

State

OR

Zip Code

97219-8414

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.411072

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. STEPHEN E. BABSON

Mailing Address 12045 S.W. BREYMAN AVENUE

City

PORTLAND

State

OR

Zip Code

97219-8414

FEC ID number of contributing
federal political committee.

C

Name of Employer
ENDEAVOUR CAPITAL

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.411071

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 19 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. SANDRA G. BAHRE

Mailing Address P.O. BOX 900

City

ALTON

State

NH

Zip Code

03809-0900

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.411045

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DON V. BAILEY

Mailing Address 7 CANTITOE LANE

City

CHERRY HILLS VILLA

State

CO

Zip Code

80113-6111

FEC ID number of contributing
federal political committee.

C

Name of Employer
TRITON INVESTMENT COMPANY

Occupation

REAL ESTATE INVESTMENTS

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 1 / 2 0 1 1

Transaction ID: SA11.413956

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DAVID C. BALDWIN

Mailing Address 3000 DEL MONTE

City

HOUSTON

State

TX

Zip Code

77019-3214

FEC ID number of contributing
federal political committee.

C

Name of Employer
SCF PARTNERS

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 5 / 2 0 1 1

Transaction ID: SA11.415352

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. JOE W. BALLEW

Mailing Address 7806 TIMBERLINE RUN LANE

City

HOUSTON

State

TX

Zip Code

77095-4184

FEC ID number of contributing
federal political committee.**C**Name of Employer
BAKER HUGHES INC

Occupation

TAX DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	7	/	2	0	1	1

Transaction ID: SA11.417898

Amount of Each Receipt this Period

300.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JAMES S. BALLOUN

Mailing Address 3521 NORTHSIDE DRIVE N.W.

City

ATLANTA

State

GA

Zip Code

30305-1038

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.406889

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. BARBARA BANKER

Mailing Address 230 GEDDINGTON

City

SHAVANO PARK

State

TX

Zip Code

78249-2064

FEC ID number of contributing
federal political committee.**C**Name of Employer
WILLIAMS INSULATION CO.

Occupation

BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	8	/	2	0	1	1

Transaction ID: SA11.415632

Amount of Each Receipt this Period

375.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1675.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 21 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. CAL C. BANKER

Mailing Address 230 GEDDINGTON

City

SHAVANO PARK

State

TX

Zip Code

78249-2064

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

875.00

Date of Receipt

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

Transaction ID: SA11.406706

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. CAL C. BANKER

Mailing Address 230 GEDDINGTON

City

SHAVANO PARK

State

TX

Zip Code

78249-2064

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

875.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 8 / 2 0 1 1

Transaction ID: SA11.415689

Amount of Each Receipt this Period

375.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. GARRETT BARRY

Mailing Address PO BOX 157

City

BELMONT

State

MA

Zip Code

02478-0002

FEC ID number of contributing
federal political committee.

C

Name of Employer
BARDEN INS. & FINANCE

Occupation
INSURANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 5 / 2 0 1 1

Transaction ID: SA11.411539

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1125.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 22 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MS. VICKI S. BASS

Mailing Address 333 THROCKMORTON STREET

City

FORT WORTH

State

TX

Zip Code

76102-7421

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	6		2	0	1	1

Transaction ID: SA11.420385

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RICHARD BATES

Mailing Address 4620 CITATION COURT

City

BATAVIA

State

OH

Zip Code

45103-9212

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation

NONE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

509.44

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	4		2	0	1	1

Transaction ID: SA11.411426

Amount of Each Receipt this Period

509.44

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DANIEL H. BATHON, JR.

Mailing Address 52 WALTHAM STREET

City

LEXINGTON

State

MA

Zip Code

02421-5407

FEC ID number of contributing
federal political committee.

C

Name of Employer
WINDSPEED VENTURES

Occupation

FINANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	7		2	0	1	1

Transaction ID: SA11.410384

Amount of Each Receipt this Period

4800.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10309.44

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 23 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. JOHN P. BATTISTA

Mailing Address 1094 LIBERTY STREET

City

BRAintree

State

MA

Zip Code

02184-8262

FEC ID number of contributing
federal political committee.

C

Name of Employer
ZOOTS CORPORATION

Occupation

VICE PRESIDENT LOGISTICS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	4	/	2	0	1	1

Transaction ID: SA11.411360

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROBERT J. BAZYK

Mailing Address 59 RAINBOW ROAD

City

GRANBY

State

CT

Zip Code

06026-9763

FEC ID number of contributing
federal political committee.

C

Name of Employer
COMMAND CORPORATION

Occupation

PRESIDENT & C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	7	/	2	0	1	1

Transaction ID: SA11.410396

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DOYLE BECK

Mailing Address P.O. BOX 1768

City

IDAHO FALLS

State

ID

Zip Code

83403-1768

FEC ID number of contributing
federal political committee.

C

Name of Employer
B.E.C.O. CONSTRUCTION CO.,
INC.

Occupation

CONSTRUCTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	3	1	/	2	0	1	1

Transaction ID: SA11.409180

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 24 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. MARGO BEHRAKIS

Mailing Address 426 RIVER ROAD

City

TEWKSBURY

State

MA

Zip Code

01876-1043

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.406512

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROY MORROW BELL

Mailing Address 550 WEST B STREET

City

SAN DIEGO

State

CA

Zip Code

92101-3539

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

BUSINESSMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 1 1

Transaction ID: SA11.409262

Amount of Each Receipt this Period

300.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ROY MORROW BELL

Mailing Address 550 WEST B STREET

City

SAN DIEGO

State

CA

Zip Code

92101-3539

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

BUSINESSMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.419009

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2300.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 25 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. ELNA BENEKE

Mailing Address 2440 UMPQUA ROAD

City

WOODBURN

State

OR

Zip Code

97071-2735

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: SA11.412123

Amount of Each Receipt this Period

35.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. ELNA BENEKE

Mailing Address 2440 UMPQUA ROAD

City

WOODBURN

State

OR

Zip Code

97071-2735

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 8 / 2 0 1 1

Transaction ID: SA11.415746

Amount of Each Receipt this Period

120.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. ELNA BENEKE

Mailing Address 2440 UMPQUA ROAD

City

WOODBURN

State

OR

Zip Code

97071-2735

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.419539

Amount of Each Receipt this Period

70.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 26 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MS. JEANNINE BENNETT

Mailing Address P.O. BOX 581188

City

SALT LAKE CITY

State

UT

Zip Code

84158-1188

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 4 / 2 0 1 1

Transaction ID: SA11.413083

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WAYNE BERMAN

Mailing Address 3055 WHITEHAVEN STREET NW

City

WASHINGTON

State

DC

Zip Code

20008-3613

FEC ID number of contributing
federal political committee.

C

Name of Employer
OGILVY GOVERNMENT RELATIO-
NS

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.410647

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. LEROY K. BERRETT

Mailing Address P.O. BOX 1129

City

HANFORD

State

CA

Zip Code

93232-1129

FEC ID number of contributing
federal political committee.

C

Name of Employer
JAMES G. PARKER/BACOME IN-
SURANCE

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 1 1

Transaction ID: SA11.410500

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10250.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 27 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. LEO BEUS

Mailing Address 1776 E. TAPESTRY HEIGHTS

City

PHOENIX

State

AZ

Zip Code

85048-4526

FEC ID number of contributing
federal political committee.

C

Name of Employer
BEUS GILBERT

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	4	/	2	0	1	1

Transaction ID: SA11.466946

Amount of Each Receipt this Period

1131.92

CONTRIBUTION

IN-KIND: CATERING FOR PAC;
REFUNDED \$1,131.92 ON 03/-
07/2011**B.**

Full Name (Last, First, Middle Initial)

MRS. CATHERINE F. BEYER

Mailing Address P.O. BOX 49975

City

LOS ANGELES

State

CA

Zip Code

90049-0975

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.411958

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ROBERT D. BEYER

Mailing Address P.O. BOX 49975

City

LOS ANGELES

State

CA

Zip Code

90049-0975

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.411963

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

11131.92

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 28 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. JIMMY P. BIELEND

Mailing Address 21 FRANCIS TERRACE
APARTMENT 2CCity State Zip Code
YONKERS NY 10704-3251FEC ID number of contributing
federal political committee.**C**Name of Employer
WESTCHESTER DEPARTMENT OF
CORRECTIONSOccupation
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	7	/	2	0	1	1

Transaction ID: SA11.408817

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JIMMY P. BIELEND

Mailing Address 21 FRANCIS TERRACE
APARTMENT 2CCity State Zip Code
YONKERS NY 10704-3251FEC ID number of contributing
federal political committee.**C**Name of Employer
WESTCHESTER DEPARTMENT OF
CORRECTIONSOccupation
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	8	/	2	0	1	1

Transaction ID: SA11.416872

Amount of Each Receipt this Period

125.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. CONSTANCE M. BIGGER

Mailing Address 14134 W. PENNYSTONE DRIVE

City State Zip Code
SUN CITY WEST AZ 85375-5238FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	4	/	2	0	1	1

Transaction ID: SA11.407811

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1275.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 29 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. CONSTANCE M. BIGGER

Mailing Address 14134 W. PENNYSTONE DRIVE

City

SUN CITY WEST

State

AZ

Zip Code

85375-5238

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.417596

Amount of Each Receipt this Period

4000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. KATHY BILLINGE

Mailing Address 555 5TH AVENUE N.E.
SUITE 543

City

SAINT PETERSBURG

State

FL

Zip Code

33701-2674

FEC ID number of contributing
federal political committee.

C

Name of Employer
IN THE NEWS, INC.

Occupation
MARKETING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 4 / 2 0 1 1

Transaction ID: SA11.408028

Amount of Each Receipt this Period

60.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. KATHY BILLINGE

Mailing Address 555 5TH AVENUE N.E.
SUITE 543

City

SAINT PETERSBURG

State

FL

Zip Code

33701-2674

FEC ID number of contributing
federal political committee.

C

Name of Employer
IN THE NEWS, INC.

Occupation
MARKETING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: SA11.409791

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

4110.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 30 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)
MS. KATHY BILLINGE

Mailing Address 555 5TH AVENUE N.E.
SUITE 543

City State Zip Code
SAINT PETERSBURG FL 33701-2674

FEC ID number of contributing
federal political committee.

C

Name of Employer
IN THE NEWS, INC.

Occupation
MARKETING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 17 / 2011

Transaction ID: SA11.415512

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. BRADLEY M. BLOOM

Mailing Address 11 ALBION ROAD

City State Zip Code
WELLESLEY MA 02481-1304

FEC ID number of contributing
federal political committee.

C

Name of Employer
BERKSHIRE PARTNERS L.L.C.

Occupation
INVESTMENTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
02 / 24 / 2011

Transaction ID: SA11.413088

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. WILLIAM BLOOMFIELD, JR.

Mailing Address 940 1ST STREET

City State Zip Code
MANHATTAN BEACH CA 90266-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
02 / 23 / 2011

Transaction ID: SA11.412869

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10100.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 31 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

DR. ROBERT BLOTTER

Mailing Address 1116 ORTMAN RD

City

MARQUETTE

State

MI

Zip Code

49855-9333

FEC ID number of contributing
federal political committee.

C

Name of Employer
ORTHOPAEDIC SURGERY ASSOC-
IATES OF MARQOccupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	0	/	2	0	1	1

Transaction ID: SA11.414856

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. LEWIS GRANT BODELL

Mailing Address 25545 PALERMO WAY

City

YORBA LINDA

State

CA

Zip Code

92887-6220

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	8	/	2	0	1	1

Transaction ID: SA11.418075

Amount of Each Receipt this Period

300.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. EMILY BOGLE

Mailing Address 15 EASTWAY

City

BRONXVILLE

State

NY

Zip Code

10708-4318

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.407198

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5550.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 32 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. HAROLD BOGLE

Mailing Address 15 EASTWAY

City

BRONXVILLE

State

NY

Zip Code

10708-4318

FEC ID number of contributing
federal political committee.**C**Name of Employer
CREDIT SUISSEOccupation
FINANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.407204

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOHN P. BOLDUC

Mailing Address 6857 GRANADA BLVD.

City

CORAL GABLES

State

FL

Zip Code

33146-3823

FEC ID number of contributing
federal political committee.**C**Name of Employer
HIG CAPITALOccupation
FINANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	1	1

Transaction ID: SA11.417278

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. STACY BOLDUC

Mailing Address 6857 GRANADA BLVD.

City

CORAL GABLES

State

FL

Zip Code

33146-3823

FEC ID number of contributing
federal political committee.**C**Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	1	1

Transaction ID: SA11.417279

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. MARLENE L. BOLL

Mailing Address 10 W. SNAPPER POINT DRIVE

City

KEY LARGO

State

FL

Zip Code

33037-3736

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	7		2	0	1	1

Transaction ID: SA11.414407

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. A. BLAINE BOWMAN

Mailing Address 14545 CARNELIAN CIRCLE

City

SARATOGA

State

CA

Zip Code

95070-5966

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.409812

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. A. BLAINE BOWMAN

Mailing Address 14545 CARNELIAN CIRCLE

City

SARATOGA

State

CA

Zip Code

95070-5966

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	1	1

Transaction ID: SA11.416862

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 34 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. JENNY BOYD

Mailing Address 2704 ALLEE DE PAPILLON

City

KNOXVILLE

State

TN

Zip Code

37922-6560

FEC ID number of contributing
federal political committee.

C

Name of Employer
BOYD ENTERTAINMENT LLC

Occupation

MANAGING PARTNER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.411064

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RANDY D. BOYD

Mailing Address 2704 ALLEE DE PAPILLON

City

KNOXVILLE

State

TN

Zip Code

37922-6560

FEC ID number of contributing
federal political committee.

C

Name of Employer
RADIO SYSTEMS CORPORATION

Occupation

C.E.O.

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.411068

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. JEANNE M. BRADFORD

Mailing Address 42161 SANTA FE TRAIL

City

MURRIETA

State

CA

Zip Code

92562-5228

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

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

Transaction ID: SA11.407014

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10100.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 35 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)
MS. JEANNE M. BRADFORD

Mailing Address 42161 SANTA FE TRAIL

City State Zip Code
MURRIETA CA 92562-5228

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 4 / 2 0 1 1

Transaction ID: SA11.413148

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. JEANNE M. BRADFORD

Mailing Address 42161 SANTA FE TRAIL

City State Zip Code
MURRIETA CA 92562-5228

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 1 / 2 0 1 1

Transaction ID: SA11.415860

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. JEANNE M. BRADFORD

Mailing Address 42161 SANTA FE TRAIL

City State Zip Code
MURRIETA CA 92562-5228

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 1 1

Transaction ID: SA11.417294

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 36 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MS. JEANNE M. BRADFORD

Mailing Address 42161 SANTA FE TRAIL

City

MURRIETA

State

CA

Zip Code

92562-5228

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	6	/	2	0	1	1

Transaction ID: SA11.420436

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. JEANNE M. BRADFORD

Mailing Address 42161 SANTA FE TRAIL

City

MURRIETA

State

CA

Zip Code

92562-5228

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	6	/	2	0	1	1

Transaction ID: SA11.420437

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. SANDY S. BRADSHAW

Mailing Address 1305 EAST LONE PEAK DRIVE

City

ALPINE

State

UT

Zip Code

84004-1962

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11.406684

Amount of Each Receipt this Period

300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

550.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 37 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. EDWARD O. BRAMMAN

Mailing Address 7408 GRANBURY CIRCLE

City

SAINT LOUIS

State

MO

Zip Code

63123-2009

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	3	1	/	2	0	1	1

Transaction ID: SA11.409142

Amount of Each Receipt this Period

300.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. MICHAEL R. BREAUULT

Mailing Address 1204 FERNWOOD DRIVE

City

SCHENECTADY

State

NY

Zip Code

12309-2618

FEC ID number of contributing
federal political committee.

C

Name of Employer
BREAUULT & MC GOVERN, D.D.-
S., P.C.Occupation
PERIODONTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	5	/	2	0	1	1

Transaction ID: SA11.416786

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. HOLLY P. BREEDEN

Mailing Address 117 BEVERLY ROAD

City

WEST PALM BEACH

State

FL

Zip Code

33405-4727

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.413809

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

800.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 38 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. GEORGE F. BRENNAN, JR.

Mailing Address 31 LINCOLN DRIVE

City

SAUSALITO

State

CA

Zip Code

94965-1640

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	4		2	0	1	1

Transaction ID: SA11.416490

Amount of Each Receipt this Period

300.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. WILLIAM H. BREWER

Mailing Address 9511 SKYVIEW COURT

City

RICHMOND

State

VA

Zip Code

23229-3934

FEC ID number of contributing
federal political committee.

C

Name of Employer
VCUHSOccupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.412152

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. DOROTHY K. BROCKMAN

Mailing Address 6700 HOLLISTER
SUITE 600

City

HOUSTON

State

TX

Zip Code

77040-5331

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	6		2	0	1	1

Transaction ID: SA11.420410

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5550.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 39 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. JOHN R. BROCK, III

Mailing Address 5603 INDIAN CIRCLE

City

HOUSTON

State

TX

Zip Code

77056-1006

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 7 / 2 0 1 1

Transaction ID: SA11.408801

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. PETER C. BROCKWAY

Mailing Address 443 ROYAL PALM WAY

City

BOCA RATON

State

FL

Zip Code

33432-7945

FEC ID number of contributing
federal political committee.

C

Name of Employer
BROCKWAY MORAN & PARTNERS,
INC.

Occupation
MANAGING PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 7 / 2 0 1 1

Transaction ID: SA11.415585

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ROBERT T. BROCKMAN

Mailing Address 6700 HOLLISTER
SUITE 600

City

HOUSTON

State

TX

Zip Code

77040-5331

FEC ID number of contributing
federal political committee.

C

Name of Employer
REYNOLDS & REYNOLDS

Occupation
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.420428

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 40 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MS. CATHERINE M. BROWN

Mailing Address 2835 W. 32ND AVENUE
APARTMENT 72City State Zip Code
DENVER CO 80211-3264FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.406651

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JAMES S. BROWN

Mailing Address 3691 VIA MERCADO

City State Zip Code
JAMUL CA 91935FEC ID number of contributing
federal political committee.

C

Name of Employer
SILBERRAD, INC.Occupation
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	0	/	2	0	1	1

Transaction ID: SA11.414897

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. BEVERLY BRUCE

Mailing Address 300 MOUNTAIN ROAD

City State Zip Code
CENTER TUFTONBORO NH 03816-5055FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	3	/	2	0	1	1

Transaction ID: SA11.407674

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5600.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 41 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MS. BEVERLY BRUCE

Mailing Address 300 MOUNTAIN ROAD

City

CENTER TUFTONBORO

State

NH

Zip Code

03816-5055

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4100.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 1 / 2 0 1 1

Transaction ID: SA11.413957

Amount of Each Receipt this Period

4000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. MAGALEN O. BRYANT

Mailing Address P.O. BOX 1850

City

MIDDLEBURG

State

VA

Zip Code

20118-1850

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 3 / 2 0 1 1

Transaction ID: SA11.412881

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ARTHUR W. BUERK

Mailing Address 2914 E. MADISON STREET
UNIT 208

City

SEATTLE

State

WA

Zip Code

98112-4272

FEC ID number of contributing
federal political committee.

C

Name of Employer
BUERK, DALE, VICTOR, L.L.-
C.

Occupation

PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 3 / 2 0 1 1

Transaction ID: SA11.412997

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

4750.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 42 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. ROBERT H. BUESCHER

Mailing Address 35 RED OAK PLACE

City

MASSAPEQUA

State

NY

Zip Code

11758-7513

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.418002

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROBERT H. BUESCHER

Mailing Address 35 RED OAK PLACE

City

MASSAPEQUA

State

NY

Zip Code

11758-7513

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 5 / 2 0 1 1

Transaction ID: SA11.424256

Amount of Each Receipt this Period

300.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JONATHAN W. BULLEN

Mailing Address 18439 CALLE LE SERRA

City

RANCHO SANTA FE

State

CA

Zip Code

92091-0140

FEC ID number of contributing
federal political committee.

C

Name of Employer
COLMENA CAPITAL

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 0 / 2 0 1 1

Transaction ID: SA11.414894

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 43 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. JULIE A. BULLEN

Mailing Address 18439 CALLE LA SERRA

City

RANCHO SANTA FE

State

CA

Zip Code

92091-0140

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 0 / 2 0 1 1

Transaction ID: SA11.414889

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. FRASER F. BULLOCK

Mailing Address 5937 W. CHATHAM CIRCLE

City

HIGHLAND

State

UT

Zip Code

84003-3850

FEC ID number of contributing
federal political committee.

C

Name of Employer
WEST RIM CAPITAL

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 1 1

Transaction ID: SA11.410473

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. JENNIFER L. BULLOCK

Mailing Address 5937 W. CHATHAM CIRCLE

City

HIGHLAND

State

UT

Zip Code

84003-3850

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 1 1

Transaction ID: SA11.410454

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. LYNDIA D. BURNSIDE

Mailing Address 4314 COUNTY ROAD 1008

City

GLEN ROSE

State

TX

Zip Code

76043-5534

FEC ID number of contributing
federal political committee.

C

Name of Employer
JPS HEALTH SYSTEMS

Occupation
NURSE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 2 / 2 0 1 1

Transaction ID: SA11.416128

Amount of Each Receipt this Period

252.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. KELLY BURT

Mailing Address 14385 CIERA CT

City

POWAY

State

CA

Zip Code

92064-6627

FEC ID number of contributing
federal political committee.

C

Name of Employer
TRES_DAC

Occupation
SMALL BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 0 / 2 0 1 1

Transaction ID: SA11.414899

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. VICTOR BUSCAINO

Mailing Address 300 BEACH DRIVE N.E.

City

SAINT PETERSBURG

State

FL

Zip Code

33701-3482

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11.406959

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5352.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 45 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. VICTOR BUSCAINO

Mailing Address 300 BEACH DRIVE N.E.

City

SAINT PETERSBURG

State

FL

Zip Code

33701-3482

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11.412659

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DICKSON C. BUXTON

Mailing Address 7599 REDWOOD BLVD.
SUITE 210

City

NOVATO

State

CA

Zip Code

94945-7706

FEC ID number of contributing
federal political committee.

C

Name of Employer
PRIVATE CAPITAL CORPORATI-
ONOccupation
MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	4	/	2	0	1	1

Transaction ID: SA11.408105

Amount of Each Receipt this Period

-250.00

CONTRIBUTION

CHARGED BACK

C.

Full Name (Last, First, Middle Initial)

MR. DICKSON C. BUXTON

Mailing Address 7599 REDWOOD BLVD.
SUITE 210

City

NOVATO

State

CA

Zip Code

94945-7706

FEC ID number of contributing
federal political committee.

C

Name of Employer
PRIVATE CAPITAL CORPORATI-
ONOccupation
MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	4	/	2	0	1	1

Transaction ID: SA11.408106

Amount of Each Receipt this Period

-250.00

CONTRIBUTION

CHARGED BACK

SUBTOTAL of Receipts This Page (optional)

-300.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 46 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. JAMES E. BYMS

Mailing Address 3900 VALLEY OAKS DRIVE

City

CLINTON

State

IA

Zip Code

52732-9460

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.413311

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOE BZENINSKI

Mailing Address 171 GREAN NECK ROAD
APARTMENT 2D

City

GREAT NECK

State

NY

Zip Code

11021-3347

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
REAL ESTATE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.406831

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. KENT E. CALDER

Mailing Address 197 SHADYBROOK LANE

City

PRINCETON

State

NJ

Zip Code

08540-4135

FEC ID number of contributing
federal political committee.

C

Name of Employer
JOHNS HOPKINS UNIVERSITYOccupation
PROFESSOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	4	/	2	0	1	1

Transaction ID: SA11.415179

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 47 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

DR. KENT E. CALDER

Mailing Address 197 SHADYBROOK LANE

City

PRINCETON

State

NJ

Zip Code

08540-4135

FEC ID number of contributing
federal political committee.**C**Name of Employer
JOHNS HOPKINS UNIVERSITY

Occupation

PROFESSOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	0	/	2	0	1	1

Transaction ID: SA11.417207

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. JOHN W. CALLISTER

Mailing Address 1176 COLUMBINE CIRCLE

City

SAINT GEORGE

State

UT

Zip Code

84790-7510

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	3	/	2	0	1	1

Transaction ID: SA11.416365

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. WINSTON T. CAPEL

Mailing Address 33 EASTBROOKE CIRCLE

City

MADISON

State

MS

Zip Code

39110-6536

FEC ID number of contributing
federal political committee.**C**Name of Employer
SELF-EMPLOYED

Occupation

NEUROSURGEON

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.408849

Amount of Each Receipt this Period

300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1050.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 48 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

DR. WINSTON T. CAPEL

Mailing Address 33 EASTBROOKE CIRCLE

City

MADISON

State

MS

Zip Code

39110-6536

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

NEUROSURGEON

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	5	/	2	0	1	1

Transaction ID: SA11.416783

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DAVID V. CARLSON

Mailing Address 701 FIFTH AVENUE

City

SEATTLE

State

WA

Zip Code

98104-7097

FEC ID number of contributing
federal political committee.

C

Name of Employer
SEED I.P.

Occupation

ATTORNEY

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	5	/	2	0	1	1

Transaction ID: SA11.411639

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. EARL CARLSON

Mailing Address 2747 COLONIAL STREET #A

City

HAYS

State

KS

Zip Code

67601-1805

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	3	1	/	2	0	1	1

Transaction ID: SA11.409037

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1450.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 49 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. HENRY CARLSON, JR.

Mailing Address 9101 E. MADISON STREET

City

SIOUX FALLS

State

SD

Zip Code

57110-7463

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

GENERAL CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	3	/	2	0	1	1

Transaction ID: SA11.414104

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. BARRY CARNES

Mailing Address 30 ARROWHEAD FARM ROAD

City

BOXFORD

State

MA

Zip Code

01921

FEC ID number of contributing
federal political committee.

C

Name of Employer
AB CARNES ROOFING

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	3	/	2	0	1	1

Transaction ID: SA11.416438

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOHN D. CARTER

Mailing Address 5 FENNWOOD DRIVE

City

ATHERTON

State

CA

Zip Code

94027-3110

FEC ID number of contributing
federal political committee.

C

Name of Employer
SCHWITZER STEEL INDUSTRIES
INC.

Occupation

C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	4	/	2	0	1	1

Transaction ID: SA11.413095

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 50 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. THOMAS CAVE

Mailing Address 1570 THE ALAMEDA #100

City

SAN JOSE

State

CA

Zip Code

95126-2335

FEC ID number of contributing
federal political committee.

C

Name of Employer
GROOM & CAVE, LLP

Occupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.418253

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WYLIE D. CAVIN, III

Mailing Address 6804 VIA CORRETO DRIVE

City

AUSTIN

State

TX

Zip Code

78749-2757

FEC ID number of contributing
federal political committee.

C

Name of Employer
RED RIVER BANK

Occupation
BANKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 4 / 2 0 1 1

Transaction ID: SA11.408065

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. GARY R. CHARTRAND

Mailing Address 139 PONTE VEDRA BLVD.

City

PONTE VEDRA BEACH

State

FL

Zip Code

32082-1313

FEC ID number of contributing
federal political committee.

C

Name of Employer
ACOSTA SALES & MARKETING

Occupation
CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.407217

Amount of Each Receipt this Period

5000.00

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. SUE CHILD

Mailing Address 205 N. 200 E.

City

RUPERT

State

ID

Zip Code

83350-9485

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.407366

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DAVID C. CHRISTIAN, II

Mailing Address 4145 N. HERMITAGE AVE.

City

CHICAGO

State

IL

Zip Code

60613-1820

FEC ID number of contributing
federal political committee.**C**Name of Employer
SEYFARTH SHAW LLPOccupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	1	1

Transaction ID: SA11.417261

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DAVID R. CLARE

Mailing Address 972 LAKE HOUSE DRIVE

City

NORTH PALM BEACH

State

FL

Zip Code

33408-3361

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	3	1	/	2	0	1	1

Transaction ID: SA11.409285

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6250.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 52 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. WILLIAM H. CLARK, III

Mailing Address 3716 MAPLEWOOD AVENUE

City

DALLAS

State

TX

Zip Code

75205-2827

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	7		2	0	1	1

Transaction ID: SA11.406125

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. WILLIAM H. CLARK, III

Mailing Address 3716 MAPLEWOOD AVENUE

City

DALLAS

State

TX

Zip Code

75205-2827

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

610.00

Date of Receipt

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

Transaction ID: SA11.406871

Amount of Each Receipt this Period

110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. ELEANOR L. COBB

Mailing Address 131 S. VISTA STREET

City

LOS ANGELES

State

CA

Zip Code

90036-2707

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	3		2	0	1	1

Transaction ID: SA11.412990

Amount of Each Receipt this Period

400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1010.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 53 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. WAYLAN R. COBB

Mailing Address 14953 WORTHAM BEND ROAD

City

CHINA SPRING

State

TX

Zip Code

76633-2812

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

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

Transaction ID: SA11.407135

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WAYLAN R. COBB

Mailing Address 14953 WORTHAM BEND ROAD

City

CHINA SPRING

State

TX

Zip Code

76633-2812

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 9 / 2 0 1 1

Transaction ID: SA11.424990

Amount of Each Receipt this Period

105.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOHN P. COLE

Mailing Address P.O. BOX 6190

City

CAREFREE

State

AZ

Zip Code

85377-6190

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.417571

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

705.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 54 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. CHRISTOPHER W. COLLINS

Mailing Address 72 HARBOR STREET

City

MANCHESTER

State

MA

Zip Code

01944-1425

FEC ID number of contributing
federal political committee.

C

Name of Employer
FIRST ATLANTIC CAPITAL,
LLC

Occupation

REAL ESTATE INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.409583

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. GERALD F. CONWAY

Mailing Address 330 PAYSON ROAD

City

BELMONT

State

MA

Zip Code

02478-3403

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

FINANCIAL ADVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	7	/	2	0	1	1

Transaction ID: SA11.408832

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ALONZO D. COOK

Mailing Address 123 SECOND AVE APT 1113

City

SALT LAKE CITY

State

UT

Zip Code

84103-4764

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.413843

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5500.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 55 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. ROBERT W. COOK

Mailing Address 4701 SW ADMIRAL WAY

City

SEATTLE

State

WA

Zip Code

98116-2340

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	7	/	2	0	1	1

Transaction ID: SA11.410281

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. FREDERICK E. COOPER

Mailing Address 170 WEST PACES FERRY ROAD

City

ATLANTA

State

GA

Zip Code

30305-1352

FEC ID number of contributing
federal political committee.

C

Name of Employer
COOPER CAPITAL L.L.C.Occupation
BUSINESSMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	1	1

Transaction ID: SA11.417271

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. WILLIAM R. COOPER

Mailing Address 4320 ARMSTRONG PKWY.

City

DALLAS

State

TX

Zip Code

75205-3615

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	4	/	2	0	1	1

Transaction ID: SA11.415094

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 56 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. RICHARD A. CORBETT

Mailing Address 2202 N. WEST SHORE BLVD.
SUITE 110

City State Zip Code
TAMPA FL 33607-5749

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
REAL ESTATE DEVELOPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.420425

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WILLIAM C. CORRIGAN

Mailing Address 1888 EAST ARBUTUS LAKE ROAD

City State Zip Code
TRAVERSE CITY MI 49696-8903

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.409609

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. ROSEMARY COTTER

Mailing Address 4875 CHARING CROSS ROAD

City State Zip Code
BLOOMFIELD HILLS MI 48304-3679

FEC ID number of contributing
federal political committee.

C

Name of Employer
RARIDEN SCHUMACHER MIO &
CO.

Occupation
INTERIOR DESIGNERS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.417458

Amount of Each Receipt this Period

350.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5850.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 57 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. DONALD L. COUCH

Mailing Address 3035 LAKE BLUFF DRIVE

City

DECATUR

State

IL

Zip Code

62521-4834

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 1 / 2 0 1 1

Transaction ID: SA11.413893

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOHN F. COUGHLAN

Mailing Address 1555 STERLING DRIVE

City

MANASQUAN

State

NJ

Zip Code

08736-2511

FEC ID number of contributing
federal political committee.

C

Name of Employer
C.K.X., INC.

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.412057

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ROBERT C. COWEN

Mailing Address 2756 INDIAN SPRINGS ROAD

City

MARIANNA

State

FL

Zip Code

32446-6889

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 6 / 2 0 1 1

Transaction ID: SA11.408449

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1350.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 58 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. ROBERT C. COWEN

Mailing Address 2756 INDIAN SPRINGS ROAD

City

MARIANNA

State

FL

Zip Code

32446-6889

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

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

Transaction ID: SA11.413481

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROBERT C. COWEN

Mailing Address 2756 INDIAN SPRINGS ROAD

City

MARIANNA

State

FL

Zip Code

32446-6889

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	4	/	2	0	1	1

Transaction ID: SA11.416471

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ARCHIBALD COX, JR.

Mailing Address 151 E. 58TH STREET
APARTMENT 49A

City

NEW YORK

State

NY

Zip Code

10022-1370

FEC ID number of contributing
federal political committee.

C

Name of Employer
BARCLAY'SOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	5	/	2	0	1	1

Transaction ID: SA11.417667

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5350.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 59 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)
MRS. JUDY COX

Mailing Address 151 E. 58TH STREET
APARTMENT 49A

City State Zip Code
NEW YORK NY 10022-1370

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.417666

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. GORDON CRAWFORD

Mailing Address 520 GEORGIAN ROAD

City State Zip Code
LACANADA FLINTRIDG CA 91011-3546

FEC ID number of contributing
federal political committee.

C

Name of Employer
CAPITAL RESEARCH GLOBAL
INVESTORS

Occupation
PORTFOLIO MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.417662

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. R. STEVE CREAMER

Mailing Address 6451 E. BRIGHAM FORK CIRCLE

City State Zip Code
SALT LAKE CITY UT 84158

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 4 / 2 0 1 1

Transaction ID: SA11.413085

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MS. FLORA CAMERON CRICHTON

Mailing Address 315 WESTOVER ROAD

City

ALAMO HEIGHTS

State

TX

Zip Code

78209-5653

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	4	/	2	0	1	1

Transaction ID: SA11.414224

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. J. WILLIAM CROUCH

Mailing Address 4949 S. SYRACUSE STREET
STE. 430

City

DENVER

State

CO

Zip Code

80237-2747

FEC ID number of contributing
federal political committee.

C

Name of Employer
CROUCH MANAGEMENT

Occupation

PRESIDENT

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	7	/	2	0	1	1

Transaction ID: SA11.410283

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. CHRIS CRUTCHFIELD

Mailing Address P.O. BOX 1230

City

WILLIAMS

State

CA

Zip Code

95987-1230

FEC ID number of contributing
federal political committee.

C

Name of Employer
ACC

Occupation

C.E.O.

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	7	/	2	0	1	1

Transaction ID: SA11.417870

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 61 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. EDWARD ELLIOTT CRUTCHFIELD, JR.

Mailing Address 1901 ROXBOROUGH ROAD
SUITE 200

City	State	Zip Code
CHARLOTTE	NC	28211-4491

FEC ID number of contributing
federal political committee.**C**Name of Employer
CRUTCHFIELD CAPITAL, LLCOccupation
BUSINESS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	1	1

Transaction ID: SA11.417289

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. STEVEN H. CUNNINGHAM, JR.

Mailing Address 15 TRANQUILITY ROAD

City	State	Zip Code
MONETA	VA	24121-5373

FEC ID number of contributing
federal political committee.**C**Name of Employer
BELLA LUNA ASSET MANAGEME-
NTOccupation
C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.412278

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOHN C. CUSHMAN, III

Mailing Address 920 GRANITE DRIVE

City	State	Zip Code
PASADENA	CA	91101-3534

FEC ID number of contributing
federal political committee.**C**Name of Employer
CUSHMAN & WAKEFIELD, INC.Occupation
COMMERCIAL REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	5	/	2	0	1	1

Transaction ID: SA11.413185

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10500.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 62 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. THEODORE CUTLER

Mailing Address 33 COMMONWEALTH AVENUE

City

BOSTON

State

MA

Zip Code

02116-2353

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE INTERFACE GROUP

Occupation

VICE PRESIDENT

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	3		2	0	1	1

Transaction ID: SA11.412857

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. PAUL T. DACIER

Mailing Address 92 WOODLAND STREET

City

SHERBORN

State

MA

Zip Code

01770-1209

FEC ID number of contributing
federal political committee.

C

Name of Employer
E.M.C. CORPORATION

Occupation

ATTORNEY

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	3		2	0	1	1

Transaction ID: SA11.412863

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

SEE REATTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. KIMBERLY L. DACIER

Mailing Address 92 WOODLAND STREET

City

SHERBORN

State

MA

Zip Code

01770-1209

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	3		2	0	1	1

Transaction ID: SA11.412862

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION FROM SPOUSE**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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. PAUL T. DACIER

Mailing Address 92 WOODLAND STREET

City

SHERBORN

State

MA

Zip Code

01770-1209

FEC ID number of contributing
federal political committee.

C

Name of Employer
E.M.C. CORPORATION

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 3 / 2 0 1 1

Transaction ID: SA11.412863B

Amount of Each Receipt this Period

-5000.00

CONTRIBUTION

[MEMO ITEM]

REATTRIBUTION TO SPOUSE

B.

Full Name (Last, First, Middle Initial)

MR. MARK F. DALTON

Mailing Address 1A REIMER ROAD

City

SCARSDALE

State

NY

Zip Code

10583-2805

FEC ID number of contributing
federal political committee.

C

Name of Employer
TUDOR INVESTMENT CORPORAT-
ION

Occupation

INVESTMENT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 5 / 2 0 1 1

Transaction ID: SA11.411626

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. SUSAN DALTON

Mailing Address 1A REIMER ROAD

City

SCARSDALE

State

NY

Zip Code

10583-2805

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 5 / 2 0 1 1

Transaction ID: SA11.411622

Amount of Each Receipt this Period

5000.00

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 64 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

DR. MICHAEL DAUN

Mailing Address 8596 CONCORD HILLS CIR

City

CINCINNATI

State

OH

Zip Code

45243-1014

FEC ID number of contributing
federal political committee.

C

Name of Employer

TRI-STATE CENTERS FOR SIG-
HT

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	2	/	2	0	1	1

Transaction ID: SA11.416136

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. JAMES A. DAVIES

Mailing Address 14842 OAKLINE ROAD

City

POWAY

State

CA

Zip Code

92064-2917

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	4	/	2	0	1	1

Transaction ID: SA11.418969

Amount of Each Receipt this Period

3000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. EDWIN D. DAVIS

Mailing Address P.O. BOX 869

City

DAYTONA BEACH

State

FL

Zip Code

32115-0869

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

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

Transaction ID: SA11.406281

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

3300.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 65 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

DR. EDWIN D. DAVIS

Mailing Address P.O. BOX 869

City

DAYTONA BEACH

State

FL

Zip Code

32115-0869

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

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

Transaction ID: SA11.406673

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. EDWIN D. DAVIS

Mailing Address P.O. BOX 869

City

DAYTONA BEACH

State

FL

Zip Code

32115-0869

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

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

Transaction ID: SA11.412400

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. EDWIN D. DAVIS

Mailing Address P.O. BOX 869

City

DAYTONA BEACH

State

FL

Zip Code

32115-0869

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

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

Transaction ID: SA11.412401

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 66 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)
DR. EDWIN D. DAVIS

Mailing Address P.O. BOX 869

City State Zip Code
DAYTONA BEACH FL 32115-0869

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 1 / 2 0 1 1

Transaction ID: SA11.415862

Amount of Each Receipt this Period

35.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DR. EDWIN D. DAVIS

Mailing Address P.O. BOX 869

City State Zip Code
DAYTONA BEACH FL 32115-0869

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 0 / 2 0 1 1

Transaction ID: SA11.440196

Amount of Each Receipt this Period

75.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. SUSAN STRONG DAVIS

Mailing Address 1517 VIA LOPEZ

City State Zip Code
PALOS VERDES ESTAT CA 90274-1961

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 1 / 2 0 1 1

Transaction ID: SA11.414956

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

610.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 67 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. TERAN G. DAVIS

Mailing Address 4924 BALBOA BOULEVARD
P.M.B. 489

City State Zip Code
ENCINO CA 91316-3402

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 4 / 2 0 1 1

Transaction ID: SA11.415182

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WILLIAM LLOYD DAVIS

Mailing Address 4924 BALBOA BOULEVARD
P.M.B. 489

City State Zip Code
ENCINO CA 91316-3402

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
INVESTMENT & DEVELOPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 4 / 2 0 1 1

Transaction ID: SA11.415185

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JAMES C. DAY

Mailing Address 26 LINNEY BLVD.

City State Zip Code
SUGAR LAND TX 77479-2540

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
RANCHING/INVESTMENTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.420404

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. JEROME F. DEAN

Mailing Address P.O. BOX 529

City

GLADWYNE

State

PA

Zip Code

19035-0529

FEC ID number of contributing
federal political committee.

C

Name of Employer
KEYSTONE FOODS, L.L.C.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 3 / 2 0 1 1

Transaction ID: SA11.410044

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JAMES DEASY

Mailing Address 2 GREENFIELD AVENUE

City

BRONXVILLE

State

NY

Zip Code

10708-2502

FEC ID number of contributing
federal political committee.

C

Name of Employer
WEDGE PARTNERS

Occupation

TRADER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.407206

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

LYNN DEBRY

Mailing Address 4223 CAMILLE DR.

City

SALT LAKE CITY

State

UT

Zip Code

84124-2802

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.418557

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

8000.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 69 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. KEVIN DELBRIDGE

Mailing Address 10 ANDREA DRIVE

City

HOPKINTON

State

MA

Zip Code

01748-2027

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	4	/	2	0	1	1

Transaction ID: SA11.413087

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WILLIAM R. DELONG

Mailing Address 242 ALTON MOUNTAIN ROAD

City

ALTON BAY

State

NH

Zip Code

03810-4314

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	5	/	2	0	1	1

Transaction ID: SA11.417746

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ANTHONY F. DELUCA

Mailing Address 3195 INWOOD DRIVE

City

HOUSTON

State

TX

Zip Code

77019-3225

FEC ID number of contributing
federal political committee.

C

Name of Employer
S.C.F PARTNERS

Occupation

INVESTMENT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	5	/	2	0	1	1

Transaction ID: SA11.415355

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 70 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. ELIZABETH DELUCA

Mailing Address 3195 INWOOD DRIVE

City

HOUSTON

State

TX

Zip Code

77019-3225

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 5 / 2 0 1 1

Transaction ID: SA11.415351

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROBERT DEPHILIPPIS

Mailing Address 1391 CORONA VIS

City

BONITA

State

CA

Zip Code

91902-2573

FEC ID number of contributing
federal political committee.

C

Name of Employer
BOBBY D. ENT. INC.

Occupation

RESTAURANTEUR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.413216

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. MATTHEW DESALVO

Mailing Address 52 DAWN HARBOR LANE

City

RIVERSIDE

State

CT

Zip Code

06878-2609

FEC ID number of contributing
federal political committee.

C

Name of Employer
CREDIT SUISSE

Occupation

EQUITIES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: SA11.412648

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

7250.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 71 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. LILY H. DESJARDINS

Mailing Address 50 ENDICOTT STREET
UNIT 2221

City State Zip Code
DANVERS MA 01923-4819

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: SA11.409923

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. LILY H. DESJARDINS

Mailing Address 50 ENDICOTT STREET
UNIT 2221

City State Zip Code
DANVERS MA 01923-4819

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: SA11.412746

Amount of Each Receipt this Period

75.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. JULIA C. DEVLIN

Mailing Address 2700 VIRGINIA AVENUE
APARTMENT 808

City State Zip Code
WASHINGTON DC 20037-1909

FEC ID number of contributing
federal political committee.

C

Name of Employer
WORLD BANK

Occupation
ECONOMIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 3 / 2 0 1 1

Transaction ID: SA11.405807

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1225.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 72 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. DANIEL DEVOS

Mailing Address P.O. BOX 248

City

ADA

State

MI

Zip Code

49301-0248

FEC ID number of contributing
federal political committee.**C**Name of Employer
DP FOX VENTURES LLCOccupation
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.409745

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. EUGENE C. DIAMOND

Mailing Address 12109 S. 87TH AVENUE

City

PALOS PARK

State

IL

Zip Code

60464-1206

FEC ID number of contributing
federal political committee.**C**Name of Employer
S.S.F.H.S. INC.Occupation
HEALTHCARE EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	3	/	2	0	1	1

Transaction ID: SA11.414123

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ALAN T. DICKSON

Mailing Address 301 S. TYRON STREET
SUITE 1800

City

CHARLOTTE

State

NC

Zip Code

28202-2138

FEC ID number of contributing
federal political committee.**C**Name of Employer
RUDDICK CORPORATIONOccupation
CHAIRMAN, PRESIDENT, & C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	3	1	/	2	0	1	1

Transaction ID: SA11.409276

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6250.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 73 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. ALLEN DICKSON

Mailing Address P.O. BOX 5845

City

SHREVEPORT

State

LA

Zip Code

71135-5845

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.406316

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. PAUL DICKSON

Mailing Address 24301 66TH ST E

City

BUCKLEY

State

WA

Zip Code

98321-8766

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 3 / 2 0 1 1

Transaction ID: SA11.410143

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ROBERT A. DOLSON

Mailing Address 54 RIVER MARSH LANE

City

JOHNS ISLAND

State

SC

Zip Code

29455-5202

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.417551

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 74 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. JAMES K. DONAGHY

Mailing Address 10 LONE CEDAR WAY

City

OLD TAPPAN

State

NJ

Zip Code

07675-7462

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.411059

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. CHRISTINA W. DONOVAN

Mailing Address 1235 DELAPLANE GRADE ROAD

City

UPPERVILLE

State

VA

Zip Code

20184-1733

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

HOMEMAKER

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 7 / 2 0 1 1

Transaction ID: SA11.414445

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JAMES H. DONOVAN

Mailing Address 1235 DELAPLANE GRADE ROAD

City

UPPERVILLE

State

VA

Zip Code

20184-1733

FEC ID number of contributing
federal political committee.

C

Name of Employer
GOLDMAN SACH & CO.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INVESTMENT BANKER

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 7 / 2 0 1 1

Transaction ID: SA11.414446

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 75 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. STEPHEN L. DOUGLASS

Mailing Address 18008 N.E. 81ST CIRCLE

City

VANCOUVER

State

WA

Zip Code

98682-9461

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

445.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	1	1

Transaction ID: SA11.416889

Amount of Each Receipt this Period

445.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. KATHERINE C.S. DOWNES

Mailing Address 106 LAURISTON STREET

City

PROVIDENCE

State

RI

Zip Code

02906-3643

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.00

Date of Receipt

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

Transaction ID: SA11.406823

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. KATHERINE C.S. DOWNES

Mailing Address 106 LAURISTON STREET

City

PROVIDENCE

State

RI

Zip Code

02906-3643

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	3		2	0	1	1

Transaction ID: SA11.412904

Amount of Each Receipt this Period

83.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

628.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 76 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. KATHERINE C.S. DOWNES

Mailing Address 106 LAURISTON STREET

City

PROVIDENCE

State

RI

Zip Code

02906-3643

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.418019

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. HUDSON B. DRAKE

Mailing Address 1707 SOLEDAD AVENUE

City

LA JOLLA

State

CA

Zip Code

92037-3819

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 0 / 2 0 1 1

Transaction ID: SA11.414902

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. WILLIAM H. DRAPER, III

Mailing Address 50 CALIFORNIA ST,
STE 2925

City

SAN FRANCISCO

State

CA

Zip Code

94111-4779

FEC ID number of contributing
federal political committee.

C

Name of Employer
DRAPER RICHARDS LP

Occupation

GENERAL PARTNER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 7 / 2 0 1 1

Transaction ID: SA11.415590

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10100.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 77 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. ALAN DREEBEN

Mailing Address 6511 TRI COUNTY PARKWAY

City

SCHERTZ

State

TX

Zip Code

78154-3219

FEC ID number of contributing
federal political committee.

C

Name of Employer
REPUBLIC NATIONAL DISTRIB-
UTING COMPANYOccupation
PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	9	/	2	0	1	1

Transaction ID: SA11.417007

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RICHARD DRESDALE

Mailing Address 29 PRESCOTT AVENUE

City

BRONXVILLE

State

NY

Zip Code

10708-3014

FEC ID number of contributing
federal political committee.

C

Name of Employer
FENWAY PARTNERS, INC.Occupation
MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	4	/	2	0	1	1

Transaction ID: SA11.414184

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

REFUNDED \$5,000.00 ON 02/-
14/2011**C.**

Full Name (Last, First, Middle Initial)

MRS. CAROL MCCARTHY DUHME

Mailing Address 1 MCKNIGHT PLACE
APARTMENT 484

City

SAINT LOUIS

State

MO

Zip Code

63124-2235

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	3	1	/	2	0	1	1

Transaction ID: SA11.409159

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

15200.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 78 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)
MRS. CAROL MCCARTHY DUHME

Mailing Address 1 MCKNIGHT PLACE
APARTMENT 484

City State Zip Code
SAINT LOUIS MO 63124-2235

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 8 / 2 0 1 1

Transaction ID: SA11.416871

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. STEVEN STEVEN DUNCKER

Mailing Address 201 E 80TH ST

City State Zip Code
NEW YORK NY 10075-0511

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 5 / 2 0 1 1

Transaction ID: SA11.425172

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

REFUNDED \$5,000.00 ON 03/-
04/2011

C.

Full Name (Last, First, Middle Initial)
CAPT. JAMES M. DUNLOP, USN (RET.)

Mailing Address 1007 MARVONE LANE

City State Zip Code
NEPTUNE BEACH FL 32266-3615

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 6 / 2 0 1 1

Transaction ID: SA11.408572

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10400.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 79 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.Full Name (Last, First, Middle Initial)
CAPT. JAMES M. DUNLOP, USN (RET.)

Mailing Address 1007 MARVONE LANE

City	State	Zip Code
NEPTUNE BEACH	FL	32266-3615

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	1	1

Transaction ID: SA11.414236

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.Full Name (Last, First, Middle Initial)
CAPT. JAMES M. DUNLOP, USN (RET.)

Mailing Address 1007 MARVONE LANE

City	State	Zip Code
NEPTUNE BEACH	FL	32266-3615

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	1	1

Transaction ID: SA11.418235

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.Full Name (Last, First, Middle Initial)
MR. ALEX DUNN

Mailing Address 1158 WEST 2850 NORTH

City	State	Zip Code
PLEASANT GROVE	UT	84062-6701

FEC ID number of contributing
federal political committee.**C**Name of Employer
VIVINTOccupation
C.O.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	4		2	0	1	1

Transaction ID: SA11.413084

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5400.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 80 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. DEBBIE DUNN

Mailing Address 1158 WEST 2850 NORTH

City

PLEASANT GROVE

State

UT

Zip Code

84062-6701

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 4 / 2 0 1 1

Transaction ID: SA11.413081

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. E. TERESA DYKE

Mailing Address 812 ALHAMBRA CIRCLE

City

CORAL GABLES

State

FL

Zip Code

33134-4810

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.418539

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. THERESA WILLIAMS EATON

Mailing Address 4017 ELLA LEE LANE

City

HOUSTON

State

TX

Zip Code

77027-3910

FEC ID number of contributing
federal political committee.

C

Name of Employer
S.C.F. PARTNERS

Occupation

FINANCE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 1 1

Transaction ID: SA11.410472

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 81 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. WESLEY H. EATON

Mailing Address 304 BROOKSBY VILLAGE DRIVE #308

City

PEABODY

State

MA

Zip Code

01960-8583

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 1 1

Transaction ID: SA11.409506

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WESLEY H. EATON

Mailing Address 304 BROOKSBY VILLAGE DRIVE #308

City

PEABODY

State

MA

Zip Code

01960-8583

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 8 / 2 0 1 1

Transaction ID: SA11.415748

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. WILLIAM EDGERLY

Mailing Address 32 HIGHLAND STREET

City

CAMBRIDGE

State

MA

Zip Code

02138-2210

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 1 / 2 0 1 1

Transaction ID: SA11.415875

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 82 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. RAYMOND D. EDWARDS

Mailing Address 110 LA CERRA DRIVE

City

PALM DESERT

State

CA

Zip Code

92260

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	7	/	2	0	1	1

Transaction ID: SA11.406137

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RAYMOND D. EDWARDS

Mailing Address 110 LA CERRA DRIVE

City

PALM DESERT

State

CA

Zip Code

92260

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	3	/	2	0	1	1

Transaction ID: SA11.410041

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. HEATHER A. EGAN

Mailing Address 74 TRINITY PLACE

City

NEW YORK

State

NY

Zip Code

10006-2003

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	7	/	2	0	1	1

Transaction ID: SA11.410469

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5500.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 83 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. GREGORY EHLERS

Mailing Address 62 SOUTHFIELD AVENUE
SUITE 114

City	State	Zip Code
STAMFORD	CT	06902-7229

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAVIGATE ADVISORSOccupation
MANAGING PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.411055

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. FRAN EIGENDORFF

Mailing Address 15 NORTHERN AVENUE

City	State	Zip Code
BRONXVILLE	NY	10708-2204

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.407200

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RICHARD EIGENDORFF

Mailing Address 15 NORTHERN AVENUE

City	State	Zip Code
BRONXVILLE	NY	10708-2204

FEC ID number of contributing
federal political committee.

C

Name of Employer
VIACOMOccupation
C.O.O. M.T.V. NETWORKS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.407205

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 84 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. ERNEST ELLISON, II

Mailing Address 6720 CHURCHILL PARK COURT

City

CHARLOTTE

State

NC

Zip Code

28210-3480

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 7 / 2 0 1 1

Transaction ID: SA11.406071

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ERNEST ELLISON, II

Mailing Address 6720 CHURCHILL PARK COURT

City

CHARLOTTE

State

NC

Zip Code

28210-3480

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: SA11.407534

Amount of Each Receipt this Period

400.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RAYMOND G. ELLIS

Mailing Address 12460 ANDERSON RIDGE PLACE

City

SAN DIEGO

State

CA

Zip Code

92130-6846

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 4 / 2 0 1 1

Transaction ID: SA11.415184

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5600.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 85 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. ELLIOTT ETHEREDGE

Mailing Address 10 WHALING ROAD

City

DARIEN

State

CT

Zip Code

06820-5930

FEC ID number of contributing
federal political committee.

C

Name of Employer
DAHLMAN ROSS & COMPANY

Occupation

INVESTMENT BANKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 1 1

Transaction ID: SA11.410387

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. GENEVIEVE M. FALES

Mailing Address 11 BURRELL COURT

City

MIDLAND

State

MI

Zip Code

48640-3360

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.413714

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. GARY S. FARMER

Mailing Address 309 LAKE CLIFF TRAIL

City

AUSTIN

State

TX

Zip Code

78746-4678

FEC ID number of contributing
federal political committee.

C

Name of Employer
HERITAGE TITLE COMPANY

Occupation

PRESIDENT

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 3 / 2 0 1 1

Transaction ID: SA11.410053

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2250.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 86 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

DR. WILLIAM K. FARRAR, JR.

Mailing Address 2282 TAYSIDE XING NW

City

KENNESAW

State

GA

Zip Code

30152-6722

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

ORTHODONTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11.409596

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. WILLIAM K. FARRAR, JR.

Mailing Address 2282 TAYSIDE XING NW

City

KENNESAW

State

GA

Zip Code

30152-6722

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

ORTHODONTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	8	/	2	0	1	1

Transaction ID: SA11.419418

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. SAFA P. FARZIN

Mailing Address 2376 JESSAMY COURT

City

HARRISBURG

State

PA

Zip Code

17112-6020

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	5	/	2	0	1	1

Transaction ID: SA11.417762

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

550.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 87 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

DR. SAFA P. FARZIN

Mailing Address 2376 JESSAMY COURT

City

HARRISBURG

State

PA

Zip Code

17112-6020

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.418104

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. AUDREY R. FAUST

Mailing Address 601 SW BAY POINTE CIRCLE

City

PALM CITY

State

FL

Zip Code

34990-1753

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 2 / 2 0 1 1

Transaction ID: SA11.416233

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOHN J. FAUTH

Mailing Address 1599 GALLEON DRIVE

City

NAPLES

State

FL

Zip Code

34102-7715

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 3 / 2 0 1 1

Transaction ID: SA11.466937

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

REFUNDED \$5,000.00 ON 05/-
25/2011

SUBTOTAL of Receipts This Page (optional)

10350.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 88 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. THOMAS W. FELLER

Mailing Address 27 MERRY MEETING DRIVE

City

MERRIMACK

State

NH

Zip Code

03054-2934

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	6	/	2	0	1	1

Transaction ID: SA11.411686

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. JOAN J. FELLOWS

Mailing Address 5 HIGH POINT CIRCLE SW
APARTMENT 105

City

NAPLES

State

FL

Zip Code

34103-8345

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	4	/	2	0	1	1

Transaction ID: SA11.407947

Amount of Each Receipt this Period

35.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. JOAN J. FELLOWS

Mailing Address 5 HIGH POINT CIRCLE SW
APARTMENT 105

City

NAPLES

State

FL

Zip Code

34103-8345

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	3	/	2	0	1	1

Transaction ID: SA11.410042

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

310.00

TOTAL This Period (last page this line number only)

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)
MS. JOAN J. FELLOWS

Mailing Address 5 HIGH POINT CIRCLE SW
APARTMENT 105

City State Zip Code
NAPLES FL 34103-8345

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: SA11.413449

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. JOAN J. FELLOWS

Mailing Address 5 HIGH POINT CIRCLE SW
APARTMENT 105

City State Zip Code
NAPLES FL 34103-8345

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 8 / 2 0 1 1

Transaction ID: SA11.415726

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. BARBARA C. FERGUSON

Mailing Address 1006 DORIC CIRCLE

City State Zip Code
LOUISVILLE KY 40205-1734

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.419527

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1150.00

TOTAL This Period (last page this line number only)

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. WILLIAM JOSEPH FERGUSON

Mailing Address 16 MARIANNE ROAD

City

DARIEN

State

CT

Zip Code

06820-2330

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 4 / 2 0 1 1

Transaction ID: SA11.413097

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RONALD A. FERRIN

Mailing Address 5288 HAVENWOOD LANE

City

SALT LAKE CITY

State

UT

Zip Code

84117-7116

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

GENERAL CONSTRUCTION

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.418951

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. C. KENNETH FIBUS

Mailing Address 190 N. MERIDIAN ROAD
#2000

City

YOUNGSTOWN

State

OH

Zip Code

44509-2036

FEC ID number of contributing
federal political committee.

C

Name of Employer
DINESOL PLASTICS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

EXECUTIVE

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 7 / 2 0 1 1

Transaction ID: SA11.414343

Amount of Each Receipt this Period

500.00

CONTRIBUTION

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)
for each category of the
Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. C. KENNETH FIBUS

Mailing Address 190 N. MERIDIAN ROAD
#2000

City State Zip Code
YOUNGSTOWN OH 44509-2036

FEC ID number of contributing
federal political committee.

C

Name of Employer
DINESOL PLASTICS

Occupation
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 7 / 2 0 1 1

Transaction ID: SA11.415500

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOHN M. FIFE

Mailing Address 360 E. RANDOLPH STREET
APARTMENT 500

City State Zip Code
CHICAGO IL 60601-7331

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
INVESTMENTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.418800

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. ROBERT A. FILES

Mailing Address 10418 E. CELESTIAL DRIVE

City State Zip Code
SCOTTSDALE AZ 85262-5120

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: SA11.406891

Amount of Each Receipt this Period

400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1150.00

TOTAL This Period (last page this line number only)

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

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

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(check only one)

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

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)
MRS. MARJORIE S. FISHER

Mailing Address 920 N. LAKE WAY

City State Zip Code
PALM BEACH FL 33480-3323

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 7 / 2 0 1 1

Transaction ID: SA11.414294

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. MICHAEL E. FITZGERALD

Mailing Address 8 LAURELWOOD

City State Zip Code
BERNARDSVILLE NJ 07924-2115

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 4 / 2 0 1 1

Transaction ID: SA11.411377

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. MICHAEL E. FITZGERALD

Mailing Address 8 LAURELWOOD

City State Zip Code
BERNARDSVILLE NJ 07924-2115

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 4 / 2 0 1 1

Transaction ID: SA11.415027

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5300.00

TOTAL This Period (last page this line number only)

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. PETER G. FITZGERALD

Mailing Address 1445A LAUGHLIN AVENUE

City

MCLEAN

State

VA

Zip Code

22101-5709

FEC ID number of contributing
federal political committee.

C

Name of Employer
CHAIN BRIDGE BANK, N.A.

Occupation
CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 3 / 2 0 1 1

Transaction ID: SA11.412875

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ART FLAMING

Mailing Address 4437 TWAIN AVENUE

City

SAN DIEGO

State

CA

Zip Code

92120-3405

FEC ID number of contributing
federal political committee.

C

Name of Employer
TIERRA CORPORATION

Occupation
PRESIDENT/OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 3 / 2 0 1 1

Transaction ID: SA11.412925

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. GARTH E. FLAMM

Mailing Address 26 EAST 2ND NORTH

City

REXBURG

State

ID

Zip Code

83440-1513

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
MORTICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.419427

Amount of Each Receipt this Period

220.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5720.00

TOTAL This Period (last page this line number only)

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. KIM FLETCHER

Mailing Address 530 LOMAS SANTA FE DRIVE
SUITE C.

City State Zip Code
SOLANA BEACH CA 92075-1346

FEC ID number of contributing
federal political committee.

C

Name of Employer
INVESTORS LEASING CORPORA-
TION

Occupation
REAL ESTATE INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 10 / 2011

Transaction ID: SA11.414895

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. MARILYN A. FLETCHER

Mailing Address P.O. BOX 1881

City State Zip Code
RANCHO SANTA FE CA 92067-1881

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 10 / 2011

Transaction ID: SA11.414892

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. SARAH FLINT

Mailing Address 1752 S. FERNSIDE DRIVE

City State Zip Code
TACOMA WA 98465-1309

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 28 / 2011

Transaction ID: SA11.416842

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10500.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. DANIEL F. FLOWERS

Mailing Address 3001 INWOOD DRIVE

City

HOUSTON

State

TX

Zip Code

77019-3223

FEC ID number of contributing
federal political committee.

C

Name of Employer
SENTINEL TRUST COMPANY,
L.B.A.

Occupation
DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 4 / 2 0 1 1

Transaction ID: SA11.415030

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOSEPH G. FOGG, III

Mailing Address 4295 CUTLASS LANE

City

NAPLES

State

FL

Zip Code

34102-7960

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 5 / 2 0 1 1

Transaction ID: SA11.424447

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. THOMAS C. FOLEY

Mailing Address 62 KHAKUM WOOD ROAD

City

GREENWICH

State

CT

Zip Code

06831-3748

FEC ID number of contributing
federal political committee.

C

Name of Employer
N.T.C. GROUP, INC.

Occupation
FOUNDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.418257

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

8500.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)
MS. JENNIFER FONSTAD

Mailing Address 64 RIDGE VIEW DRIVE

City State Zip Code
ATHERTON CA 94027-6464

FEC ID number of contributing
federal political committee.

C

Name of Employer
DRAPER FISHER JURVETSON

Occupation
MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.418168

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. EDWARD L. FORD

Mailing Address 195 MEADOWLARK DRIVE

City State Zip Code
ALPINE UT 84004-1374

FEC ID number of contributing
federal political committee.

C

Name of Employer
ED FORD AN ASSOCIATES

Occupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 4 / 2 0 1 1

Transaction ID: SA11.414219

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. DEBBIE FORREST

Mailing Address 1440 N. 40TH ST #4

City State Zip Code
MESA AZ 85205-3910

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.417869

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10250.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 97 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. EDWARD CODD FORST

Mailing Address 47 VALLEY ROAD

City

BRONXVILLE

State

NY

Zip Code

10708-2211

FEC ID number of contributing
federal political committee.

C

Name of Employer
GOLDMAN SACH & CO.

Occupation

FINANCIAL SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.407194

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. SUSAN FORST

Mailing Address 47 VALLEY ROAD

City

BRONXVILLE

State

NY

Zip Code

10708-2211

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.411076

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. JENNIFER L. FOSTER

Mailing Address 36 CROOLAD MILE

City

DARIEN

State

CT

Zip Code

06820

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.411074

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 98 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)
MS. ANN FOX

Mailing Address 201 MAIN STREET
#5B

City State Zip Code
HOUSTON TX 77002-1748

FEC ID number of contributing
federal political committee.

C

Name of Employer
SCF PARTNERS

Occupation
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 5 / 2 0 1 1

Transaction ID: SA11.411620

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. GREGORY A. FOX

Mailing Address 24 UPPER LADUE ROAD

City State Zip Code
ST. LOUIS MO 63124-1675

FEC ID number of contributing
federal political committee.

C

Name of Employer
HARBOUR GROUP

Occupation
GROUP PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.419398

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JEFFREY L. FOX

Mailing Address 26 BRENTMOOR PARK

City State Zip Code
ST. LOUIS MO 63105-3070

FEC ID number of contributing
federal political committee.

C

Name of Employer
HARBOUR GROUP

Occupation
C.E.O. & C.O.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.419399

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

8500.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 99 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. LISELOTTE M. FOX

Mailing Address 26 BRENTMAN PIKE
SUITE 600City State Zip Code
ST. LOUIS MO 63105FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	1

Transaction ID: SA11.419390

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. MARILYN R. FOX

Mailing Address 23 CARSWOLD

City State Zip Code
ST. LOUIS MO 63105-2913FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	1

Transaction ID: SA11.419387

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. MERLE A. FOX

Mailing Address 24 UPPER LADUE ROAD

City State Zip Code
ST. LOUIS MO 63124-1675FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	1

Transaction ID: SA11.419391

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 100 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. SAM FOX

Mailing Address 23 CARRSWOLD DRIVE

City

ST. LOUIS

State

MO

Zip Code

63105-2913

FEC ID number of contributing
federal political committee.

C

Name of Employer
HARBOUR GROUP

Occupation
FOUNDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.419397

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. EDWIN FRANK, III

Mailing Address 5773 WOODWAY, BOX 403

City

HOUSTON

State

TX

Zip Code

77057-1501

FEC ID number of contributing
federal political committee.

C

Name of Employer
INDEMCO LP

Occupation
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 1 1

Transaction ID: SA11.417333

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. KENNETH R. FRANKLIN

Mailing Address 60 CAVALCADE BLVD.

City

WARWICK

State

RI

Zip Code

02889-1605

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 6 / 2 0 1 1

Transaction ID: SA11.408546

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

7600.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 101 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. KENNETH R. FRANKLIN

Mailing Address 60 CAVALCADE BLVD.

City

WARWICK

State

RI

Zip Code

02889-1605

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	7	/	2	0	1	1

Transaction ID: SA11.411793

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. KENNETH R. FRANKLIN

Mailing Address 60 CAVALCADE BLVD.

City

WARWICK

State

RI

Zip Code

02889-1605

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	7	/	2	0	1	1

Transaction ID: SA11.414353

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. KENNETH R. FRANKLIN

Mailing Address 60 CAVALCADE BLVD.

City

WARWICK

State

RI

Zip Code

02889-1605

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	8	/	2	0	1	1

Transaction ID: SA11.415669

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 102 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. KENNETH R. FRANKLIN

Mailing Address 60 CAVALCADE BLVD.

City

WARWICK

State

RI

Zip Code

02889-1605

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 5 / 2 0 1 1

Transaction ID: SA11.416741

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. KENNETH R. FRANKLIN

Mailing Address 60 CAVALCADE BLVD.

City

WARWICK

State

RI

Zip Code

02889-1605

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.417611

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. ALLISON HANLEY FRANTZ

Mailing Address 123 MEADOW ROAD

City

RIVERSIDE

State

CT

Zip Code

06878-2521

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 3 / 2 0 1 1

Transaction ID: SA11.412866

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5150.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 103 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. LEROY SCOTT FRANTZ

Mailing Address 123 MEADOW ROAD

City

RIVERSIDE

State

CT

Zip Code

06878-2521

FEC ID number of contributing
federal political committee.**C**Name of Employer
HAEBLER CAPITAL

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	3		2	0	1	1

Transaction ID: SA11.412867

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. T. BONDURANT FRENCH

Mailing Address 692 LENOX ROAD

City

GLEN ELLYN

State

IL

Zip Code

60137-4270

FEC ID number of contributing
federal political committee.**C**Name of Employer
ADAMS STREET PARTNERS

Occupation

C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	1	1

Transaction ID: SA11.417010

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOSHUA S. FRIEDMAN

Mailing Address 248 S. MAPLETON DRIVE

City

LOS ANGELES

State

CA

Zip Code

90024-1805

FEC ID number of contributing
federal political committee.**C**Name of Employer
CANYON PARTNERS, L.L.C.

Occupation

INVESTMENT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	1		2	0	1	1

Transaction ID: SA11.416079

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 104 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. CRAIG FULLER

Mailing Address 8516 OLD DOMINION DR

City

MCLEAN

State

VA

Zip Code

22102-1214

FEC ID number of contributing
federal political committee.

C

Name of Employer
AOPA

Occupation

ASSOCIATION EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	5		2	0	1	1

Transaction ID: SA11.408196

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. THEODORE J. FULLER

Mailing Address P.O. BOX 9223

City

INCLINE VILLAGE

State

NV

Zip Code

89452-9223

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	1	1

Transaction ID: SA11.411560

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. IRA FULTON

Mailing Address 4455 S. JAMES PLACE

City

CHANDLER

State

AZ

Zip Code

85248-5146

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	1	1

Transaction ID: SA11.418261

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. MARY LOU FULTON

Mailing Address 4455 S. JAMES PLACE

City

CHANDLER

State

AZ

Zip Code

85248-5146

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.418260

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. EVANGELINE B. FUSSCAS

Mailing Address 249 LINDEN STREET

City

MANCHESTER

State

NH

Zip Code

03104-3319

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11.407351

Amount of Each Receipt this Period

75.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. EVANGELINE B. FUSSCAS

Mailing Address 249 LINDEN STREET

City

MANCHESTER

State

NH

Zip Code

03104-3319

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11.410936

Amount of Each Receipt this Period

75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5150.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 106 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. EVANGELINE B. FUSSCAS

Mailing Address 249 LINDEN STREET

City

MANCHESTER

State

NH

Zip Code

03104-3319

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 4 / 2 0 1 1

Transaction ID: SA11.413128

Amount of Each Receipt this Period

75.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. EVANGELINE B. FUSSCAS

Mailing Address 249 LINDEN STREET

City

MANCHESTER

State

NH

Zip Code

03104-3319

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 8 / 2 0 1 1

Transaction ID: SA11.415711

Amount of Each Receipt this Period

75.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ANDREW A. GABEL

Mailing Address 9811 W. CHARLESTON BLVD.
SUITE 2638

City

LAS VEGAS

State

NV

Zip Code

89117-7528

FEC ID number of contributing
federal political committee.

C

Name of Employer
GABEL DISTRIBUTORS

Occupation
PRESIDENT - HEALTHCARE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 1 1

Transaction ID: SA11.417283

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2150.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 107 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.Full Name (Last, First, Middle Initial)
MRS. JOI REINER GALLO

Mailing Address 1120 BOSTON POST ROAD #100

City	State	Zip Code
DARIEN	CT	06820-5435

FEC ID number of contributing
federal political committee.

C

Name of Employer
FIVE MILEOccupation
C.P.A.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.411050

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.Full Name (Last, First, Middle Initial)
MR. IRA GANGERMailing Address 412 SEVENTH AVENUE
NINTH FLOOR

City	State	Zip Code
NEW YORK	NY	10018

FEC ID number of contributing
federal political committee.

C

Name of Employer
AMEREX GROUP L.L.C.Occupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	7	/	2	0	1	1

Transaction ID: SA11.432212A

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

CHARGED BACK \$5,000.00 ON
04/27/2011**C.**Full Name (Last, First, Middle Initial)
MR. IRA GANGERMailing Address 412 SEVENTH AVENUE
NINTH FLOOR

City	State	Zip Code
NEW YORK	NY	10018

FEC ID number of contributing
federal political committee.

C

Name of Employer
AMEREX GROUP L.L.C.Occupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	7	/	2	0	1	1

Transaction ID: SA11.432212B

Amount of Each Receipt this Period

-5000.00

CONTRIBUTION

CHARGED BACK

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 108 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. CAROLYN BARNES GARDNER

Mailing Address 1510 CANTERBURY DRIVE

City

SALT LAKE CITY

State

UT

Zip Code

84108-2833

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.418955

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. J. REX GARDNER

Mailing Address 1212 AVALON DRIVE

City

SPRINGVILLE

State

UT

Zip Code

84663-3559

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 3 / 2 0 1 1

Transaction ID: SA11.412957

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. J. REX GARDNER

Mailing Address 1212 AVALON DRIVE

City

SPRINGVILLE

State

UT

Zip Code

84663-3559

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 8 / 2 0 1 1

Transaction ID: SA11.415662

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5300.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 109 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

DR. JAMES GARDNER

Mailing Address 2612 MARQUE HILL ROAD

City

MANHATTAN

State

KS

Zip Code

66502-1823

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

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

Transaction ID: SA11.406528

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. JAMES GARDNER

Mailing Address 2612 MARQUE HILL ROAD

City

MANHATTAN

State

KS

Zip Code

66502-1823

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11.419846

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. KEM C. GARDNER

Mailing Address 1510 CANTERBURY DRIVE

City

SALT LAKE CITY

State

UT

Zip Code

84108-2833

FEC ID number of contributing
federal political committee.

C

Name of Employer
GARDNER COMPANY

Occupation

REAL ESTATE DEVELOPMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.418957

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5700.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 110 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. IRENE H. GARRETT

Mailing Address 9475 RIVERCLUB PARKWAY

City

DULUTH

State

GA

Zip Code

30097-2410

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	1	1

Transaction ID: SA11.409272

Amount of Each Receipt this Period

110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. IRENE H. GARRETT

Mailing Address 9475 RIVERCLUB PARKWAY

City

DULUTH

State

GA

Zip Code

30097-2410

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

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

Transaction ID: SA11.411197

Amount of Each Receipt this Period

110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. TOM GEDE

Mailing Address 1210 ROSARIO ST

City

DAVIS

State

CA

Zip Code

95618-5041

FEC ID number of contributing
federal political committee.

C

Name of Employer
BINGHAM CONSULTING GROUP
LLCOccupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	1

Transaction ID: SA11.417872

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5220.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 111 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. PHILIP H. GEIER

Mailing Address 70 E. 55TH STREET
15TH FLOOR

City

NEW YORK

State

NY

Zip Code

10022-3386

FEC ID number of contributing
federal political committee.

C

Name of Employer
GEIER GROUP L.L.C.Occupation
C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.407219

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. BRUCE S. GELB

Mailing Address 1060 5TH AVENUE #10B

City

NEW YORK

State

NY

Zip Code

10128-0104

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	5	/	2	0	1	1

Transaction ID: SA11.411615

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. KARA Y. GEORGIOPOULOS

Mailing Address 47 CHARLES STREET

City

NEW YORK

State

NY

Zip Code

10014-2735

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.411066

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 112 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. PETER C. GEORGIOPOULOS

Mailing Address 299 PARK AVENUE

City

NEW YORK

State

NY

Zip Code

10171-0002

FEC ID number of contributing
federal political committee.

C

Name of Employer
GENERAL MAINTENANCEOccupation
CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.411067

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DOUGLAS E. GETTEL

Mailing Address 266 ELM STREET

City

BIRMINGHAM

State

MI

Zip Code

48009-6337

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	3	/	2	0	1	1

Transaction ID: SA11.412985

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DOUGLAS E. GETTEL

Mailing Address 266 ELM STREET

City

BIRMINGHAM

State

MI

Zip Code

48009-6337

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	2	/	2	0	1	1

Transaction ID: SA11.418525

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5400.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 113 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)
MS. DIANA GIBBONS

Mailing Address 17 STABLE COURT

City State Zip Code
EAST NORWICH NY 11732-1696

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.413215

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. KEVIN GIBLIN

Mailing Address 259 TURNPIKE ROAD
SUITE 110

City State Zip Code
SOUTHBOROUGH MA 01772-1706

FEC ID number of contributing
federal political committee.

C

Name of Employer
BRENDON PROPERTIES

Occupation
DEVELOPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.420400

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. PAUL E. GILBERT

Mailing Address 4800 NORTH SCOTTSDALE ROAD
SUITE 6000

City State Zip Code
SCOTTSDALE AZ 85251-7616

FEC ID number of contributing
federal political committee.

C

Name of Employer
BEUS GILBERT LAW FIRM

Occupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 4 / 2 0 1 1

Transaction ID: SA11.413086

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10250.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 114 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. WILLIAM L. GILBERT

Mailing Address 337 TIMBER RIDGE COURT W.

City

RIDGELAND

State

MS

Zip Code

39157-3537

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 4 / 2 0 1 1

Transaction ID: SA11.411281

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WILLIAM L. GILBERT

Mailing Address 337 TIMBER RIDGE COURT W.

City

RIDGELAND

State

MS

Zip Code

39157-3537

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 9 / 2 0 1 1

Transaction ID: SA11.417147

Amount of Each Receipt this Period

120.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. EOIN GILL

Mailing Address 1327 WOODBROOK LANE

City

SOUTHLAKE

State

TX

Zip Code

76092-4841

FEC ID number of contributing
federal political committee.

C

Name of Employer
BANK OF NEW YORK MELLON

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 4 / 2 0 1 1

Transaction ID: SA11.416624

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

470.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 115 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.Full Name (Last, First, Middle Initial)
MS. SUSAN GINKELMailing Address 277 PARK AVENUE,
45 FLOORCity State Zip Code
NEW YORK NY 10172-2903FEC ID number of contributing
federal political committee.**C**Name of Employer
HIGHSTAR CAPITAL LP

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	1	1

Transaction ID: SA11.408932

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

INFORMATION REQUESTED PER BEST EFFORTS

B.Full Name (Last, First, Middle Initial)
MR. DAVID GLADSTONE

Mailing Address 1161 CREST LANE

City State Zip Code
MCLEAN VA 22101-1805FEC ID number of contributing
federal political committee.**C**Name of Employer
GLADSTONE MANAGEMENT CORP-
ORATION

Occupation

INVESTMENTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	1	1

Transaction ID: SA11.417843

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.Full Name (Last, First, Middle Initial)
MR. EDWARD GLASSMEYER

Mailing Address 23 BUTLER'S ISLAND RD

City State Zip Code
DARIEN CT 06820-6203FEC ID number of contributing
federal political committee.**C**Name of Employer
OAK MANAGEMENT CORP

Occupation

VENTURE CAPITALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: SA11.406801

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

8000.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 116 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. MICHAEL L. GOGUEN

Mailing Address 3000 SAND HILL ROAD
SUITE 250

City	State	Zip Code
MENLO PARK	CA	94025-7113

FEC ID number of contributing
federal political committee.**C**Name of Employer
SEQUOIA CAPITALOccupation
VENTURE CAPITALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	3	/	2	0	1	1

Transaction ID: SA11.406342

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. KENNETH GOLDMAN

Mailing Address 441 WALSH ROAD

City	State	Zip Code
ATHERTON	CA	94027-6438

FEC ID number of contributing
federal political committee.**C**Name of Employer
FORTINET, INC.Occupation
C.F.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	6	/	2	0	1	1

Transaction ID: SA11.417856

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. MARLAINE GOLDSHEIDER

Mailing Address 31 DORAL WAY

City	State	Zip Code
NEPTUNE	NJ	07753-3179

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	3	1	/	2	0	1	1

Transaction ID: SA11.409257

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6250.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 117 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. PETER GONYE

Mailing Address 494 PONUS RIDGE

City

NEW CANAAN

State

CT

Zip Code

06840-6024

FEC ID number of contributing
federal political committee.

C

Name of Employer
SPENCER STUART

Occupation

EXECUTIVE SEARCH CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	6	/	2	0	1	1

Transaction ID: SA11.405893

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DAVID GOOCH

Mailing Address 688 PARK AVE

City

REVERE

State

MA

Zip Code

02151-3325

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIERD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	8	/	2	0	1	1

Transaction ID: SA11.414457

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. GREGORY GOODWIN

Mailing Address 5605 SE SCENIC LN, UNIT 300

City

VANCOUVER

State

WA

Zip Code

98661-0523

FEC ID number of contributing
federal political committee.

C

Name of Employer
KUNI AUTOMOTIVE

Occupation

C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	1	/	2	0	1	1

Transaction ID: SA11.415816

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

7750.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 118 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. MARK A. GOTTFREDSON

Mailing Address 7321 TRIANON COURT

City

COLLEYVILLE

State

TX

Zip Code

76034-7334

FEC ID number of contributing
federal political committee.

C

Name of Employer
BAIN & COMPANY

Occupation

CONSULTANT

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	3	/	2	0	1	1

Transaction ID: SA11.416437

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. KINGDON GOULD, JR.

Mailing Address 7861 MURRAY HILL ROAD

City

LAUREL

State

MD

Zip Code

20723-5716

FEC ID number of contributing
federal political committee.

C

Name of Employer
GOULD KINGDON

Occupation

PRINCIPAL

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	5	/	2	0	1	1

Transaction ID: SA11.416650

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RON GRAVETTE

Mailing Address BOX 1289

City

SALADO

State

TX

Zip Code

76571-1289

FEC ID number of contributing
federal political committee.

C

Name of Employer
PACER TECHNOLOGY

Occupation

PRESIDENT

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	9	/	2	0	1	1

Transaction ID: SA11.414566

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

7750.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 119 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MS. MARILYN GRAY

Mailing Address 1808 MEWS DRIVE

City

WILMINGTON

State

NC

Zip Code

28405-4038

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: SA11.409617

Amount of Each Receipt this Period

110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. MARILYN GRAY

Mailing Address 1808 MEWS DRIVE

City

WILMINGTON

State

NC

Zip Code

28405-4038

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	1	1

Transaction ID: SA11.415082

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. A. KENT GREENE

Mailing Address 40 DAISY MEADOW TERRACE

City

HENDERSON

State

NV

Zip Code

89074-1503

FEC ID number of contributing
federal political committee.

C

Name of Employer
CLARK GREENE & ASSOCIATES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

ATTORNEY

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.412574

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

460.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 120 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. MICHAEL D. GREENSPAN

Mailing Address 7 COVENTRY COURT

City

PURCHASE

State

NY

Zip Code

10577-2212

FEC ID number of contributing
federal political committee.

C

Name of Employer
RMZ U.S.A. INC.

Occupation

COMPOSITE SHIPPING PALLETS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	3	/	2	0	1	1

Transaction ID: SA11.412872

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. NATHANIEL GREENE

Mailing Address 7 MOORING ROAD

City

MARBLEHEAD

State

MA

Zip Code

01945-1566

FEC ID number of contributing
federal political committee.

C

Name of Employer
STROUD CONSULTING

Occupation

ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	4	/	2	0	1	1

Transaction ID: SA11.406374

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. KRISTINA K. GREGG

Mailing Address PO BOX 7304

City

RANCHO SANTA FE

State

CA

Zip Code

92067-7304

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	6	/	2	0	1	1

Transaction ID: SA11.420418

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 121 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. STEPHEN A. GREGG

Mailing Address P.O. BOX 7304

City

RANCHO SANTA FE

State

CA

Zip Code

92067-7304

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.420427

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. HOWARD GROFF

Mailing Address 9832 CALVIN AVENUE

City

NORTHRIDGE

State

CA

Zip Code

91324-1619

FEC ID number of contributing
federal political committee.

C

Name of Employer
NORTHWEST EXCAVATING

Occupation
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 1 1

Transaction ID: SA11.410398

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. SUSAN L. GROFF

Mailing Address 9832 CALVIN AVENUE

City

NORTHRIDGE

State

CA

Zip Code

91324-1619

FEC ID number of contributing
federal political committee.

C

Name of Employer
NORTHWEST EXCAVATING

Occupation
CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 1 1

Transaction ID: SA11.410402

Amount of Each Receipt this Period

5000.00

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 122 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

RAJENDRA P. GUPTA

Mailing Address 3201 NE 40TH STREET

City

FORT LAUDERDALE

State

FL

Zip Code

33308-6409

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 8 / 2 0 1 1

Transaction ID: SA11.416823

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DON C. HAAS

Mailing Address 11106 HIGHWAY 31

City

SELLERSBURG

State

IN

Zip Code

47172-9614

FEC ID number of contributing
federal political committee.

C

Name of Employer
HAAS CABINET COMPANY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

CHAIRMAN

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.412258

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. FRANK HADLEY

Mailing Address 39 TENERIFE WAY

City

HOT SPRINGS VILLAG

State

AR

Zip Code

71909-5439

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 9 / 2 0 1 1

Transaction ID: SA11.417135

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 123 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.Full Name (Last, First, Middle Initial)
MS. JOAN B. HADLEY

Mailing Address 1801 BAYADERE TERRACE

City	State	Zip Code
CORONA DEL MAR	CA	92625-1808

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.407586

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.Full Name (Last, First, Middle Initial)
MR. JOE HAGGAR

Mailing Address 7428 GLENSHANNON CR.

City	State	Zip Code
DALLAS	TX	75225-2048

FEC ID number of contributing
federal political committee.**C**Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	7	/	2	0	1	1

Transaction ID: SA11.415592

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.Full Name (Last, First, Middle Initial)
MR. TIMOTHY P. HAIDINGER

Mailing Address P.O. BOX 3510

City	State	Zip Code
RANCHO SANTA FE	CA	92067-3510

FEC ID number of contributing
federal political committee.**C**Name of Employer
SELF-EMPLOYEDOccupation
INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	3	/	2	0	1	1

Transaction ID: SA11.426484

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2250.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 124 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. JOHN J. HAKE

Mailing Address 41 COUNTRY CLUB VIEW

City

EDWARDSVILLE

State

IL

Zip Code

62025-3627

FEC ID number of contributing
federal political committee.

C

Name of Employer

DUKE MANUFACTURING COMPANY

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	3	/	2	0	1	1

Transaction ID: SA11.416390

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. REED E. HALLADAY

Mailing Address 23449 OAK RUN LANE

City

NEWHALL

State

CA

Zip Code

91321-3450

FEC ID number of contributing
federal political committee.

C

Name of Employer

BEL AIR INVESTMENT ADVISO-
RS

Occupation

INVESTMENT ADVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	7	/	2	0	1	1

Transaction ID: SA11.417868

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. PAUL R. HAMILTON

Mailing Address 413 W. CREEK STREET

City

FREDERICKSBURG

State

TX

Zip Code

78624-3113

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

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

Transaction ID: SA11.406733

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5450.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 125 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. PAUL R. HAMILTON

Mailing Address 413 W. CREEK STREET

City

FREDERICKSBURG

State

TX

Zip Code

78624-3113

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 7 / 2 0 1 1

Transaction ID: SA11.408766

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. LEE T. HANLEY

Mailing Address 2425 E. CAMELBACK
SUITE 750

City

PHOENIX

State

AZ

Zip Code

85016-4261

FEC ID number of contributing
federal political committee.

C

Name of Employer
VESTAR

Occupation
REAL ESTATE MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 8 / 2 0 1 1

Transaction ID: SA11.415622

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JESSE HANNAN

Mailing Address 765 LAUREL

City

SAN JOSE

State

CA

Zip Code

95126-1828

FEC ID number of contributing
federal political committee.

C

Name of Employer
BROCADE COMMUNICATIONS

Occupation
HARDWARE ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 5 / 2 0 1 1

Transaction ID: SA11.410227

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 126 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. W. EUGENE HANSEN

Mailing Address 1607 YALECREST AVENUE

City

SALT LAKE CITY

State

UT

Zip Code

84105-1723

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.412221

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. LOUIS HARGUS

Mailing Address 7925 HALF MILE ROAD

City

EAST LEROY

State

MI

Zip Code

49051

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: SA11.407315

Amount of Each Receipt this Period

400.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JAMES H. HARLESS

Mailing Address P.O. BOX 1210

City

GILBERT

State

WV

Zip Code

25621-1210

FEC ID number of contributing
federal political committee.

C

Name of Employer
INTERNATIONAL INDUSTRIES
INC.

Occupation
C.O.B.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 3 / 2 0 1 1

Transaction ID: SA11.416297

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1900.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 127 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. JOHN H. HARLING

Mailing Address 416 HUNTER DRIVE

City

VENICE

State

FL

Zip Code

34285-2717

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

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

Transaction ID: SA11.409768

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOHN H. HARLING

Mailing Address 416 HUNTER DRIVE

City

VENICE

State

FL

Zip Code

34285-2717

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	4	/	2	0	1	1

Transaction ID: SA11.418991

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. MARTIN A. HARMON

Mailing Address 4020 SIERRA COLLEGE BLVD.
SUITE 200

City

ROCKLIN

State

CA

Zip Code

95677-3906

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
AUBORN MANOR HOLDINGS CROP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	6	/	2	0	1	1

Transaction ID: SA11.420403

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2950.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 128 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. ALLEN C. HARPER

Mailing Address 265 COUNTY ROAD 204

City

DURANGO

State

CO

Zip Code

81301-8843

FEC ID number of contributing
federal political committee.

C

Name of Employer

AMERICAN HERITAGE RAILWAYS

Occupation

OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	6		2	0	1	1

Transaction ID: SA11.408600

Amount of Each Receipt this Period

300.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ALLEN C. HARPER

Mailing Address 265 COUNTY ROAD 204

City

DURANGO

State

CO

Zip Code

81301-8843

FEC ID number of contributing
federal political committee.

C

Name of Employer

AMERICAN HERITAGE RAILWAYS

Occupation

OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

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

Transaction ID: SA11.413833

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. FRANCES DORCHESTER HARRELL

Mailing Address 2660 MAGNOLIA AVENUE

City

PENSACOLA

State

FL

Zip Code

32503-4945

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

OIL AND GAS MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11.412228

Amount of Each Receipt this Period

300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 129 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. MYRON G. HARRISON

Mailing Address P.O. BOX 4144

City

VENTURA

State

CA

Zip Code

93007-0144

FEC ID number of contributing
federal political committee.

C

Name of Employer
E.J. HARRISON & SONS, INC.

Occupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.413576

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. GRIFFITH R. HARSH, IV

Mailing Address 24 EDGE ROAD

City

ATHERTON

State

CA

Zip Code

94027-2226

FEC ID number of contributing
federal political committee.

C

Name of Employer
STANFORD UNIVERSITY

Occupation
NEUROSURGEON

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.419383

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. THOMAS W. HART

Mailing Address 30 TOLEDO DRIVE

City

LAFAYETTE

State

CA

Zip Code

94549-2951

FEC ID number of contributing
federal political committee.

C

Name of Employer
SHORENSTEIN COMPANY

Occupation
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.418949

Amount of Each Receipt this Period

2000.00

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 130 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. VINCENT J. HARTNETT

Mailing Address 2435 ORCHARD CREST BLVD.

City

MANASQUAN

State

NJ

Zip Code

08736-4009

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: SA11.406612

Amount of Each Receipt this Period

25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. VINCENT J. HARTNETT

Mailing Address 2435 ORCHARD CREST BLVD.

City

MANASQUAN

State

NJ

Zip Code

08736-4009

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 1 1

Transaction ID: SA11.410563

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. VINCENT J. HARTNETT

Mailing Address 2435 ORCHARD CREST BLVD.

City

MANASQUAN

State

NJ

Zip Code

08736-4009

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.419688

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 131 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. PHILIP H. HASELTON

Mailing Address 76 OAK STREET

City

BOOTHBAY HARBOR

State

ME

Zip Code

04538-1814

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: SA11.407322

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. PHILIP H. HASELTON

Mailing Address 76 OAK STREET

City

BOOTHBAY HARBOR

State

ME

Zip Code

04538-1814

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.421741

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. TARRELL G. HATCH

Mailing Address 4133 N. 45TH E.

City

IDAHO FALLS

State

ID

Zip Code

83401-1965

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
LIGHTING CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 0 / 2 0 1 1

Transaction ID: SA11.414707

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 132 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. TARRELL G. HATCH

Mailing Address 4133 N. 45TH E.

City

IDAHO FALLS

State

ID

Zip Code

83401-1965

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

LIGHTING CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.417423

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. TARRELL G. HATCH

Mailing Address 4133 N. 45TH E.

City

IDAHO FALLS

State

ID

Zip Code

83401-1965

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

LIGHTING CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 0 / 2 0 1 1

Transaction ID: SA11.425177

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. TRAVIS HAWKES

Mailing Address 1898 W. WHITESTONE COURT

City

MERIDIAN

State

ID

Zip Code

83646-1308

FEC ID number of contributing
federal political committee.

C

Name of Employer
ALETHEIA CAPITAL ADVISORS,
L.L.C.

Occupation

MANAGING PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.411964

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5200.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 133 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. DIANA HAWKINS

Mailing Address 18 WEST LANE

City

HOUSTON

State

TX

Zip Code

77019-1008

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	1	1

Transaction ID: SA11.408935

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOHN HAWKINS

Mailing Address 18 WEST LANE

City

HOUSTON

State

TX

Zip Code

77019-1008

FEC ID number of contributing
federal political committee.

C

Name of Employer
STUDENT

Occupation

STUDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	1	1

Transaction ID: SA11.409566

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. KATHERINE HAWKINS

Mailing Address 18 WEST LANE

City

HOUSTON

State

TX

Zip Code

77019-1008

FEC ID number of contributing
federal political committee.

C

Name of Employer
STUDENT

Occupation

STUDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	1	1

Transaction ID: SA11.409570

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 134 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MS. LAURA HAWKINS

Mailing Address 18 WEST LN.

City

HOUSTON

State

TX

Zip Code

77019-1008

FEC ID number of contributing
federal political committee.**C**Name of Employer
NEUBERGER BERMAN ALTERNAT-
IVES

Occupation

INVESTMENTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	3	1	/	2	0	1	1

Transaction ID: SA11.408939

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RUSSELL HAWKINS

Mailing Address 18 WEST LN.

City

HOUSTON

State

TX

Zip Code

77019-1008

FEC ID number of contributing
federal political committee.**C**Name of Employer
AVALON ADVISORS, LP

Occupation

INVESTMENT ADVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	3	1	/	2	0	1	1

Transaction ID: SA11.408936

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. FRANK J. HAWLERY, JR.

Mailing Address P.O. BOX 2129

City

BOCA GRANDE

State

FL

Zip Code

33921-2129

FEC ID number of contributing
federal political committee.**C**Name of Employer
SAUGATUCK ASSOCIATES, IN-
C.

Occupation

PRIVATE EQUITY INVESTMENTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: SA11.409773

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10200.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 135 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. FRANK J. HAWLERY, JR.

Mailing Address P.O. BOX 2129

City

BOCA GRANDE

State

FL

Zip Code

33921-2129

FEC ID number of contributing
federal political committee.

C

Name of Employer
SAUGATUCK ASSOCIATES, IN-
C.

Occupation

PRIVATE EQUITY INVESTMENTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: SA11.413808

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. AGNES R. HAYDEN

Mailing Address 3420 NE SUGARHILL AVENUE

City

JENSEN BEACH

State

FL

Zip Code

34957-3724

FEC ID number of contributing
federal political committee.

C

Name of Employer
HAYCO INDUSTRIES

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	2	/	2	0	1	1

Transaction ID: SA11.416158

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. J. DAVID HEANEY

Mailing Address 3260 CHEVY CHASE

City

HOUSTON

State

TX

Zip Code

77019-3210

FEC ID number of contributing
federal political committee.

C

Name of Employer
HEANEY ROSENTHAL, INC.

Occupation

INVESTMENT/EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	1	1

Transaction ID: SA11.417274

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6200.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 136 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.Full Name (Last, First, Middle Initial)
MR. CHRISTOPHER J. HEINTZMailing Address 113 E 60TH ST,
APT 1

City	State	Zip Code
NEW YORK	NY	10022-1102

FEC ID number of contributing
federal political committee.**C**Name of Employer
PERENIAL INVESTORS, L.L.C.Occupation
FINANCIAL ADVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	4	/	2	0	1	1

Transaction ID: SA11.416461

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.Full Name (Last, First, Middle Initial)
MS. RANDI J. HELGESON

Mailing Address 16485 ELLERDALE LANE

City	State	Zip Code
EDEN PRAIRIE	MN	55346-1431

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	4	/	2	0	1	1

Transaction ID: SA11.407715

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.Full Name (Last, First, Middle Initial)
MS. RANDI J. HELGESON

Mailing Address 16485 ELLERDALE LANE

City	State	Zip Code
EDEN PRAIRIE	MN	55346-1431

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	8	/	2	0	1	1

Transaction ID: SA11.415692

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 137 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. RAYFORD L. HENDERSON

Mailing Address 6679 WATERFORD ROAD

City

COLUMBUS

State

GA

Zip Code

31904-2237

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: SA11.412133

Amount of Each Receipt this Period

175.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RAYFORD L. HENDERSON

Mailing Address 6679 WATERFORD ROAD

City

COLUMBUS

State

GA

Zip Code

31904-2237

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	0	/	2	0	1	1

Transaction ID: SA11.414736

Amount of Each Receipt this Period

175.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RICHARD JAMES HENKEN

Mailing Address 3 PARTRIDGE HILL ROAD

City

DOVER

State

MA

Zip Code

02030-1712

FEC ID number of contributing
federal political committee.

C

Name of Employer
SCHUCHET ASSOCIATES, INC.

Occupation

REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	9	/	2	0	1	1

Transaction ID: SA11.417011

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5350.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 138 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. EMIL W. HENRY, JR.

Mailing Address 161 CANTITOTES STREET

City

KATONAH

State

NY

Zip Code

10536-3801

FEC ID number of contributing
federal political committee.

C

Name of Employer
HENRY TIGER L.L.C.Occupation
INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	4		2	0	1	1

Transaction ID: SA11.413100

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. JODY HENRY

Mailing Address 161 CANTITOTES STREET

City

KATONAH

State

NY

Zip Code

10536-3801

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	4		2	0	1	1

Transaction ID: SA11.413090

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RONALD J. HEROLD

Mailing Address 4726 BOULEAU ROAD

City

SAINT PAUL

State

MN

Zip Code

55110-3355

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	2		2	0	1	1

Transaction ID: SA11.416175

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10250.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 139 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. KRISTEN HAYLER HERTEL

Mailing Address 419 SHERIDAN ROAD

City

WINNETKA

State

IL

Zip Code

60093-2626

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 3 / 2 0 1 1

Transaction ID: SA11.412878

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

CHRISTINE HIGGINS

Mailing Address 3875 GEIST RD. STE. E-382

City

FAIRBANKS

State

AK

Zip Code

99709-3549

FEC ID number of contributing
federal political committee.

C

Name of Employer
SMILE MANAGEMENT LLC

Occupation

BUSINESS CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 5 / 2 0 1 1

Transaction ID: SA11.413189

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JAMES J. HILL, III

Mailing Address P.O. BOX 1588

City

MONTEREY

State

CA

Zip Code

93942-1588

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 0 / 2 0 1 1

Transaction ID: SA11.414791

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 140 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MS. VIOLA S. HILL

Mailing Address 902 3RD STREET E.
APARTMENT B11

City	State	Zip Code
ROUNDUP	MT	59072-2323

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	3		2	0	1	1

Transaction ID: SA11.406340

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. VIOLA S. HILL

Mailing Address 902 3RD STREET E.
APARTMENT B11

City	State	Zip Code
ROUNDUP	MT	59072-2323

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	1	1

Transaction ID: SA11.414220

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. VIOLA S. HILL

Mailing Address 902 3RD STREET E.
APARTMENT B11

City	State	Zip Code
ROUNDUP	MT	59072-2323

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	8		2	0	1	1

Transaction ID: SA11.415706

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2100.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 141 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. JIM C. HINKEFENT

Mailing Address 8965 S. SANDUSKY AVENUE

City

TULSA

State

OK

Zip Code

74137-2722

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.412700

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. H. LEE HOBSON

Mailing Address 3926 POTOMAC AVENUE

City

DALLAS

State

TX

Zip Code

75205-2117

FEC ID number of contributing
federal political committee.**C**Name of Employer
HIGHSIDE CAPITALOccupation
INVESTMENT MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	1	1

Transaction ID: SA11.417287

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RONALD S. HODGES

Mailing Address 19342 COUNTRYWOOD DRIVE

City

YORBA LINDA

State

CA

Zip Code

92886-3521

FEC ID number of contributing
federal political committee.**C**Name of Employer
SHULMAN, HODGES & BASTMAN,
L.L.P.Occupation
LAWYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	3	1	/	2	0	1	1

Transaction ID: SA11.408948

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 142 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MS. PAMELA HOEFFLIN

Mailing Address 1444 MORAGA DRIVE

City

LOS ANGELES

State

CA

Zip Code

90049-1648

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

C.F.O./ADMINISTRATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	1		2	0	1	1

Transaction ID: SA11.419826

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. FRED D. HOERGER

Mailing Address 2813 SCHADE WEST DRIVE

City

MIDLAND

State

MI

Zip Code

48640-6982

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.413543

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. BRODY HOLBROOK

Mailing Address 670 E 100 S

City

HYDE PARK

State

UT

Zip Code

84318-3211

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	9		2	0	1	1

Transaction ID: SA11.406799

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5400.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 143 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. BRODY HOLBROOK

Mailing Address 670 E 100 S

City

HYDE PARK

State

UT

Zip Code

84318-3211

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	9	/	2	0	1	1

Transaction ID: SA11.406800

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RICHARD L. HOLBROOK

Mailing Address 505 ST. THOMAS LANE

City

FOSTER CITY

State

CA

Zip Code

94404-3977

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

INVESTMENT ADVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	7	/	2	0	1	1

Transaction ID: SA11.417873

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. JOAN D. HUBBARD

Mailing Address 1506 ANGOLA AVENUE

City

LA HABRA HEIGHTS

State

CA

Zip Code

90631-8669

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: SA11.406545

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1300.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 144 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. JOAN D. HUBBARD

Mailing Address 1506 ANGOLA AVENUE

City

LA HABRA HEIGHTS

State

CA

Zip Code

90631-8669

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: SA11.412267

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RON HULME

Mailing Address 12 SHADDER WAY

City

HOUSTON

State

TX

Zip Code

77019-1416

FEC ID number of contributing
federal political committee.

C

Name of Employer
CARLSON CAPITAL

Occupation

PRIVATE EQUITY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 8 / 2 0 1 1

Transaction ID: SA11.414310

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RICHARD B. HUTCHINS

Mailing Address 65 LARK PLACE

City

ALAMO

State

CA

Zip Code

94507-1867

FEC ID number of contributing
federal political committee.

C

Name of Employer
NOVOGRADAC & COMPANY LLP

Occupation

CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 2 / 2 0 1 1

Transaction ID: SA11.416120

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5700.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 145 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MS. PATRICIA P. INMAN

Mailing Address 2 OAKLAWN PARK

City

MIDLAND

State

TX

Zip Code

79705-6546

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 1 / 2 0 1 1

Transaction ID: SA11.415887

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WILLIAM B. JACKSON

Mailing Address 3016 N. NARROWS DRIVE
UNIT 418

City

TACOMA

State

WA

Zip Code

98407-1574

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 1 1

Transaction ID: SA11.409454

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. WILLIAM B. JACKSON

Mailing Address 3016 N. NARROWS DRIVE
UNIT 418

City

TACOMA

State

WA

Zip Code

98407-1574

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 8 / 2 0 1 1

Transaction ID: SA11.415762

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1400.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 146 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. MARTIN D. JACOBSON

Mailing Address 10 DEER PARK COURT

City

GREENWICH

State

CT

Zip Code

06830-3803

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	3		2	0	1	1

Transaction ID: SA11.412865

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RAYMOND A. JACOBSEN, JR.

Mailing Address 4205 MAPLE TREE COURT

City

ALEXANDRIA

State

VA

Zip Code

22304-1035

FEC ID number of contributing
federal political committee.

C

Name of Employer
MCDERMOTT WILL & EMERYOccupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	1	1

Transaction ID: SA11.418953

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. STEPHEN R. JACOBS

Mailing Address 1088 ROUND HILL CIRCLE

City

NAPA

State

CA

Zip Code

94558-5314

FEC ID number of contributing
federal political committee.

C

Name of Employer
TRI-VALLEY INSURANCE SERV-
ICESOccupation
INSURANCE BROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	0		2	0	1	1

Transaction ID: SA11.414827

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2250.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. CHERIE JAMES

Mailing Address P.O. BOX 2497

City

OREM

State

UT

Zip Code

84059-2497

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 1 1

Transaction ID: SA11.417301

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOSHUA G. JAMES

Mailing Address 4223 VINTAGE CIR

City

PROVO

State

UT

Zip Code

84604-5693

FEC ID number of contributing
federal political committee.

C

Name of Employer
CORDA TECHNOLOGIES

Occupation

C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 1 1

Transaction ID: SA11.417305

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

AMB. ERIC M. JAVITS

Mailing Address 150 BRADLEY PLACE #107

City

PALM BEACH

State

FL

Zip Code

33480-3832

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 4 / 2 0 1 1

Transaction ID: SA11.407739

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

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)
for each category of the
Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

AMB. ERIC M. JAVITS

Mailing Address 150 BRADLEY PLACE #107

City

PALM BEACH

State

FL

Zip Code

33480-3832

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.425170

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

REFUNDED \$1,000.00 ON 03/-
21/2011

B.

Full Name (Last, First, Middle Initial)

DR. JEFFREY R. JAY

Mailing Address 11 HALLOWELL LANE

City

NANTUCKET

State

MA

Zip Code

02554-2004

FEC ID number of contributing
federal political committee.

C

Name of Employer
GREAT POINT PARTNERS

Occupation
ENTREPRENEUR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: SA11.407221

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. CHRISTOPHER R. JENNY

Mailing Address 14 MOORE ROAD

City

WAYLAND

State

MA

Zip Code

01778-1410

FEC ID number of contributing
federal political committee.

C

Name of Employer
STUDENT

Occupation
STUDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 7 / 2 0 1 1

Transaction ID: SA11.414299

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

8000.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. JERALD K. JENSEN

Mailing Address 1470 SANTA CLARA VIEW DRIVE

City

SANTA CLARA

State

UT

Zip Code

84765-5719

FEC ID number of contributing
federal political committee.

C

Name of Employer
JENSEN PROPERTY MANAGEMENT

Occupation

REAL ESTATE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 4 / 2 0 1 1

Transaction ID: SA11.411363

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. VERDA N. JENSEN

Mailing Address 1427 FORGE WAY

City

DRAPER

State

UT

Zip Code

84020-8835

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 4 / 2 0 1 1

Transaction ID: SA11.411396

Amount of Each Receipt this Period

300.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. BARTON M. JOHNSON

Mailing Address 2552 EAST ALAMEDA AVENUE #31

City

DENVER

State

CO

Zip Code

80209-3324

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 3 / 2 0 1 1

Transaction ID: SA11.412870

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1050.00

TOTAL This Period (last page this line number only)

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MS. BETTY WOLD JOHNSON

Mailing Address 62 LAMBERTVILLE-HOPEWELL ROAD

City

HOPEWELL

State

NJ

Zip Code

08525-2901

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

PRIVATE INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 8 / 2 0 1 1

Transaction ID: SA11.416821

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

AMB. BRENDA JOHNSON

Mailing Address 19 EAST 72ND STREET

City

NEW YORK

State

NY

Zip Code

10021-4145

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 9 / 2 0 1 1

Transaction ID: SA11.408915

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. CHARLES A. JOHNSON

Mailing Address 27 SANCTUARY TRAIL

City

MISSOURI CITY

State

TX

Zip Code

77459-4695

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

Transaction ID: SA11.414072

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10500.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 151 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. ROBERT L. JOHNSON

Mailing Address 3376 BARROW ISLAND ROAD

City

JUPITER

State

FL

Zip Code

33477-1379

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11.407299

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROBERT L. JOHNSON

Mailing Address 3376 BARROW ISLAND ROAD

City

JUPITER

State

FL

Zip Code

33477-1379

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11.412733

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ROBERT W. JOHNSON, IV

Mailing Address 630 FIFTH AVENUE
SUITE 1510

City

NEW YORK

State

NY

Zip Code

10111-1504

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE JOHNSON COMPANY INC.Occupation
CHAIRMAN & C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	8	/	2	0	1	1

Transaction ID: SA11.416827

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5300.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 152 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.Full Name (Last, First, Middle Initial)
MRS. SUZANNE IRCHA JOHNSONMailing Address 630 FIFTH AVENUE
SUITE 1510City State Zip Code
NEW YORK NY 10111-1504FEC ID number of contributing
federal political committee.**C**Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	8	/	2	0	1	1

Transaction ID: SA11.416825

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.Full Name (Last, First, Middle Initial)
MR. WALTER E. JOHNSON

Mailing Address P.O. BOX 27459

City State Zip Code
HOUSTON TX 77227-7459FEC ID number of contributing
federal political committee.**C**Name of Employer
AMEGY BANK OF TEXAS

Occupation

CHAIRMAN OF BANK

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	4	/	2	0	1	1

Transaction ID: SA11.413099

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.Full Name (Last, First, Middle Initial)
MRS. DORTHELLA A. JOLLEY

Mailing Address 593 N. 850 W.

City State Zip Code
PROVO UT 84601-1461FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11.407657

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10100.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 153 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.Full Name (Last, First, Middle Initial)
MRS. DORTHELLA A. JOLLEY

Mailing Address 593 N. 850 W.

City	State	Zip Code
PROVO	UT	84601-1461

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	1	1

Transaction ID: SA11.411598

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.Full Name (Last, First, Middle Initial)
MRS. DORTHELLA A. JOLLEY

Mailing Address 593 N. 850 W.

City	State	Zip Code
PROVO	UT	84601-1461

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	1		2	0	1	1

Transaction ID: SA11.415945

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.Full Name (Last, First, Middle Initial)
MR. MITCHELL JULIS

Mailing Address 713 N. CRESCENT DRIVE

City	State	Zip Code
BEVERLY HILLS	CA	90210-3331

FEC ID number of contributing
federal political committee.

C

Name of Employer
CANYON PARTNERS, L.L.C.Occupation
INVESTMENT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	1		2	0	1	1

Transaction ID: SA11.416077

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5200.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 154 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. WALTER KASTEN, II

Mailing Address 174 SPRINGLINE DRIVE

City

VERO BEACH

State

FL

Zip Code

32963-2940

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	8	/	2	0	1	1

Transaction ID: SA11.415716

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WALTER KASTEN, II

Mailing Address 174 SPRINGLINE DRIVE

City

VERO BEACH

State

FL

Zip Code

32963-2940

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	3	/	2	0	1	1

Transaction ID: SA11.418692

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. LAWRENCE KELLNER

Mailing Address 10915 PIFER WAY

City

HOUSTON

State

TX

Zip Code

77024-5440

FEC ID number of contributing
federal political committee.**C**Name of Employer
EMERALD CREEK GROUPOccupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	3	1	/	2	0	1	1

Transaction ID: SA11.409567

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5400.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 155 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. SUSAN C. KELLNER

Mailing Address 10915 PIFER WAY

City

HOUSTON

State

TX

Zip Code

77024-5440

FEC ID number of contributing
federal political committee.**C**Name of Employer
COMMUNITY VOLUNTEER

Occupation

COMMUNITY VOLUNTEER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	3	1	/	2	0	1	1

Transaction ID: SA11.409568

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JAMES KELLY

Mailing Address 17570 MONTOYA CIRCLE

City

MORGAN HILL

State

CA

Zip Code

95037-3771

FEC ID number of contributing
federal political committee.**C**Name of Employer
MERCHANT E-SOLUTIONS, INC.

Occupation

C.F.O.

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	6	/	2	0	1	1

Transaction ID: SA11.410233

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. WILBUR L. KENNICOTT

Mailing Address 517 SUMMIT AVENUE

City

LIGONIER

State

PA

Zip Code

15658-1508

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	2	/	2	0	1	1

Transaction ID: SA11.416160

Amount of Each Receipt this Period

300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5550.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 156 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. CHERYL D. KENSINGTON

Mailing Address 366 MANSFIELD AVENUE

City

DARIEN

State

CT

Zip Code

06820-2112

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.409598

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. COSTA N. KENSINGTON

Mailing Address 366 MANSFIELD AVENUE

City

DARIEN

State

CT

Zip Code

06820-2112

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.409589

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. YOO JIN KIM

Mailing Address 27 PERRY STREET

City

NEW YORK

State

NY

Zip Code

10014-2703

FEC ID number of contributing
federal political committee.

C

Name of Employer
LEE EQUITY PARTNERS, LLC

Occupation

PRIVATE EQUITY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.411955

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5500.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 157 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. STANLEY K. KINDER

Mailing Address 3565 LONE TREE LANE

City

RENO

State

NV

Zip Code

89511-7676

FEC ID number of contributing
federal political committee.

C

Name of Employer
SURNA CHEMICAL COMPANY

Occupation

CHEMICAL MANUFACTURE & DIET-ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.407129

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOHN KINGSTON

Mailing Address 16 CHESTNUT STREET

City

WINCHESTER

State

MA

Zip Code

01890-3019

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFFILIATED MANAGERS GROUP

Occupation

GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	7	/	2	0	1	1

Transaction ID: SA11.415589

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. MARTHA MCDONALD KINKAID

Mailing Address 349 BROAD AVENUE N.

City

NAPLES

State

FL

Zip Code

34102-5546

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	3	/	2	0	1	1

Transaction ID: SA11.416364

Amount of Each Receipt this Period

300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5800.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 158 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. SETH A. KLARMAN

Mailing Address 329 HEATH STREET

City

CHESTNUT HILL

State

MA

Zip Code

02467-2820

FEC ID number of contributing
federal political committee.**C**Name of Employer
BAUPORT GROUP, L.L.C.

Occupation

INVESTMENTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.411041

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. FREDERICK W. KLEIN

Mailing Address 36584 S. WIND CREST DRIVE

City

TUCSON

State

AZ

Zip Code

85739-1505

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	7	/	2	0	1	1

Transaction ID: SA11.417967

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. IRA KLEINMAN

Mailing Address 240 PARK AVENUE S.
APARTMENT 16A

City

NEW YORK

State

NY

Zip Code

10003-1415

FEC ID number of contributing
federal political committee.**C**Name of Employer
HARVEST PARTNERS

Occupation

PRIVATE EQUITY INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.411058

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 159 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. WALTER H. KLEINER

Mailing Address 1725 88TH PLACE NE

City

CLYDE HILL

State

WA

Zip Code

98004

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 4 / 2 0 1 1

Transaction ID: SA11.407749

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WALTER H. KLEINER

Mailing Address 1725 88TH PLACE NE

City

CLYDE HILL

State

WA

Zip Code

98004

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.413795

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. WALTER H. KLEINER

Mailing Address 1725 88TH PLACE NE

City

CLYDE HILL

State

WA

Zip Code

98004

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 8 / 2 0 1 1

Transaction ID: SA11.416859

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 160 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. SALLY KLEPACK

Mailing Address 2506 ALLISON CIRCLE

City

VALPARAISO

State

IN

Zip Code

46383-3979

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.407526

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. SALLY KLEPACK

Mailing Address 2506 ALLISON CIRCLE

City

VALPARAISO

State

IN

Zip Code

46383-3979

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	4	/	2	0	1	1

Transaction ID: SA11.424132

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. BROOKS JAMES KLIMLEY

Mailing Address 125 PARKWAY ROAD

City

BRONXVILLE

State

NY

Zip Code

10708-3608

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
INVESTMENT BANKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.407201

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5250.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 161 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. PAUL E. KNAG

Mailing Address 27 MILLER ROAD

City

DARIEN

State

CT

Zip Code

06820-3015

FEC ID number of contributing
federal political committee.

C

Name of Employer
MURTHA CULLINA, L.L.P.

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.411046

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. CHARLES F. KNIGHT

Mailing Address 24 FOREWAY DRIVE

City

ST. LOUIS

State

MO

Zip Code

63124-1618

FEC ID number of contributing
federal political committee.

C

Name of Employer
EMERSON ELECTRIC COMPANY

Occupation

CHAIRMAN EMERITUS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 1 1

Transaction ID: SA11.417288

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JAMES A. KNIGHT

Mailing Address 1001 FANNIN ST STE 2500

City

HOUSTON

State

TX

Zip Code

77002-6710

FEC ID number of contributing
federal political committee.

C

Name of Employer
VINSON & ELKINS LLP

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 0 / 2 0 1 1

Transaction ID: SA11.415781

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

8500.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 162 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. NEWELL KNIGHT

Mailing Address 28 DEERFIELD ROAD

City

SAINT LOUIS

State

MO

Zip Code

63124-1412

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	5	/	2	0	1	1

Transaction ID: SA11.415381

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DANIEL P. KNOWLTON

Mailing Address 3316 BELLADONNA DR

City

PLANO

State

TX

Zip Code

75093-2136

FEC ID number of contributing
federal political committee.

C

Name of Employer
PEROT SYSTEMS CORPOccupation
WEB APPLICATION DEVELOPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	5	/	2	0	1	1

Transaction ID: SA11.406419

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DANIEL P. KNOWLTON

Mailing Address 3316 BELLADONNA DR

City

PLANO

State

TX

Zip Code

75093-2136

FEC ID number of contributing
federal political committee.

C

Name of Employer
PEROT SYSTEMS CORPOccupation
WEB APPLICATION DEVELOPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	5	/	2	0	1	1

Transaction ID: SA11.411469

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 163 / 970

(check only one)

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

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. DANIEL P. KNOWLTON

Mailing Address 3316 BELLADONNA DR

City

PLANO

State

TX

Zip Code

75093-2136

FEC ID number of contributing
federal political committee.

C

Name of Employer
PEROT SYSTEMS CORP

Occupation

WEB APPLICATION DEVELOPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 5 / 2 0 1 1

Transaction ID: SA11.415268

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. GEORGE J. KONOMOS

Mailing Address 12 EAST 86 STREET

City

NEW YORK

State

NY

Zip Code

10028-0506

FEC ID number of contributing
federal political committee.

C

Name of Employer
LATIGO PARTNERS L.P.

Occupation

INVESTMENTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 5 / 2 0 1 1

Transaction ID: SA11.411636

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. TOM C. KOROLOGOS

Mailing Address 3150 SOUTH STREET N.W. #2A

City

WASHINGTON

State

DC

Zip Code

20007-4433

FEC ID number of contributing
federal political committee.

C

Name of Employer
T.C.K. INTERNATIONAL

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 4 / 2 0 1 1

Transaction ID: SA11.413096

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2100.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 164 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. JAMES F. KRESS

Mailing Address 1700 N. WEBSTER COURT

City

GREEN BAY

State

WI

Zip Code

54302

FEC ID number of contributing
federal political committee.

C

Name of Employer
GREENBAY PACKAGING INC.

Occupation
CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 1 / 2 0 1 1

Transaction ID: SA11.415861

Amount of Each Receipt this Period

300.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. LAYNE E. KRUSE

Mailing Address 671 SHARTLE CIRCLE

City

HOUSTON

State

TX

Zip Code

77024-5500

FEC ID number of contributing
federal political committee.

C

Name of Employer
FULBRIGHT & JAWORSKI LLP

Occupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 1 1

Transaction ID: SA11.409243

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. GREG H. KUBICEK

Mailing Address P.O. BOX 87970

City

VANCOUVER

State

WA

Zip Code

98687-7970

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOLT HOMES

Occupation
C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.411063

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1550.00

TOTAL This Period (last page this line number only)

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

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(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. TOM J. KUKK

Mailing Address 3660 GIN LANE

City

NAPLES

State

FL

Zip Code

34102-7816

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	5	/	2	0	1	1

Transaction ID: SA11.424446

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. DWIGHT R. KULWIN

Mailing Address 260 SUNNY ACRES DRIVE

City

CINCINNATI

State

OH

Zip Code

45255-3903

FEC ID number of contributing
federal political committee.

C

Name of Employer
CINCINNATI EYE INSTITUTEOccupation
SURGEON

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.406777

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. LATALLE LAFOLLETTE

Mailing Address 4887 WINDSOR PARK

City

SARASOTA

State

FL

Zip Code

34235-2608

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: SA11.409686

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. LATALLE LAFOLLETTE

Mailing Address 4887 WINDSOR PARK

City

SARASOTA

State

FL

Zip Code

34235-2608

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 2 / 2 0 1 1

Transaction ID: SA11.416286

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. LUKE M. LAMBERT

Mailing Address 487 RIVER ST.

City

NORWELL

State

MA

Zip Code

02061-2629

FEC ID number of contributing
federal political committee.

C

Name of Employer
ASCOA

Occupation
HEALTHCARE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 6 / 2 0 1 1

Transaction ID: SA11.411651

Amount of Each Receipt this Period

300.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. ELEANORA LANDY

Mailing Address 605 ALMERIA AVENUE

City

CORAL GABLES

State

FL

Zip Code

33134-5602

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

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

Transaction ID: SA11.407111

Amount of Each Receipt this Period

325.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

725.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MS. ELEANORA LANDY

Mailing Address 605 ALMERIA AVENUE

City

CORAL GABLES

State

FL

Zip Code

33134-5602

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.417905

Amount of Each Receipt this Period

325.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

CHILL D. LANGHORNE

Mailing Address 1680 31ST STREET NW

City

WASHINGTON

State

DC

Zip Code

20007-2924

FEC ID number of contributing
federal political committee.

C

Name of Employer
KENTUCKY RIVER PROPERTIES

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 5 / 2 0 1 1

Transaction ID: SA11.411569

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. LARRY S. LARKIN

Mailing Address 565 S. MAIN STREET

City

WILLARD

State

UT

Zip Code

84340-9600

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

Transaction ID: SA11.414114

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1575.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. MICHAEL D. LARSON

Mailing Address 633 OAKLAND DRIVE

City

DEKALB

State

IL

Zip Code

60115-4950

FEC ID number of contributing
federal political committee.

C

Name of Employer
ELMER LARSON INC.

Occupation

VICE PRESIDENT/G.M.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 9 / 2 0 1 1

Transaction ID: SA11.417013

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROBERT J. LASSETTER

Mailing Address 5359 MONARCH DRIVE

City

GAINESVILLE

State

GA

Zip Code

30506-7329

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11.407551

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ROBERT J. LASSETTER

Mailing Address 5359 MONARCH DRIVE

City

GAINESVILLE

State

GA

Zip Code

30506-7329

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 4 / 2 0 1 1

Transaction ID: SA11.411387

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

650.00

TOTAL This Period (last page this line number only)

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. ROBERT J. LASSETTER

Mailing Address 5359 MONARCH DRIVE

City

GAINESVILLE

State

GA

Zip Code

30506-7329

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11.412535

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROBERT J. LASSETTER

Mailing Address 5359 MONARCH DRIVE

City

GAINESVILLE

State

GA

Zip Code

30506-7329

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 0 / 2 0 1 1

Transaction ID: SA11.414679

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ROBERT J. LASSETTER

Mailing Address 5359 MONARCH DRIVE

City

GAINESVILLE

State

GA

Zip Code

30506-7329

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 1 / 2 0 1 1

Transaction ID: SA11.415840

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 170 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. RICHARD W. LATIMER

Mailing Address 59 GIBSON AVENUE

City

NARRAGANSETT

State

RI

Zip Code

02882-3909

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 7 / 2 0 1 1

Transaction ID: SA11.411789

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RICHARD W. LATIMER

Mailing Address 59 GIBSON AVENUE

City

NARRAGANSETT

State

RI

Zip Code

02882-3909

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.417431

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. STEVEN A. LAUB

Mailing Address 242 ATHERTON AVENUE

City

ATHERTON

State

CA

Zip Code

94027-5438

FEC ID number of contributing
federal political committee.

C

Name of Employer
ATMEL CORPORATION

Occupation
EXECUTIVE MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.417656

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5400.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 171 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. CORDELIA R. LAVERACK

Mailing Address 141 BRISCOE ROAD

City

NEW CANAAN

State

CT

Zip Code

06840-2304

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	9	/	2	0	1	1

Transaction ID: SA11.417015

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WILLIAM LAVERACK, JR.

Mailing Address 141 BRISCOE ROAD

City

NEW CANAAN

State

CT

Zip Code

06840-2304

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

INVESTMENTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	9	/	2	0	1	1

Transaction ID: SA11.417016

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. LARRY LAWRENCE

Mailing Address 40 BROOKRIDGE DIRVE

City

GREENWICH

State

CT

Zip Code

06830-4830

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	5	/	2	0	1	1

Transaction ID: SA11.411612

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 172 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. ROBERT A. LAWRENCE

Mailing Address 24 JACKSON POND ROAD

City

DEDHAM

State

MA

Zip Code

02026-5524

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 4 / 2 0 1 1

Transaction ID: SA11.407854

Amount of Each Receipt this Period

750.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROBERT A. LAWRENCE

Mailing Address 24 JACKSON POND ROAD

City

DEDHAM

State

MA

Zip Code

02026-5524

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 1 / 2 0 1 1

Transaction ID: SA11.415876

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. MONA S. LAYTON

Mailing Address 1991 SIGGARD DRIVE

City

SALT LAKE CITY

State

UT

Zip Code

84106-3872

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.413436

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 173 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MS. BELINA L. LAZZAR

Mailing Address P.O. BOX 8686

City

RANCHO SANTA FE

State

CA

Zip Code

92067-8686

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.412364

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. BELINA L. LAZZAR

Mailing Address P.O. BOX 8686

City

RANCHO SANTA FE

State

CA

Zip Code

92067-8686

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	8	/	2	0	1	1

Transaction ID: SA11.415717

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. MICHAEL G. LECHEMINANT

Mailing Address 5822 DESERT OAK WAY

City

SPRING

State

TX

Zip Code

77379-5525

FEC ID number of contributing
federal political committee.

C

Name of Employer
CYPRESSWOOD ENDODONTICSOccupation
ENDODONTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	5	/	2	0	1	1

Transaction ID: SA11.406437

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 174 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

DR. MICHAEL G. LECHEMINANT

Mailing Address 5822 DESERT OAK WAY

City

SPRING

State

TX

Zip Code

77379-5525

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

Name of Employer

CYPRESSWOOD ENDODONTICS

Occupation

ENDODONTIST

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	5	/	2	0	1	1

Transaction ID: SA11.411485

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. MICHAEL G. LECHEMINANT

Mailing Address 5822 DESERT OAK WAY

City

SPRING

State

TX

Zip Code

77379-5525

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

Name of Employer

CYPRESSWOOD ENDODONTICS

Occupation

ENDODONTIST

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	5	/	2	0	1	1

Transaction ID: SA11.415283

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. CHRISTOPHER LEE

Mailing Address 277 PARK AVENUE,
45 FLOOR

City

NEW YORK

State

NY

Zip Code

10172-2903

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

Name of Employer

HIGHSTAR CAPITAL LP

Occupation

GENERAL PARTNER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	3	1	/	2	0	1	1

Transaction ID: SA11.408931

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5200.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 175 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.Full Name (Last, First, Middle Initial)
MR. THOMAS V. LEEDSMailing Address 74 TRINITY PLACE,
RM1303

City	State	Zip Code
NEW YORK	NY	10006-2109

FEC ID number of contributing
federal political committee.

C

Name of Employer
LEEDS & LEEDS COMPANY INC.Occupation
INSURANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	7	/	2	0	1	1

Transaction ID: SA11.410468

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.Full Name (Last, First, Middle Initial)
MR. MICHAEL LEFFELL

Mailing Address 35 SHELDRAKE ROAD

City	State	Zip Code
SCARSDALE	NY	10583-3409

FEC ID number of contributing
federal political committee.

C

Name of Employer
PORTAGE ADVISORS LLCOccupation
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	3	1	/	2	0	1	1

Transaction ID: SA11.408930

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.Full Name (Last, First, Middle Initial)
MR. THOMAS L. LEGLER

Mailing Address 2242 E. ALPINE AVENUE

City	State	Zip Code
MESA	AZ	85204-1412

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	4	/	2	0	1	1

Transaction ID: SA11.407809

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10250.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 176 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. PETER A. LEIDEL

Mailing Address 410 PARK AVE

City

NEW YORK

State

NY

Zip Code

10022-4407

FEC ID number of contributing
federal political committee.

C

Name of Employer
YORKTOWN PARTNERS LLC

Occupation
INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.408912

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. SARAH LENTI

Mailing Address 217 14TH STREET NE

City

WASHINGTON

State

DC

Zip Code

20002-6405

FEC ID number of contributing
federal political committee.

C

Name of Employer
US CHAMBER OF COMMERCE

Occupation
DIRECTOR OF STATE AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 4 / 2 0 1 1

Transaction ID: SA11.414178

Amount of Each Receipt this Period

540.71

CONTRIBUTION

IN-KIND: PRINTING & DELI-
VERY FOR PAC; REFUNDED \$5-
40.71 ON 01/24/2011

C.

Full Name (Last, First, Middle Initial)

MR. SIDNEY M. LERMAN

Mailing Address 31 EVERGREEN CIRCLE

City

MANHASSET

State

NY

Zip Code

11030-3934

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE WEEKS-LERMAN GROUP,
LLC

Occupation
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.413297

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5790.71

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 177 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. EDWARD LESFERD

Mailing Address 409 145TH AVENUE SE

City

BELLEVUE

State

WA

Zip Code

98007-5105

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	5	/	2	0	1	1

Transaction ID: SA11.405846

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. EDWARD LESFERD

Mailing Address 409 145TH AVENUE SE

City

BELLEVUE

State

WA

Zip Code

98007-5105

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.412382

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. EDWARD LESFERD

Mailing Address 409 145TH AVENUE SE

City

BELLEVUE

State

WA

Zip Code

98007-5105

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	9	/	2	0	1	1

Transaction ID: SA11.417082

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 178 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. RANDY L. LEVINE

Mailing Address 245 E. 58TH STREET
APARTMENT 7DCity State Zip Code
NEW YORK NY 10022-1339FEC ID number of contributing
federal political committee.**C**Name of Employer
NEW YORK YANKEESOccupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	7	/	2	0	1	1

Transaction ID: SA11.410470

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. BARBARA D. LEWIS

Mailing Address 87 PINCKNEY STREET

City State Zip Code
BOSTON MA 02114-4303FEC ID number of contributing
federal political committee.**C**Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	5	/	2	0	1	1

Transaction ID: SA11.408270

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. MARC LIPSCHULTZ

Mailing Address 1060 FIFTH AVENUE
APARTMENT 3BCity State Zip Code
NEW YORK NY 10128-0104FEC ID number of contributing
federal political committee.**C**Name of Employer
KOHLBERG KRAVIS ROBERTS
& CO.Occupation
INVESTMENTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	3	/	2	0	1	1

Transaction ID: SA11.412877

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10500.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 179 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. WAYNE H. LOBDELL

Mailing Address 1021 HILLSBORO MILE #8

City

HILLSBORO BEACH

State

FL

Zip Code

33062-2206

FEC ID number of contributing
federal political committee.**C**Name of Employer
SELF-EMPLOYED

Occupation

BUSINESS DEVELOPMENT/INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.411183

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. GARY F. LOCKWOOD

Mailing Address 6840 LINDEN STREET

City

SHAWNEE MISSION

State

KS

Zip Code

66208-1426

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	3		2	0	1	1

Transaction ID: SA11.416398

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. KRISTIN H. LONDAL

Mailing Address 29 STURGIS ROAD

City

BRONXVILLE

State

NY

Zip Code

10708-5017

FEC ID number of contributing
federal political committee.**C**Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.407190

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6250.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 180 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. HERBERT I. LONDON

Mailing Address 10 WEST STREET
APARTMENT 20ECity State Zip Code
NEW YORK NY 10004-1088FEC ID number of contributing
federal political committee.

C

Name of Employer
L HUDSON INSTITUTEOccupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.412546

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. JOAN T. LOOS

Mailing Address 3111 GREEN DOLPHIN LANE

City State Zip Code
NAPLES FL 34102-7915FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11.407114

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. JOAN T. LOOS

Mailing Address 3111 GREEN DOLPHIN LANE

City State Zip Code
NAPLES FL 34102-7915FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 0 9 / 2 0 1 1

Transaction ID: SA11.410756

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

550.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 181 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. ANTHONY E. LORBER

Mailing Address P.O. BOX 520

City

MARTINSBURG

State

WV

Zip Code

25402-0520

FEC ID number of contributing
federal political committee.

C

Name of Employer
SOUTHWEST AIRLINES

Occupation
PILOT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.412426

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. THOMAS C. LUDLOW

Mailing Address 6409 OSPREY LANE

City

KLAMATH FALLS

State

OR

Zip Code

97601-9130

FEC ID number of contributing
federal political committee.

C

Name of Employer
J.W.T.R., L.L.C.

Occupation
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.413672

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. WILLIAM E. LUDWICK

Mailing Address 3200 W. CALHOUN PARKWAY
APARTMENT 803

City

MINNEAPOLIS

State

MN

Zip Code

55416-3290

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.413718

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 182 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. KALLEEN LUND

Mailing Address 3201 PIUTE DRIVE

City

PROVO

State

UT

Zip Code

84604-4849

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 1 1

Transaction ID: SA11.410385

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. STEVE J. LUND

Mailing Address 3201 PIUTE DRIVE

City

PROVO

State

UT

Zip Code

84604-4849

FEC ID number of contributing
federal political committee.

C

Name of Employer
NU SKIN ENTERPRISES

Occupation

VICE CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 1 1

Transaction ID: SA11.410390

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ALLAN R. LYONS

Mailing Address 6471 ENCLAVE WAY

City

BOCA RATON

State

FL

Zip Code

33496-4076

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

INVESTMENT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.410946

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10250.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 183 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. ALLAN R. LYONS

Mailing Address 6471 ENCLAVE WAY

City

BOCA RATON

State

FL

Zip Code

33496-4076

FEC ID number of contributing
federal political committee.**C**Name of Employer
SELF-EMPLOYED

Occupation

INVESTMENT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	2	/	2	0	1	1

Transaction ID: SA11.416164

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROBERT A. MAGINN, JR.

Mailing Address 171 MARSH STREET

City

BELMONT

State

MA

Zip Code

02478-2132

FEC ID number of contributing
federal political committee.**C**Name of Employer
JENZABAR, INC.

Occupation

C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	5	/	2	0	1	1

Transaction ID: SA11.413184

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DAVID L. MAHONEY

Mailing Address 5 BLACKFOOT DRIVE

City

NASHUA

State

NH

Zip Code

03063-1305

FEC ID number of contributing
federal political committee.**C**Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.409708

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 184 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. HARVEY MALLEMENT

Mailing Address 3 E. 69TH STREET

City

NEW YORK

State

NY

Zip Code

10021-5249

FEC ID number of contributing
federal political committee.

C

Name of Employer
HARVEST PARTNERS

Occupation

INVESTMENT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.418263

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DREW K. MALONEY

Mailing Address 3020 MACOMB STREET, NW

City

WASHINGTON

State

DC

Zip Code

20008-3317

FEC ID number of contributing
federal political committee.

C

Name of Employer
OGILVY GOVERNMENT RELATIO-
NS

Occupation

GOVERNMENT RELATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 6 / 2 0 1 1

Transaction ID: SA11.411750

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DREW K. MALONEY

Mailing Address 3020 MACOMB STREET, NW

City

WASHINGTON

State

DC

Zip Code

20008-3317

FEC ID number of contributing
federal political committee.

C

Name of Employer
OGILVY GOVERNMENT RELATIO-
NS

Occupation

GOVERNMENT RELATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 5 / 2 0 1 1

Transaction ID: SA11.413187

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SEE REATTRIBUTION

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 185 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. DREW K. MALONEY

Mailing Address 3020 MACOMB STREET, NW

City

WASHINGTON

State

DC

Zip Code

20008-3317

FEC ID number of contributing
federal political committee.

C

Name of Employer
OGILVY GOVERNMENT RELATIO-
NS

Occupation

GOVERNMENT RELATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.413187B

Amount of Each Receipt this Period

-5000.00

CONTRIBUTION

[MEMO ITEM]

REATTRIBUTION TO SPOUSE

B.

Full Name (Last, First, Middle Initial)

DR. SABRA MALONEY

Mailing Address 3020 MACOMB STREET, NW

City

WASHINGTON

State

DC

Zip Code

20008-3317

FEC ID number of contributing
federal political committee.

C

Name of Employer
JOHNS HOPKINS UNIVERSITY

Occupation

PROFESSOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.413852

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

[MEMO ITEM]

REATTRIBUTION FROM SPOUSE

C.

Full Name (Last, First, Middle Initial)

MS. BETSY MANCHESTER

Mailing Address 215 BELVEDERE STREET

City

LA JOLLA

State

CA

Zip Code

92037-5306

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	0	/	2	0	1	1

Transaction ID: SA11.414898

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. DOUGLAS F. MANCHESTER

Mailing Address 5200 GRAND DEL MAR WAY

City

SAN DIEGO

State

CA

Zip Code

92130-4900

FEC ID number of contributing
federal political committee.

C

Name of Employer
MANCHESTER FINANCIAL GROU-
P, L.P.

Occupation

CHAIRMAN OF THE BOARD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 7 / 2 0 1 1

Transaction ID: SA11.415595

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. E. BARRY MANSUR

Mailing Address 16646 CAPTIVA DRIVE

City

CAPTIVA

State

FL

Zip Code

33924-6022

FEC ID number of contributing
federal political committee.

C

Name of Employer
MANSUR & COMPANY

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 9 / 2 0 1 1

Transaction ID: SA11.417012

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RICHARD MARGOLIS

Mailing Address 30765 PACIFIC COAST HIGHWAY
SUITE 360

City

MALIBU

State

CA

Zip Code

90265-3646

FEC ID number of contributing
federal political committee.

C

Name of Employer
COLUMBUS PACIFIC PROPERTI-
ES

Occupation

C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.419384

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

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)
for each category of the
Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. YANNICK MARKS

Mailing Address 185 E. 85TH STREET

City

NEW YORK

State

NY

Zip Code

10028-2140

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
PAINTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11.408886

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. YANNICK MARKS

Mailing Address 185 E. 85TH STREET

City

NEW YORK

State

NY

Zip Code

10028-2140

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
PAINTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11.417848

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RICHARD G. MASANNAT

Mailing Address 6161 EDSALL ROAD
APARTMENT 1005

City

ALEXANDRIA

State

VA

Zip Code

22304-4135

FEC ID number of contributing
federal political committee.

C

Name of Employer
V.C.S.

Occupation
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 6 / 2 0 1 1

Transaction ID: SA11.405873

Amount of Each Receipt this Period

75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

375.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 188 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. RICHARD G. MASANNAT

Mailing Address 6161 EDSALL ROAD
APARTMENT 1005

City	State	Zip Code
ALEXANDRIA	VA	22304-4135

FEC ID number of contributing
federal political committee.

C

Name of Employer
V.C.S.Occupation
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.409921

Amount of Each Receipt this Period

75.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RICHARD G. MASANNAT

Mailing Address 6161 EDSALL ROAD
APARTMENT 1005

City	State	Zip Code
ALEXANDRIA	VA	22304-4135

FEC ID number of contributing
federal political committee.

C

Name of Employer
V.C.S.Occupation
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.412375

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. LESTER LOWRY MAYES

Mailing Address P.O. BOX 659512

City	State	Zip Code
SAN ANTONIO	TX	78265-9512

FEC ID number of contributing
federal political committee.

C

Name of Employer
CLEAR CHANNEL COMMUNICATI-
ONSOccupation
CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	7	/	2	0	1	1

Transaction ID: SA11.415591

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5175.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 189 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)
MR. PAUL MCALEER

Mailing Address 45 ESSEX RD

City State Zip Code
NORWOOD MA 02062-1015

FEC ID number of contributing
federal political committee.

C

Name of Employer
BEANTOWN ATHLETICS

Occupation
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 1 6 / 2 0 1 1

Transaction ID: SA11.406489

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. LUJEAN MCALLISTER

Mailing Address 296 E. 1864 S.

City State Zip Code
OREM UT 84058-7858

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

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

Transaction ID: SA11.407058

Amount of Each Receipt this Period

225.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. LUJEAN MCALLISTER

Mailing Address 296 E. 1864 S.

City State Zip Code
OREM UT 84058-7858

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 8 / 2 0 1 1

Transaction ID: SA11.415691

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

575.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 190 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. JOHN M. MCCORMACK

Mailing Address 1303 CAMPBELL ROAD

City

HOUSTON

State

TX

Zip Code

77055-6403

FEC ID number of contributing
federal political committee.

C

Name of Employer
VISIBLE CHANGES

Occupation

BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.420421

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. BYRON S. MCDANIEL

Mailing Address 11114 BRIAR STREET

City

SHAWNEE MISSION

State

KS

Zip Code

66211-1720

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 5 / 2 0 1 1

Transaction ID: SA11.415395

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. BYRON S. MCDANIEL

Mailing Address 11114 BRIAR STREET

City

SHAWNEE MISSION

State

KS

Zip Code

66211-1720

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.417537

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1150.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 191 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. BYRON S. MCDANIEL

Mailing Address 11114 BRIAR STREET

City

SHAWNEE MISSION

State

KS

Zip Code

66211-1720

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 9 / 2 0 1 1

Transaction ID: SA11.424987

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. FLORENCE MCGEE

Mailing Address 5957 CRAB ORCHARD ROAD

City

HOUSTON

State

TX

Zip Code

77057-1421

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.417953

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. MARGARET MCGILLIVRAY

Mailing Address 97 INDIAN HILL RD

City

WINNETKA

State

IL

Zip Code

60093-3933

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 8 / 2 0 1 1

Transaction ID: SA11.416998

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1600.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 192 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. MATT MCILWAIN

Mailing Address 5736 64TH AVE NE

City

SEATTLE

State

WA

Zip Code

98105-2042

FEC ID number of contributing
federal political committee.**C**Name of Employer
MADRONA

Occupation

VENTURE CAPITAL

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	3	0	/	2	0	1	1

Transaction ID: SA11.408922

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. THOMAS J. MCINERNEY

Mailing Address 12 BROWNSTONE TURN

City

WEATOGUE

State

CT

Zip Code

06089-9678

FEC ID number of contributing
federal political committee.**C**Name of Employer
I.N.G.

Occupation

INSURANCE EXECUTIVE

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	5	/	2	0	1	1

Transaction ID: SA11.411613

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. PAUL J. MCKEE, III

Mailing Address 746 HIGH HAMPTON ROAD

City

SAINT LOUIS

State

MO

Zip Code

63124-1018

FEC ID number of contributing
federal political committee.**C**Name of Employer
P.A.R.I.C. CORPORATION

Occupation

PRESIDENT & C.E.O.

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	8	/	2	0	1	1

Transaction ID: SA11.419377

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 193 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. DANIEL F. MCKEITHAN, JR.

Mailing Address 7975 N. RANGE LINE ROAD

City

MILWAUKEE

State

WI

Zip Code

53217-2044

FEC ID number of contributing
federal political committee.

C

Name of Employer

TAMARACK PETROLEUM COMPANY

Occupation

PRESIDENT

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	3	/	2	0	1	1

Transaction ID: SA11.406349

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. HARRY T. MCMAHON, III

Mailing Address 792 SAN LORENZO STREET

City

SANTA MONICA

State

CA

Zip Code

90402-1324

FEC ID number of contributing
federal political committee.

C

Name of Employer

B.A.M.L.

Occupation

BANKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	1	/	2	0	1	1

Transaction ID: SA11.419828

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ROBERT MCMULLAN

Mailing Address 120 CHRISTIE HILL ROAD

City

DARIEN

State

CT

Zip Code

06820-3000

FEC ID number of contributing
federal political committee.

C

Name of Employer

BLACKSTONE

Occupation

PRIVATE EQUITY

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.411057

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

8500.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 194 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. PATRICIA MCNAMARA

Mailing Address 6140 71ST STREET

City

MIDDLE VILLAGE

State

NY

Zip Code

11379-1232

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	1	/	2	0	1	1

Transaction ID: SA11.425501

Amount of Each Receipt this Period

300.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. CHARLES S. MCNEIL

Mailing Address 4927 S. FILLMORE COURT

City

ENGLEWOOD

State

CO

Zip Code

80113-7146

FEC ID number of contributing
federal political committee.

C

Name of Employer
NEX GEN RESOURCES CORPORA-
TIONOccupation
C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	8	/	2	0	1	1

Transaction ID: SA11.415628

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. AUDREY MCNIFF

Mailing Address 102 ZACCHEUS MEAD LANE

City

GREENWICH

State

CT

Zip Code

06831-3751

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.411056

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6300.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 195 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. JAMES F. MCPHILLIAMY

Mailing Address 1221 BILTMORE DRIVE

City

CHARLOTTE

State

NC

Zip Code

28207-2552

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE INTEGIS GROUP

Occupation

SPORTS MARKETING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	7	/	2	0	1	1

Transaction ID: SA11.415479

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. STEPHEN R. MEACHAM

Mailing Address 2525 N. 8TH STREET

City

GRAND JUNCTION

State

CO

Zip Code

81501-8845

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

MEDICAL DOCTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	7	/	2	0	1	1

Transaction ID: SA11.417918

Amount of Each Receipt this Period

300.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. L. RALPH MECHAM

Mailing Address 11337 WILLOWBROOK DRIVE

City

POTOMAC

State

MD

Zip Code

20854-2568

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	3	1	/	2	0	1	1

Transaction ID: SA11.409087

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

800.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 196 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. MARSHALL MERRIFIELD

Mailing Address 5191 SEAGROVE PLACE

City

SAN DIEGO

State

CA

Zip Code

92130-3229

FEC ID number of contributing
federal political committee.

C

Name of Employer
CLARK SECURITY

Occupation

CHAIRMAN/C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 0 / 2 0 1 1

Transaction ID: SA11.414896

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. EDITH N. K. MEYER

Mailing Address 502 CARDS PONDS ROAD

City

WAKEFIELD

State

RI

Zip Code

02879-6914

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.418121

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. LESLIE MEYERS

Mailing Address 10 NORTHERN AVENUE

City

BRONXVILLE

State

NY

Zip Code

10708-2221

FEC ID number of contributing
federal political committee.

C

Name of Employer
EIGHT 8 L.L.C.

Occupation

FAMILY OFFICE MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.407193

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 197 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. MICHAEL G. MEYERS

Mailing Address 10 NORTHERN AVENUE

City

BRONXVILLE

State

NY

Zip Code

10708-2221

FEC ID number of contributing
federal political committee.

C

Name of Employer
MACQUARIE CAPITAL U.S.A.
INC.Occupation
BANKING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.407196

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. EDWARD MICHAUD

Mailing Address 12 HIGHLAND STREET

City

WESTON

State

MA

Zip Code

02493-1110

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
ORTHODONTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	3		2	0	1	1

Transaction ID: SA11.410012

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. EDWARD MICHAUD

Mailing Address 12 HIGHLAND STREET

City

WESTON

State

MA

Zip Code

02493-1110

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
ORTHODONTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11.412021

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5200.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 198 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

DR. EDWARD MICHAUD

Mailing Address 12 HIGHLAND STREET

City

WESTON

State

MA

Zip Code

02493-1110

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

ORTHODONTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 8 / 2 0 1 1

Transaction ID: SA11.415750

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JAMES R. MICHIE

Mailing Address 405 E. 12TH AVENUE

City

SALT LAKE CITY

State

UT

Zip Code

84103-2845

FEC ID number of contributing
federal political committee.

C

Name of Employer
THOMPSON MICHIE ASSOCIATES
INC

Occupation

PRESIDENT, BOARD MEMBER, OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.417538

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RONALD P. MIKA

Mailing Address 1020 N. SUNBROOK CIRCLE

City

ALPINE

State

UT

Zip Code

84004-1215

FEC ID number of contributing
federal political committee.

C

Name of Employer
SORENSEN CAPITAL

Occupation

INVESTING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.417659

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5350.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 199 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. SUSAN L. MIKA

Mailing Address 1020 N. SUNBROOK CIRCLE

City

ALPINE

State

UT

Zip Code

84004-1215

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.417657

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. JOAN G. MILAM

Mailing Address 2673 CENTER COURT DRIVE

City

WESTON

State

FL

Zip Code

33332-1833

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 3 / 2 0 1 1

Transaction ID: SA11.412963

Amount of Each Receipt this Period

125.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. JOAN G. MILAM

Mailing Address 2673 CENTER COURT DRIVE

City

WESTON

State

FL

Zip Code

33332-1833

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.419473

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5275.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 200 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. ASHLEY H. MILLER

Mailing Address 1795 W. WESLEY ROAD

City

ATLANTA

State

GA

Zip Code

30327-1909

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

STATIONARY BUSINESS OWNER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	0	/	2	0	1	1

Transaction ID: SA11.414891

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DONALD K. MILLER

Mailing Address 225 VIATORTUGA

City

PALM BEACH

State

FL

Zip Code

33480

FEC ID number of contributing
federal political committee.

C

Name of Employer
AXIOM INTERNATIONAL INVE-
STORS

Occupation

ASSET MANAGEMENT

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.409582

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. GREGORY S. MILLER

Mailing Address 9350 S. 150 E.
SUITE 1000

City

SANDY

State

UT

Zip Code

84070-2721

FEC ID number of contributing
federal political committee.

C

Name of Employer
LARRY H. MILLER GROUP

Occupation

C.E.O.

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	5	/	2	0	1	1

Transaction ID: SA11.417664

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 201 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. HARVEY L. MILLER

Mailing Address 1538 BRAE BURN DRIVE

City

RIVERWOODS

State

IL

Zip Code

60015-1710

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.412371

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. HEIDI MILLER

Mailing Address 9350 S. 150 E.
SUITE 1000

City

SANDY

State

UT

Zip Code

84070-2721

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	5	/	2	0	1	1

Transaction ID: SA11.417663

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOHN R. MILLER

Mailing Address 299 SOUTH MAIN STREET
SUITE 2450

City

SALT LAKE CITY

State

UT

Zip Code

84111-2282

FEC ID number of contributing
federal political committee.

C

Name of Employer
J. R. MILLER ENTERPRISESOccupation
PRINCIPAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	7	/	2	0	1	1

Transaction ID: SA11.410474

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 202 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. MARVIN E. MILLER

Mailing Address P.O. BOX 10340

City

TORRANCE

State

CA

Zip Code

90505-1240

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 9 / 2 0 1 1

Transaction ID: SA11.410885

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. PRESCOTT C. MILLER

Mailing Address 1795 WEST WESLEY RD

City

ATLANTA

State

GA

Zip Code

30327-1909

FEC ID number of contributing
federal political committee.

C

Name of Employer
ROUND HILL CAPITAL LLC

Occupation
ASSET MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 0 / 2 0 1 1

Transaction ID: SA11.414888

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. PRISCILLA C. MILLER

Mailing Address 225 VIA TORTUGA

City

PALM BEACH

State

FL

Zip Code

33480-3638

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
VOLUNTEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.409592

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10250.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 203 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. VICTORIA MILLER

Mailing Address 1369 MILITARY WAY

City

SALT LAKE CITY

State

UT

Zip Code

84103-4454

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	7		2	0	1	1

Transaction ID: SA11.410456

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. CHARLES MILNER

Mailing Address 57 CLOUTMANS LN

City

MARBLEHEAD

State

MA

Zip Code

01945-1546

FEC ID number of contributing
federal political committee.

C

Name of Employer
STROUD CONSULTING

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	1	1

Transaction ID: SA11.416789

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. KEVIN J. MITCHELL

Mailing Address 2053 NAVAJO TRAIL

City

LAFAYETTE

State

CO

Zip Code

80026-3424

FEC ID number of contributing
federal political committee.

C

Name of Employer
RED CLOUD CAPITAL, L.L.C.

Occupation

PRIVATE EQUITY INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	1

Transaction ID: SA11.420392

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10250.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 204 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. NANCY MITCHELL

Mailing Address 2053 NAVAJO TRAIL

City

LAFAYETTE

State

CO

Zip Code

80026-3424

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.420391

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. KIT MONCRIEF

Mailing Address 16 VALLEY RIDGE ROAD

City

FORT WORTH

State

TX

Zip Code

76107-3111

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

RANCH/INVESTMENTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 5 / 2 0 1 1

Transaction ID: SA11.411619

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RICHARD W. MONCRIEF, JR.

Mailing Address 1900 SPANISH TRAIL

City

FORT WORTH

State

TX

Zip Code

76107-3541

FEC ID number of contributing
federal political committee.

C

Name of Employer
MONCRIEF OIL INTERNATIONAL, INC.

Occupation

BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 1 1

Transaction ID: SA11.417262

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 205 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. KEVIN P. MOORE

Mailing Address 8976 CROOKED STICK COURT

City

NAPLES

State

FL

Zip Code

34113-1678

FEC ID number of contributing
federal political committee.

C

Name of Employer
ROONEY HOLDINGS

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	3		2	0	1	1

Transaction ID: SA11.466943

Amount of Each Receipt this Period

2093.14

CONTRIBUTION

IN-KIND: CATERING & VALET
SERVICES FOR PAC; REFUNDED
\$2,093.14 ON 03/23/2011**B.**

Full Name (Last, First, Middle Initial)

MR. MICHAEL E. MORAN

Mailing Address 9360 SW 59TH AVENUE

City

MIAMI

State

FL

Zip Code

33156-2032

FEC ID number of contributing
federal political committee.

C

Name of Employer
BROCKWAY MORAN & PARTNERS

Occupation

MANAGING PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	1

Transaction ID: SA11.419392

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. JOYCE MORGAN

Mailing Address 58 EAST CENTER STREET

City

ALPINE

State

UT

Zip Code

84004-1610

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: SA11.407039

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

7293.14

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 206 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MS. JOYCE MORGAN

Mailing Address 58 EAST CENTER STREET

City

ALPINE

State

UT

Zip Code

84004-1610

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: SA11.413805

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. MARJORIE B. MORRIS

Mailing Address 2867 OUTLET ROAD

City

CLIFTON SPRINGS

State

NY

Zip Code

14432-9742

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: SA11.412715

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. MARJORIE B. MORRIS

Mailing Address 2867 OUTLET ROAD

City

CLIFTON SPRINGS

State

NY

Zip Code

14432-9742

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 3 / 2 0 1 1

Transaction ID: SA11.416421

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2200.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 207 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. RENEE H. MORRISON

Mailing Address 336 EL VEDADO ROAD

City

PALM BEACH

State

FL

Zip Code

33480-4736

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 4 / 2 0 1 1

Transaction ID: SA11.410145

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. RENEE H. MORRISON

Mailing Address 336 EL VEDADO ROAD

City

PALM BEACH

State

FL

Zip Code

33480-4736

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 3 / 2 0 1 1

Transaction ID: SA11.417483

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. H. GARY MORSE

Mailing Address 1020 LAKE SUMTER LANDING

City

THE VILLAGES

State

FL

Zip Code

32162-2699

FEC ID number of contributing
federal political committee.

C

Name of Employer
VILLAGES OF LAKE-SUMTER

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.407225

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 208 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. RENEE B. MORSE

Mailing Address 1020 LAKE SUMTER LANDING

City

THE VILLAGES

State

FL

Zip Code

32162-2699

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE VILLAGES

Occupation

ADMINISTRATIVE ASSISTANT TO C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.407224

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. THOMAS MORSE

Mailing Address 3616 SUNNYBROOK LANE

City

BRYAN

State

TX

Zip Code

77802-3921

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

CAMPGROUND OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 8 / 2 0 1 1

Transaction ID: SA11.416991

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. WILLIAM I. MORTON

Mailing Address 87 S. BEACH ROAD

City

HOBE SOUND

State

FL

Zip Code

33455-2336

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.407216

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 209 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. DAVID G. MUGAR

Mailing Address 222 BERKELEY STREET

City

BOSTON

State

MA

Zip Code

02116-3748

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

PRIVATE INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 1 / 2 0 1 1

Transaction ID: SA11.416071

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. MICHAEL J. MULLIGAN

Mailing Address 3 SOUTHGATE AVENUE

City

ANNAPOLIS

State

MD

Zip Code

21401-2709

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 1 5 / 2 0 1 1

Transaction ID: SA11.406382

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. MICHAEL J. MULLIGAN

Mailing Address 3 SOUTHGATE AVENUE

City

ANNAPOLIS

State

MD

Zip Code

21401-2709

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 5 / 2 0 1 1

Transaction ID: SA11.411434

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5200.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 210 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. MICHAEL J. MULLIGAN

Mailing Address 3 SOUTHGATE AVENUE

City

ANNAPOLIS

State

MD

Zip Code

21401-2709

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	5	/	2	0	1	1

Transaction ID: SA11.415237

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. PETER W. MULLIN

Mailing Address 644 S. FIGUEROA STREET

City

LOS ANGELES

State

CA

Zip Code

90017-3411

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	5	/	2	0	1	1

Transaction ID: SA11.413183

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. THOMAS M. MULROY

Mailing Address 456 LOST DISTRICT DRIVE

City

NEW CANAAN

State

CT

Zip Code

06840-2016

FEC ID number of contributing
federal political committee.

C

Name of Employer
T-REX CAPITALOccupation
INVESTMENT BANKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.407220

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10100.00

TOTAL This Period (last page this line number only)

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. LAURA MUNDER

Mailing Address 422 SUNSET ROAD

City

WEST PALM BEACH

State

FL

Zip Code

33401-7928

FEC ID number of contributing
federal political committee.

C

Name of Employer

LAURA MUNDER FINE JEWELRY

Occupation

JEWELER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11.419825

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. LEE P. MUNDER

Mailing Address 422 SUNSET ROAD

City

WEST PALM BEACH

State

FL

Zip Code

33401-7928

FEC ID number of contributing
federal political committee.

C

Name of Employer

LEE MUNDER CAPITAL GROUP

Occupation

INVESTMENT COUNSELOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11.419827

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOE MURPHY

Mailing Address 519 BLACKJACK OAK

City

SHAVANO PARK

State

TX

Zip Code

78230-5637

FEC ID number of contributing
federal political committee.

C

Name of Employer

MURPHY TOMATOES

Occupation

SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

Transaction ID: SA11.414084

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 212 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)
MS. LINDA A. MURPHY TAVLARIOS

Mailing Address 15 WRENFIELD LANE

City State Zip Code
DARIEN CT 06820-2201

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 1 1

Transaction ID: SA11.410391

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. LINDA A. MURPHY TAVLARIOS

Mailing Address 15 WRENFIELD LANE

City State Zip Code
DARIEN CT 06820-2201

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 9 / 2 0 1 1

Transaction ID: SA11.414179

Amount of Each Receipt this Period

2064.00

CONTRIBUTION

IN-KIND: EVENT STAFFING
FOR PAC; REFUNDED \$2,064.-
00 ON 02/14/2011

C.

Full Name (Last, First, Middle Initial)
MR. WADE MURPHY

Mailing Address 5210 CALLE CORDOBA WAY PLACE

City State Zip Code
HOUSTON TX 77007-1160

FEC ID number of contributing
federal political committee.

C

Name of Employer
MARMIK OIL COMPANY

Occupation
BUSINESSMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.418262

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

12064.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 213 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. GARY NAKAMOTO

Mailing Address 999 FALLS CHASE COURT

City

GREAT FALLS

State

VA

Zip Code

22066-1383

FEC ID number of contributing
federal political committee.

C

Name of Employer
BASE TECHNOLOGIESOccupation
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.410645

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ERNEST W. NASH

Mailing Address 16430 PARK LAKE ROAD

City

EAST LANSING

State

MI

Zip Code

48823-9301

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	3	1	/	2	0	1	1

Transaction ID: SA11.409191

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. STANLEY N. NAVRUDE, SR.

Mailing Address 241 AUGUSTA CIRCLE

City

NORTH SIOUX CITY

State

SD

Zip Code

57049-5415

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	3	1	/	2	0	1	1

Transaction ID: SA11.409203

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5750.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 214 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. DAVID A. NEARON, JR.

Mailing Address 111 SOUTHVIEW LANE

City

ALAMO

State

CA

Zip Code

94507-2314

FEC ID number of contributing
federal political committee.

C

Name of Employer
DAVID A. NEARON LAW CORPO-
RATIONOccupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	1	1

Transaction ID: SA11.417855

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. CLYDE A. NEIBAUR

Mailing Address 1210 NEIBAUR MOUNTAIN ROAD

City

BANCROFT

State

ID

Zip Code

83217-5166

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	5		2	0	1	1

Transaction ID: SA11.408204

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. OFER NEMIROVSKY

Mailing Address 25 EXETER STREET

City

BOSTON

State

MA

Zip Code

02116-2709

FEC ID number of contributing
federal political committee.

C

Name of Employer
HARBOURVEST PARTNERSOccupation
FINANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	1	1

Transaction ID: SA11.411627

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10250.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 215 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. JAMES L. NICKEL

Mailing Address P.O. BOX 60679

City

BAKERSFIELD

State

CA

Zip Code

93386-0679

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	1	/	2	0	1	1

Transaction ID: SA11.413883

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. MARK NIELSEN

Mailing Address 3 PARLEY LANE

City

RIDGEFIELD

State

CT

Zip Code

06877-4903

FEC ID number of contributing
federal political committee.

C

Name of Employer
PRAXAIR, INC.

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.411042

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DAVID NIERENBERG

Mailing Address 19605 N.E. 8TH STREET

City

CAMAS

State

WA

Zip Code

98607-9252

FEC ID number of contributing
federal political committee.

C

Name of Employer
NIERENBERG INVESTMENT MAN-
AGEMENT COMPA

Occupation

INVESTMENT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.409597

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10250.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 216 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MS. PATRICIA NIERENBERG

Mailing Address 19605 NE 8TH STREET

City

CAMAS

State

WA

Zip Code

98607-9252

FEC ID number of contributing
federal political committee.

C

Name of Employer
NIERENBERG INVESTMENT MAN-
AGEMENT COMPA

Occupation

OFFICE MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.409580

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. R. DONALD NORENE

Mailing Address 600 SWANSON ROAD

City

RIO OSO

State

CA

Zip Code

95674-9621

FEC ID number of contributing
federal political committee.

C

Name of Employer
NORENE RANCHES INC.

Occupation

FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.420424

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOHN D. O'DONNELL

Mailing Address 600 VIA LIDO NORD

City

NEWPORT BEACH

State

CA

Zip Code

92663-5521

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE O'DONNELL GROUP

Occupation

REAL ESTATE DEVELOPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.412244

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 217 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. JAMES M. O'GRADY

Mailing Address 244 OLD TOLL CIRCLE

City

BLACK MOUNTAIN

State

NC

Zip Code

28711-9206

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11.406677

Amount of Each Receipt this Period

300.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. LEO A. O'HEARN

Mailing Address 3650 KETCH AVENUE

City

OXNARD

State

CA

Zip Code

93035-3029

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	4	/	2	0	1	1

Transaction ID: SA11.417603

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. MEREDITH O'ROURKE

Mailing Address 2118 E. RANDOLPH CIRCLE

City

TALLAHASSEE

State

FL

Zip Code

32308-0726

FEC ID number of contributing
federal political committee.

C

Name of Employer
FORWARD STRATEGIESOccupation
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	4	/	2	0	1	1

Transaction ID: SA11.466939

Amount of Each Receipt this Period

908.35

CONTRIBUTION

IN-KIND: ROOM RENTAL FOR
PAC; REFUNDED \$908.35 ON
03/16/2011

SUBTOTAL of Receipts This Page (optional)

2208.35

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. SCOTT I. OAKFORD

Mailing Address 4 INDIAN SPRING TRAIL

City

DARIEN

State

CT

Zip Code

06820-2109

FEC ID number of contributing
federal political committee.

C

Name of Employer
HAMILTON ROBINSON LLC

Occupation

INVESTMENTS

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: SA11.411047

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JAMES F. OLMSTED

Mailing Address P.O. BOX 7603

City

MCLEAN

State

VA

Zip Code

22106-7603

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.409915

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. GREG ONKEN

Mailing Address 193 HILLCREST ROAD

City

BERKELEY

State

CA

Zip Code

94705-2808

FEC ID number of contributing
federal political committee.

C

Name of Employer
J.P. MORGAN SECURITIES

Occupation

INVESTMENT ADVISOR

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 1 / 2 0 1 1

Transaction ID: SA11.413958

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 219 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. PETER BUSCH ORTHWEIN

Mailing Address 154 GUARDS ROAD

City

GREENWICH

State

CT

Zip Code

06831-2737

FEC ID number of contributing
federal political committee.

C

Name of Employer
THOR INDUSTRIES, INC.

Occupation

CHAIRMAN & C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 1 1

Transaction ID: SA11.410460

Amount of Each Receipt this Period

3000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ALFRED R. OTTE

Mailing Address 28 STRATTON LANE

City

SAN ANTONIO

State

TX

Zip Code

78257-1278

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 1 1

Transaction ID: SA11.409316

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ROBERT A. PAGE

Mailing Address 21262 TELEGRAPH

City

SOUTHFIELD

State

MI

Zip Code

48033-4243

FEC ID number of contributing
federal political committee.

C

Name of Employer
PAGE TOYOTA

Occupation

AUTOMOBILE DEALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 9 / 2 0 1 1

Transaction ID: SA11.410767

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

3750.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 220 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MS. EDITH P. PALMER

Mailing Address 282 LAROE ROAD

City

CHESTER

State

NY

Zip Code

10918-2435

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.408898

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. EDITH P. PALMER

Mailing Address 282 LAROE ROAD

City

CHESTER

State

NY

Zip Code

10918-2435

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.412403

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JAMES PANTELIDIS

Mailing Address 14 WEST 23RD STREET
FLOOR 15

City

NEW YORK

State

NY

Zip Code

10010-5203

FEC ID number of contributing
federal political committee.

C

Name of Employer
PAN BROTHERS ASSOCIATES,
INC.

Occupation
REAL ESTATE DEVELOPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 4 / 2 0 1 1

Transaction ID: SA11.413098

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)

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

Use separate schedule(s)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. CLYDE CLYDE PARKER, JR.

Mailing Address 11 ENGLISH GLADE COURT

City

THE WOODLANDS

State

TX

Zip Code

77381-4829

FEC ID number of contributing
federal political committee.

C

Name of Employer
WINSTEAD PC

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 4 / 2 0 1 1

Transaction ID: SA11.414227

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ANDREW M. PAUL

Mailing Address 283 PONDFIELD ROAD

City

BRONXVILLE

State

NY

Zip Code

10708-4936

FEC ID number of contributing
federal political committee.

C

Name of Employer
ENHANCED EQUITY FUND

Occupation

INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.407195

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. MARGARET B. PAUL

Mailing Address 283 PONDFIELD ROAD

City

BRONXVILLE

State

NY

Zip Code

10708-4936

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.407192

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10250.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. JOE B. PAULETTO, JR.

Mailing Address 2915 NE 96TH AVENUE

City

VANCOUVER

State

WA

Zip Code

98662-7451

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	1		2	0	1	1

Transaction ID: SA11.416075

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. KELDON A. PAXMAN

Mailing Address 10602 N. 5400 W.

City

HIGHLAND

State

UT

Zip Code

84003-8902

FEC ID number of contributing
federal political committee.

C

Name of Employer
LISTEN TECHNOLOGIES CORPO-
RATIONOccupation
VICE PRESIDENT OF OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: SA11.407479

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. KELDON A. PAXMAN

Mailing Address 10602 N. 5400 W.

City

HIGHLAND

State

UT

Zip Code

84003-8902

FEC ID number of contributing
federal political committee.

C

Name of Employer
LISTEN TECHNOLOGIES CORPO-
RATIONOccupation
VICE PRESIDENT OF OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: SA11.413271

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5400.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. ANDREA PEDERSEN

Mailing Address 4931 N. 300 W.

City

PROVO

State

UT

Zip Code

84604-5816

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 7 / 2 0 1 1

Transaction ID: SA11.414306

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. TODD R. PEDERSEN

Mailing Address 1142 N. 1360 E.

City

OREM

State

UT

Zip Code

84097-4397

FEC ID number of contributing
federal political committee.

C

Name of Employer
VIVINT, INC.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 7 / 2 0 1 1

Transaction ID: SA11.414307

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RICHARD T. PEERY

Mailing Address 2450 WATSON COURT

City

PALO ALTO

State

CA

Zip Code

94303-3216

FEC ID number of contributing
federal political committee.

C

Name of Employer
PEERY-ARRILLAGA

Occupation

PRINCIPAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.418169

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

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)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. ROBERT FRANK PENCE

Mailing Address 1359 BEVERLY RD
STE 200

City State Zip Code
MCLEAN VA 22101-3668

FEC ID number of contributing
federal political committee.

C

Name of Employer
PENCE CORPORATION

Occupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID: SA11.409590

Amount of Each Receipt this Period

3500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROBERT S. PERKIN

Mailing Address 160 BROOKSIDE ROAD

City State Zip Code
DARIEN CT 06820-2804

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
FREELANCE MUSIC PRODUCER/ARTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: SA11.407467

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ROBERT S. PERKIN

Mailing Address 160 BROOKSIDE ROAD

City State Zip Code
DARIEN CT 06820-2804

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
FREELANCE MUSIC PRODUCER/ARTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 1 / 2 0 1 1

Transaction ID: SA11.415958

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 225 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. JAMES R. PERLITZ

Mailing Address P.O. BOX 1499

City

BOERNE

State

TX

Zip Code

78006-1499

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

Transaction ID: SA11.414105

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. CHRISTINE PERRY

Mailing Address P.O. BOX 645

City

MEDINA

State

WA

Zip Code

98039-0645

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.411073

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. WAYNE M. PERRY

Mailing Address P.O. BOX 645

City

MEDINA

State

WA

Zip Code

98039-0645

FEC ID number of contributing
federal political committee.

C

Name of Employer
SHOTGUN INVESTMENTS LLCOccupation
C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.411070

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10250.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 226 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. WAYNE M. PERRY

Mailing Address P.O. BOX 645

City

MEDINA

State

WA

Zip Code

98039-0645

FEC ID number of contributing
federal political committee.

C

Name of Employer
SHOTGUN INVESTMENTS LLCOccupation
C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	7		2	0	1	1

Transaction ID: SA11.411250A

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

CHARGED BACK \$10,000.00
ON 02/14/2011**B.**

Full Name (Last, First, Middle Initial)

MR. WAYNE M. PERRY

Mailing Address P.O. BOX 645

City

MEDINA

State

WA

Zip Code

98039-0645

FEC ID number of contributing
federal political committee.

C

Name of Employer
SHOTGUN INVESTMENTS LLCOccupation
C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	4		2	0	1	1

Transaction ID: SA11.411250B

Amount of Each Receipt this Period

-10000.00

CONTRIBUTION

CHARGED BACK

C.

Full Name (Last, First, Middle Initial)

MS. HELEN K. PERSSON

Mailing Address 11460 LOST TREE WAY

City

NORTH PALM BEACH

State

FL

Zip Code

33408-3327

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: SA11.407145

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 227 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MS. HELEN K. PERSSON

Mailing Address 11460 LOST TREE WAY

City

NORTH PALM BEACH

State

FL

Zip Code

33408-3327

FEC ID number of contributing
federal political committee.**C**Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: SA11.412211

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. HELEN K. PERSSON

Mailing Address 11460 LOST TREE WAY

City

NORTH PALM BEACH

State

FL

Zip Code

33408-3327

FEC ID number of contributing
federal political committee.**C**Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	8	/	2	0	1	1

Transaction ID: SA11.415730

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. HEIDI PESTANA

Mailing Address 251 W. RIVER PARK DRIVE
SUITE 300

City

UTAH

State

UT

Zip Code

84604-7724

FEC ID number of contributing
federal political committee.**C**Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	1	1

Transaction ID: SA11.417266

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5200.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 228 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)
MR. JOHN PESTANA

Mailing Address 251 W. RIVER PARK DRIVE
SUITE 300

City State Zip Code
PROVO UT 84604-7724

FEC ID number of contributing
federal political committee.

C

Name of Employer
EDGECREEK, L.L.C.

Occupation
PRESIDENT & C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2011

Transaction ID: SA11.417268

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. DIANA J. PETERSON

Mailing Address 6033 SOUTH 2300 EAST

City State Zip Code
SALT LAKE CITY UT 84121-1439

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2011

Transaction ID: SA11.417273

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. GARY R. PETERSEN

Mailing Address 1100 LOUISIANA
SUITE 3150

City State Zip Code
HOUSTON TX 77002-5221

FEC ID number of contributing
federal political committee.

C

Name of Employer
ENCAP INVESTMENTS LP

Occupation
PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 13 / 2011

Transaction ID: SA11.426480

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 229 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. JOEL C. PETERSON

Mailing Address 6033 SOUTH 2300 EAST

City

SALT LAKE CITY

State

UT

Zip Code

84121-1439

FEC ID number of contributing
federal political committee.

C

Name of Employer
PETERSON PARTNERS, INC.

Occupation

FOUNDER, PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 1 1

Transaction ID: SA11.417302

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. PAM PETERSON

Mailing Address 5149 PRIOR RIDGE

City

GRANITE BAY

State

CA

Zip Code

95746-7187

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 4 / 2 0 1 1

Transaction ID: SA11.416626

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RON R. PETERSON

Mailing Address 171 KIMBERLY

City

LAKE FOREST

State

IL

Zip Code

60045-3870

FEC ID number of contributing
federal political committee.

C

Name of Employer
JENNER & BLOCK

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.408914

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10250.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 230 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. JOHN PETTIT

Mailing Address 28741 SPRINGFIELD DRIVE

City

EASTON

State

MD

Zip Code

21601-8337

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 0 / 2 0 1 1

Transaction ID: SA11.417250

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. WILLIAM PETTIT

Mailing Address 410 16TH STREET

City

LA GRANDE

State

OR

Zip Code

97850-3495

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.412089

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. WILLIAM PETTIT

Mailing Address 410 16TH STREET

City

LA GRANDE

State

OR

Zip Code

97850-3495

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 4 / 2 0 1 1

Transaction ID: SA11.415230

Amount of Each Receipt this Period

4000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5250.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 231 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. ELIZABETH PETWAY

Mailing Address 375 ATLANTIC BLVD.
SUITE 200

City ATLANTIC BEACH State FL Zip Code 32233-5277

FEC ID number of contributing
federal political committee.

C

Name of Employer
ZURICH INSURANCE SERVICES,
INC.

Occupation
INSURANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 7 / 2 0 1 1

Transaction ID: SA11.415594

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. THOMAS F. PETWAY, III

Mailing Address 375 ATLANTIC BLVD.
SUITE 200

City ATLANTIC BEACH State FL Zip Code 32233-5277

FEC ID number of contributing
federal political committee.

C

Name of Employer
ZURICH INSURANCE SERVICES

Occupation
INSURANCE EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 7 / 2 0 1 1

Transaction ID: SA11.415597

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. BEVERLY PEVEHOUSE

Mailing Address 810 CANONERO STREET

City MIDLAND State TX Zip Code 79705-1802

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.413722

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 232 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. JOHN PFEFFER

Mailing Address 1345 SPYGLASS LANE

City

NAPLES

State

FL

Zip Code

34102-7740

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.418536

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. MELINDA PFEFFER-BEACH

Mailing Address 1345 SPYGLASS LANE

City

NAPLES

State

FL

Zip Code

34102-7740

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

ARTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.418537

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. MELINDA PFEFFER-BEACH

Mailing Address 1345 SPYGLASS LANE

City

NAPLES

State

FL

Zip Code

34102-7740

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

ARTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.418538

Amount of Each Receipt this Period

2500.00

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 233 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. JACK L. PHILLIPS

Mailing Address P.O. BOX 1686

City

GLADEWATER

State

TX

Zip Code

75647-1686

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

GEOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	4	/	2	0	1	1

Transaction ID: SA11.415073

Amount of Each Receipt this Period

60.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JACK L. PHILLIPS

Mailing Address P.O. BOX 1686

City

GLADEWATER

State

TX

Zip Code

75647-1686

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

GEOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	8	/	2	0	1	1

Transaction ID: SA11.418132

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JACK L. PHILLIPS

Mailing Address P.O. BOX 1686

City

GLADEWATER

State

TX

Zip Code

75647-1686

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

GEOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	3	/	2	0	1	1

Transaction ID: SA11.418836

Amount of Each Receipt this Period

60.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

220.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 234 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. JEFFREY S. PIERCE

Mailing Address 101 W. 67TH STREET #49B

City

NEW YORK

State

NY

Zip Code

10023-5952

FEC ID number of contributing
federal political committee.

C

Name of Employer
AMBROSE

Occupation

FINANCIAL SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 4 / 2 0 1 1

Transaction ID: SA11.408002

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. MATTHEW PILON

Mailing Address 5478 DOLIVER DRIVE

City

HOUSTON

State

TX

Zip Code

77056-2318

FEC ID number of contributing
federal political committee.

C

Name of Employer
SIMMONS & COMPANY INTERNA-
TIONAL

Occupation

BANKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 1 1

Transaction ID: SA11.410463

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. PRISCILLA PILON

Mailing Address 5478 DOLIVER DRIVE

City

HOUSTON

State

TX

Zip Code

77056-2318

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

BLOGGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 1 1

Transaction ID: SA11.410462

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10250.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 235 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. WALTER J. PLUMB, III

Mailing Address 4326 WHITE WAY

City

SALT LAKE CITY

State

UT

Zip Code

84124-3430

FEC ID number of contributing
federal political committee.**C**Name of Employer
GARDNER PLUMB L.C.

Occupation

REAL ESTATE DEVELOPMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	4	/	2	0	1	1

Transaction ID: SA11.418952

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. SHANE PLUMMER

Mailing Address 9820 MULLINS CROSSING DR

City

FORT WORTH

State

TX

Zip Code

76126-3057

FEC ID number of contributing
federal political committee.**C**Name of Employer
SELF-EMPLOYED

Occupation

HORSE BUSINESS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	7	/	2	0	1	1

Transaction ID: SA11.406532

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DICK POLLARD

Mailing Address P.O. BOX 1978

City

LUBBOCK

State

TX

Zip Code

79408-1978

FEC ID number of contributing
federal political committee.**C**Name of Employer
POLLARD FRIENDLY FORD

Occupation

AUTO DEALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.406239

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6250.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 236 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MS. ELAINE KNIGHT PORTIER

Mailing Address 15770 SW TOWHEE LANE

City

BEAVERTON

State

OR

Zip Code

97007-9053

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.406625

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. ELAINE KNIGHT PORTIER

Mailing Address 15770 SW TOWHEE LANE

City

BEAVERTON

State

OR

Zip Code

97007-9053

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	7	/	2	0	1	1

Transaction ID: SA11.414308

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. ELAINE KNIGHT PORTIER

Mailing Address 15770 SW TOWHEE LANE

City

BEAVERTON

State

OR

Zip Code

97007-9053

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	8	/	2	0	1	1

Transaction ID: SA11.415686

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 237 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MS. ELAINE KNIGHT PORTIER

Mailing Address 15770 SW TOWHEE LANE

City

BEAVERTON

State

OR

Zip Code

97007-9053

FEC ID number of contributing
federal political committee.**C**Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	1	1

Transaction ID: SA11.418948

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. BRENT K. PRATT

Mailing Address 11113 PINEY MEETINGHOUSE ROAD

City

POTOMAC

State

MD

Zip Code

20854-1314

FEC ID number of contributing
federal political committee.**C**Name of Employer
FOULGER-PRATT COMPANIES

Occupation

PRINCIPAL

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.411077

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOHN T. PRATT

Mailing Address 1479 SW SHORELINE DRIVE

City

PALM CITY

State

FL

Zip Code

34990-4535

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.412028

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5550.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 238 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. MARGARET PRATT

Mailing Address 11113 PINEY MEETINGHOUSE ROAD

City

POTOMAC

State

MD

Zip Code

20854-1314

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	5	/	2	0	1	1

Transaction ID: SA11.413188

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. MALCOLM S. PRAY, JR.

Mailing Address 566 ROUND HILL ROAD

City

GREENWICH

State

CT

Zip Code

06831-2724

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.407207

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. MARY SUSAN PRESCOTT

Mailing Address 501 N. CLINTON STREET
APARTMENT 3401

City

CHICAGO

State

IL

Zip Code

60654-8891

FEC ID number of contributing
federal political committee.

C

Name of Employer
PRESCOTT MEDICAL COMMUNIC-
ATIONS GROUP,

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	9	/	2	0	1	1

Transaction ID: SA11.417008

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 239 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)
MRS. HARRIET PRESSLER

Mailing Address 800 25TH STREET, NW #504

City State Zip Code
WASHINGTON DC 20037-2208

FEC ID number of contributing
federal political committee.

C

Name of Employer
RE/MAX ALLEGIANCE

Occupation
REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 3 / 2 0 1 1

Transaction ID: SA11.417487

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JOSEPH PRETLOW

Mailing Address 9101 HAZEN DRIVE

City State Zip Code
BEVERLY HILLS CA 90210-1825

FEC ID number of contributing
federal political committee.

C

Name of Employer
J.P. CAPITAL PARTNERS

Occupation
INVESTMENT MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.418534

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
DR. JULIA PREWITT

Mailing Address 1604 TWIN OAK DRIVE

City State Zip Code
FAYETTEVILLE NC 28305-5223

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
ORTHODONTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 3 / 2 0 1 1

Transaction ID: SA11.409969

Amount of Each Receipt this Period

500.00

CONTRIBUTION

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 240 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. STEVEN PRICE

Mailing Address 16 HEALTHCOTE ROAD

City

SCARSDALE

State

NY

Zip Code

10583-4418

FEC ID number of contributing
federal political committee.

C

Name of Employer
TOWNSQUARE MEDIA

Occupation
CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.409601

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. REINIER PRIJTEN

Mailing Address 515 WEST 52ND STREET # 21G

City

NEW YORK

State

NY

Zip Code

10019-5279

FEC ID number of contributing
federal political committee.

C

Name of Employer
J.P. MORGAN CHASE

Occupation
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID: SA11.412563

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. REINIER PRIJTEN

Mailing Address 515 WEST 52ND STREET # 21G

City

NEW YORK

State

NY

Zip Code

10019-5279

FEC ID number of contributing
federal political committee.

C

Name of Employer
J.P. MORGAN CHASE

Occupation
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 1 / 2 0 1 1

Transaction ID: SA11.415785

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 241 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. REX W. PULLIAM

Mailing Address 1610 COLORADO AVE STE. 100

City

SANTA MONICA

State

CA

Zip Code

90404-3359

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

Name of Employer

PULLIAM CONSTRUCTION COMP-
ANY DBA PCCI

Occupation

SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	5	/	2	0	1	1

Transaction ID: SA11.406471

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. REX W. PULLIAM

Mailing Address 1610 COLORADO AVE STE. 100

City

SANTA MONICA

State

CA

Zip Code

90404-3359

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

Name of Employer

PULLIAM CONSTRUCTION COMP-
ANY DBA PCCI

Occupation

SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	5	/	2	0	1	1

Transaction ID: SA11.411517

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. REX W. PULLIAM

Mailing Address 1610 COLORADO AVE STE. 100

City

SANTA MONICA

State

CA

Zip Code

90404-3359

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

Name of Employer

PULLIAM CONSTRUCTION COMP-
ANY DBA PCCI

Occupation

SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	5	/	2	0	1	1

Transaction ID: SA11.415313

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 242 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. ELISABETH PURDY

Mailing Address 15 PRESCOTT AVENUE

City

BRONXVILLE

State

NY

Zip Code

10708-3014

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 4 / 2 0 1 1

Transaction ID: SA11.405890

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JAMES PURDY

Mailing Address 15 PRESCOTT AVENUE

City

BRONXVILLE

State

NY

Zip Code

10708-3014

FEC ID number of contributing
federal political committee.

C

Name of Employer
VITTORIA & PURDY, L.L.P.

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 4 / 2 0 1 1

Transaction ID: SA11.405891

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. MAXINE PUSINELLI

Mailing Address 453 E. 6TH STREET

City

HINSDALE

State

IL

Zip Code

60521-4653

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

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

Transaction ID: SA11.412395

Amount of Each Receipt this Period

275.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10275.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 243 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. ANDREW F. PUZDER

Mailing Address 6307 CARPINTERIA AVENUE

City

CARPINTERIA

State

CA

Zip Code

93013-2907

FEC ID number of contributing
federal political committee.

C

Name of Employer
C.K.E. RESTAURANTS, INC.

Occupation

C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	1

Transaction ID: SA11.417877

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. JEANNE L. QUINTON

Mailing Address 190 MADRONA LANE
THE HIGHLANDS

City

SEATTLE

State

WA

Zip Code

98177-8009

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	1

Transaction ID: SA11.417280

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOHN RAKOLTA, JR.

Mailing Address 1876 RATHMOR ROAD

City

BLOOMFIELD HILLS

State

MI

Zip Code

48304-2147

FEC ID number of contributing
federal political committee.

C

Name of Employer
WALBRIDGE ALDINGER

Occupation

C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

509.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	1	1

Transaction ID: SA11.456466

Amount of Each Receipt this Period

509.50

CONTRIBUTION

IN-KIND: CATERING FOR PAC

SUBTOTAL of Receipts This Page (optional)

10509.50

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 244 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. H. LEWIS RAPAPORT

Mailing Address 7 ALLAN DRIVE

City

WHITE PLAINS

State

NY

Zip Code

10605-4434

FEC ID number of contributing
federal political committee.

C

Name of Employer

COMPONANT ASSEMBLY SYSTEMS

Occupation

BUILDING CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 2 / 2 0 1 1

Transaction ID: SA11.426244

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

HON. THOMAS RATCLIFF

Mailing Address 7364 SCIOTO PARKWAY

City

POWELL

State

OH

Zip Code

43065-7491

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

N/A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.20

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.417335

Amount of Each Receipt this Period

257.20

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. BONNIE L. RE

Mailing Address 2646 NW 63RD PLACE

City

BOCA RATON

State

FL

Zip Code

33496-2004

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 6 / 2 0 1 1

Transaction ID: SA11.411752

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1357.20

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 245 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. BONNIE L. RE

Mailing Address 2646 NW 63RD PLACE

City

BOCA RATON

State

FL

Zip Code

33496-2004

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 1 1

Transaction ID: SA11.414265

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. KRISTI REDL

Mailing Address 2 GREENFIELD AVENUE

City

BRONXVILLE

State

NY

Zip Code

10708-2502

FEC ID number of contributing
federal political committee.

C

Name of Employer
LIBBY MANAGMENT

Occupation
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.407203

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. ANNE D. REED

Mailing Address 8580 WOODWAY DRIVE
APARTMENT 2219

City

HOUSTON

State

TX

Zip Code

77063-2477

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 1 / 2 0 1 1

Transaction ID: SA11.415891

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5750.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 246 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. JORDAN REESE, III

Mailing Address P.O. BOX 21838

City

BEAUMONT

State

TX

Zip Code

77720-1838

FEC ID number of contributing
federal political committee.**C**Name of Employer
SELF-EMPLOYED

Occupation

SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	6	/	2	0	1	1

Transaction ID: SA11.420423

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ANDRE F. REGARD

Mailing Address 269 W. MAIN STREET
SUITE 600

City

LEXINGTON

State

KY

Zip Code

40507-1759

FEC ID number of contributing
federal political committee.**C**Name of Employer
SELF-EMPLOYED

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	3	/	2	0	1	1

Transaction ID: SA11.410021

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. LEON H. REINHART

Mailing Address P.O. BOX 5005-85

City

RANCHO SANTA FE

State

CA

Zip Code

92067

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	4	/	2	0	1	1

Transaction ID: SA11.415183

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

7750.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 247 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. CLAIRE K.T. REISS

Mailing Address 9675 LA JOLLA FARMS ROAD

City

LA JOLLA

State

CA

Zip Code

92037-1132

FEC ID number of contributing
federal political committee.

C

Name of Employer
REISSING ENTERPRISES, INC.Occupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	0	/	2	0	1	1

Transaction ID: SA11.414900

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. JOHN R. REYNOLDS

Mailing Address 510 BARRINGTON ROAD

City

SIGNAL MOUNTAIN

State

TN

Zip Code

37377-3135

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.413414

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RUSSELL S. REYNOLDS, JR.

Mailing Address 264 TACONIC ROAD

City

GREENWICH

State

CT

Zip Code

06831-3143

FEC ID number of contributing
federal political committee.

C

Name of Employer
RSR PARTNERSOccupation
EXECUTIVE RECRUITING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	7	/	2	0	1	1

Transaction ID: SA11.414295

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6250.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 248 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. KYLE M. RICHEY

Mailing Address 2686 UNION STREET

City

SAN FRANCISCO

State

CA

Zip Code

94123-3817

FEC ID number of contributing
federal political committee.

C

Name of Employer
RICHEY INTERNATIONAL

Occupation

BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 4 / 2 0 1 1

Transaction ID: SA11.408073

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. KYLE M. RICHEY

Mailing Address 2686 UNION STREET

City

SAN FRANCISCO

State

CA

Zip Code

94123-3817

FEC ID number of contributing
federal political committee.

C

Name of Employer
RICHEY INTERNATIONAL

Occupation

BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 3 / 2 0 1 1

Transaction ID: SA11.416373

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. WILLIAM M. RIEGEL

Mailing Address 14 SURPUS STREET

City

DUXBURY

State

MA

Zip Code

02332-4532

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 3 / 2 0 1 1

Transaction ID: SA11.410013

Amount of Each Receipt this Period

400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

800.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 249 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. WILLIAM M. RIEGEL

Mailing Address 14 SURPUS STREET

City

DUXBURY

State

MA

Zip Code

02332-4532

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	4	/	2	0	1	1

Transaction ID: SA11.414215

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RAY W. RIGBY

Mailing Address 2131 N. 3000 W.

City

REXBURG

State

ID

Zip Code

83440-3121

FEC ID number of contributing
federal political committee.

C

Name of Employer
RIGBY, ANDRUS & MOELLEROccupation
LAWYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	0	/	2	0	1	1

Transaction ID: SA11.445579

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. DAN RIPPLINGER, D.D.S.

Mailing Address P.O. BOX 263

City

CORNVILLE

State

AZ

Zip Code

86325-0263

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	4	/	2	0	1	1

Transaction ID: SA11.407752

Amount of Each Receipt this Period

300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 250 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. ALEX T. ROBERTSON

Mailing Address 101 PARK AVENUE
48TH FLOOR

City

NEW YORK

State

NY

Zip Code

10178-4799

FEC ID number of contributing
federal political committee.

C

Name of Employer
TIGER FOUNDATIONOccupation
INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	4		2	0	1	1

Transaction ID: SA11.413959

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ALEX T. ROBERTSON

Mailing Address 101 PARK AVENUE
48TH FLOOR

City

NEW YORK

State

NY

Zip Code

10178-4799

FEC ID number of contributing
federal political committee.

C

Name of Employer
TIGER FOUNDATIONOccupation
INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.413960

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. GEORGE A. ROBERTS

Mailing Address 11 CHELTENHAM WAY

City

DALLAS

State

TX

Zip Code

75230-1963

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

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

Transaction ID: SA11.413678

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 251 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

DR. GEORGE A. ROBERTS

Mailing Address 11 CHELTENHAM WAY

City

DALLAS

State

TX

Zip Code

75230-1963

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	9	/	2	0	1	1

Transaction ID: SA11.417114

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. KENNETH N. ROBERTSON

Mailing Address 12 STILLFOREST STREET

City

HOUSTON

State

TX

Zip Code

77024-7518

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	5	/	2	0	1	1

Transaction ID: SA11.408205

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. KENNETH N. ROBERTSON

Mailing Address 12 STILLFOREST STREET

City

HOUSTON

State

TX

Zip Code

77024-7518

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	0	/	2	0	1	1

Transaction ID: SA11.414593

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 252 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. KENNETH N. ROBERTSON

Mailing Address 12 STILLFOREST STREET

City

HOUSTON

State

TX

Zip Code

77024-7518

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 1 / 2 0 1 1

Transaction ID: SA11.415961

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DOUGLAS ROBINSON

Mailing Address 11 HUNTWICK LANE

City

ENGLEWOOD

State

CO

Zip Code

80113-7111

FEC ID number of contributing
federal political committee.

C

Name of Employer
ST. CHARLES CAPITAL, LLC

Occupation
INVESTMENT BANKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 1 / 2 0 1 1

Transaction ID: SA11.413953

Amount of Each Receipt this Period

7000.00

CONTRIBUTION

SEE REATTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. DIANE R. CARLSON

Mailing Address 11 HUNTWICK LANE

City

ENGLEWOOD

State

CO

Zip Code

80113-7111

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 1 / 2 0 1 1

Transaction ID: SA11.413951

Amount of Each Receipt this Period

3500.00

CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION FROM SPOUSE

SUBTOTAL of Receipts This Page (optional)

7150.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 253 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. DOUGLAS ROBINSON

Mailing Address 11 HUNTWICK LANE

City

ENGLEWOOD

State

CO

Zip Code

80113-7111

FEC ID number of contributing
federal political committee.

C

Name of Employer
ST. CHARLES CAPITAL, LLC

Occupation

INVESTMENT BANKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 1 / 2 0 1 1

Transaction ID: SA11.413953B

Amount of Each Receipt this Period

-3500.00

CONTRIBUTION

[MEMO ITEM]

REATTRIBUTION TO SPOUSE

B.

Full Name (Last, First, Middle Initial)

MR. EDWARD J. ROBSON

Mailing Address 9532 EAST RIGGS ROAD

City

SUN LAKES

State

AZ

Zip Code

85248-7463

FEC ID number of contributing
federal political committee.

C

Name of Employer
ROBSON COMMUNITIES

Occupation

HOMEBUILDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: SA11.413513

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RICHARD ROEDER

Mailing Address 11150 SANTA MONICA BLVD.
SUITE 750

City

LOS ANGELES

State

CA

Zip Code

90025-0528

FEC ID number of contributing
federal political committee.

C

Name of Employer
VANCE STREE CAPITAL, L.L.-
C.

Occupation

PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.411961

Amount of Each Receipt this Period

5000.00

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 254 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. JESSE T. ROGERS

Mailing Address 278 PARK LANE

City

ATHERTON

State

CA

Zip Code

94027-5457

FEC ID number of contributing
federal political committee.

C

Name of Employer
ALTAMONT CAPITAL

Occupation

INVESTMENT MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.407226

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. KATHLEEN T. ROGERS

Mailing Address 6301 BULLARD DRIVE

City

OAKLAND

State

CA

Zip Code

94611-3111

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	1	1

Transaction ID: SA11.417282

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. MINDY ROGERS

Mailing Address 278 PARK LANE

City

ATHERTON

State

CA

Zip Code

94027-5457

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	6	/	2	0	1	1

Transaction ID: SA11.420420

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 255 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. ROBERTA F. ROGERS

Mailing Address 14515 W. GRANITE VALLEY DRIVE
APARTMENT E-567City State Zip Code
SUN CITY WEST AZ 85375-6024FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	4		2	0	1	1

Transaction ID: SA11.407969

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. ROBERTA F. ROGERS

Mailing Address 14515 W. GRANITE VALLEY DRIVE
APARTMENT E-567City State Zip Code
SUN CITY WEST AZ 85375-6024FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: SA11.413442

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. ROBERTA F. ROGERS

Mailing Address 14515 W. GRANITE VALLEY DRIVE
APARTMENT E-567City State Zip Code
SUN CITY WEST AZ 85375-6024FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	1		2	0	1	1

Transaction ID: SA11.415960

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. T. GARY ROGERS

Mailing Address 6301 BULLARD DRIVE

City

OAKLAND

State

CA

Zip Code

94611-3111

FEC ID number of contributing
federal political committee.

C

Name of Employer
DREYER'S GRAND ICE CREAM

Occupation

CHAIRMAN & C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 1 1

Transaction ID: SA11.417304

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROBERT OLIVER ROLFE

Mailing Address 505 JACKSON BLVD.

City

NASHVILLE

State

TN

Zip Code

37205-3427

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

PRIVATE EQUITY INVESTING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 8 / 2 0 1 1

Transaction ID: SA11.416816

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. OSCAR ROMMEL

Mailing Address 10393 HARRIER STREET

City

PLANTATION

State

FL

Zip Code

33324-2162

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 3 / 2 0 1 1

Transaction ID: SA11.413040

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10250.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 257 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. BLAKE M. RONEY

Mailing Address 3187 N. FOOTHILL DRIVE

City

PROVO

State

UT

Zip Code

84604-4882

FEC ID number of contributing
federal political committee.

C

Name of Employer
NU SKIN ENTERPRISES

Occupation
CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 1 1

Transaction ID: SA11.410401

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. NANCY RONEY

Mailing Address 3187 N. FOOTHILL DRIVE

City

PROVO

State

UT

Zip Code

84604-4882

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 1 1

Transaction ID: SA11.410395

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

AMB. JOHN D. ROOD

Mailing Address 3020 HARTLEY RD,
STE 300

City

JACKSONVILLE

State

FL

Zip Code

32257-8207

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE VESTCOR COMPANIES

Occupation
REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 5 / 2 0 1 1

Transaction ID: SA11.411648

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 258 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

DR. STEVEN A. ROODMAN

Mailing Address 2700 TURNBERRY DRIVE

City

MARION

State

IL

Zip Code

62959-5227

FEC ID number of contributing
federal political committee.

C

Name of Employer
ANESTHESIA ASSOC.

Occupation

PHYSICIAN

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	8	/	2	0	1	1

Transaction ID: SA11.419378

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. FRANCIS C. ROONEY, JR.

Mailing Address 8 MANHATTAN AVENUE

City

RYE

State

NY

Zip Code

10580-1825

FEC ID number of contributing
federal political committee.

C

Name of Employer
H.H. BROWN SHOE COMPANY

Occupation

CHAIRMAN

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	3	/	2	0	1	1

Transaction ID: SA11.412936

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ROBERT P. ROPER

Mailing Address 1225 SOUTH OCEAN BLVD. #301

City

DELRAY BEACH

State

FL

Zip Code

33483-6549

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	4	/	2	0	1	1

Transaction ID: SA11.407834

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6250.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 259 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. ROBERT P. ROPER

Mailing Address 1225 SOUTH OCEAN BLVD. #301

City

DELRAY BEACH

State

FL

Zip Code

33483-6549

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 5 / 2 0 1 1

Transaction ID: SA11.416750

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. SIMON A. ROSE

Mailing Address 1301 AVENUE OF THE AMERICAS
FLOOR 44

City

NEW YORK

State

NY

Zip Code

10019-6084

FEC ID number of contributing
federal political committee.

C

Name of Employer
DAHLMAN ROSE & CO LLC

Occupation
C.E.O. & PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 3 / 2 0 1 1

Transaction ID: SA11.412860

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. BILLY ROSENTHAL

Mailing Address 604 E. 4TH
SUITE 201

City

FORT WORTH

State

TX

Zip Code

76102-4074

FEC ID number of contributing
federal political committee.

C

Name of Employer
PENROSE GROUP LLC

Occupation
PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 5 / 2 0 1 1

Transaction ID: SA11.411625

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10500.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 260 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. GARY ROSENBACH

Mailing Address 107 ROCKLEDGE ROAD

City

VAIL

State

CO

Zip Code

81657-5030

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	3	/	2	0	1	1

Transaction ID: SA11.412861

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. IAN KURT ROSEN

Mailing Address 440 MID OAK DRIVE

City

NORTH MUSKEGON

State

MI

Zip Code

49445-2726

FEC ID number of contributing
federal political committee.

C

Name of Employer
AMERICAN GREASE STICK COM-
PANYOccupation
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID: SA11.413563

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. IAN KURT ROSEN

Mailing Address 440 MID OAK DRIVE

City

NORTH MUSKEGON

State

MI

Zip Code

49445-2726

FEC ID number of contributing
federal political committee.

C

Name of Employer
AMERICAN GREASE STICK COM-
PANYOccupation
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	1	1

Transaction ID: SA11.417284

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

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)
for each category of the
Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. J. PHILIP ROSEN

Mailing Address 431 MISTLETOE WAY

City

LAWRENCE

State

NY

Zip Code

11559-2716

FEC ID number of contributing
federal political committee.

C

Name of Employer
WEIL, GOTSHAL & MANGES,
LLP

Occupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.411065

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. ROZANNE ROSENTHAL

Mailing Address 604 E. 4TH
STE. 201

City

FT WORTH

State

TX

Zip Code

76102-4074

FEC ID number of contributing
federal political committee.

C

Name of Employer
PENROSE GROUP LLC

Occupation
COMMUNITY VOLUNTEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 5 / 2 0 1 1

Transaction ID: SA11.411618

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. SUSAN ROSENBACH

Mailing Address 107 ROCKLEDGE ROAD

City

VAIL

State

CO

Zip Code

81657-5030

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 3 / 2 0 1 1

Transaction ID: SA11.412859

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 262 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. JOHN ROSLING

Mailing Address 3911 PLEASANT BEACH DRIVE, NE

City

BAINBRIDGE IS

State

WA

Zip Code

98110-3215

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11.409691

Amount of Each Receipt this Period

300.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. KARA GAFFNEY ROSS

Mailing Address 25 COLUMBUS CIRCLE

City

NEW YORK

State

NY

Zip Code

10019-1107

FEC ID number of contributing
federal political committee.

C

Name of Employer
KARA ROSS, L.L.C., N.Y.C.

Occupation
JEWELRY DESIGNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 5 / 2 0 1 1

Transaction ID: SA11.411611

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. STEPHEN M. ROSS

Mailing Address 60 COLOMBUS CIRCLE
19TH FLOOR

City

NEW YORK

State

NY

Zip Code

10023-5802

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE RELATED COMPANIES

Occupation
CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 5 / 2 0 1 1

Transaction ID: SA11.411624

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10300.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 263 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.Full Name (Last, First, Middle Initial)
MRS. MELANIE SABELHAUSMailing Address 2777 GULF SHORE BLVD N.
APARTMENT 8WCity State Zip Code
NAPLES FL 34103-5301FEC ID number of contributing
federal political committee.**C**Name of Employer
SUPERIOR FINANCIAL GROUPOccupation
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.411235

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.Full Name (Last, First, Middle Initial)
MR. CHARLES H. SALISBURY, JR.Mailing Address 300 E. LOMBARD STREET
SUITE 620City State Zip Code
BALTIMORE MD 21202-3227FEC ID number of contributing
federal political committee.**C**Name of Employer
SALISBURY BROADCASTINGOccupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	5	/	2	0	1	1

Transaction ID: SA11.424448

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

C.Full Name (Last, First, Middle Initial)
MRS. BEVERLY SAMBADO

Mailing Address 8077 N. TULLY ROAD

City State Zip Code
LINDEN CA 95236-9619FEC ID number of contributing
federal political committee.**C**Name of Employer
A. SAMBADO & SONSOccupation
FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11.411977

Amount of Each Receipt this Period

300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

7800.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 264 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. GEORGE J. SAMPAS

Mailing Address 873 PRESIDENT STREET

City

BROOKLYN

State

NY

Zip Code

11215-1405

FEC ID number of contributing
federal political committee.

C

Name of Employer
SULLIVAN & CROMWELL, LLP

Occupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 7 / 2 0 1 1

Transaction ID: SA11.406053

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DANIEL S. SANDERS

Mailing Address 210 CRESCENT AVENUE

City

GREENVILLE

State

SC

Zip Code

29605-2815

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 7 / 2 0 1 1

Transaction ID: SA11.411802

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. EDWIN C. SANDHAM

Mailing Address 1964 SW SAINT ANDREWS DRIVE

City

PALM CITY

State

FL

Zip Code

34990-2210

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

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

Transaction ID: SA11.406277

Amount of Each Receipt this Period

75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1325.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 265 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. EDWIN C. SANDHAM

Mailing Address 1964 SW SAINT ANDREWS DRIVE

City

PALM CITY

State

FL

Zip Code

34990-2210

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

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

Transaction ID: SA11.407325

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. EDWIN C. SANDHAM

Mailing Address 1964 SW SAINT ANDREWS DRIVE

City

PALM CITY

State

FL

Zip Code

34990-2210

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 9 / 2 0 1 1

Transaction ID: SA11.410757

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. EDWIN C. SANDHAM

Mailing Address 1964 SW SAINT ANDREWS DRIVE

City

PALM CITY

State

FL

Zip Code

34990-2210

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 2 / 2 0 1 1

Transaction ID: SA11.416191

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 266 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. MUNEEER A. SATTER

Mailing Address 419 SHERIDAN ROAD

City

WINNETKA

State

IL

Zip Code

60093-2626

FEC ID number of contributing
federal political committee.

C

Name of Employer
GOLDMAN SACH & CO.

Occupation

INVESTMENT BANKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 3 / 2 0 1 1

Transaction ID: SA11.412879

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ANTHONY SCARAMUCCI

Mailing Address 527 MADISON AVENUE
FLOOR 16

City

NEW YORK

State

NY

Zip Code

10022-4365

FEC ID number of contributing
federal political committee.

C

Name of Employer
SKYBRIDGE CAPITAL

Occupation

MANAGING PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.418264

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. DIANE SCARBOROUGH

Mailing Address 1130 SOUTH MICHIGAN AVENUE
APARTMENT 1607

City

CHICAGO

State

IL

Zip Code

60605-2319

FEC ID number of contributing
federal political committee.

C

Name of Employer
EMC CORP.

Occupation

DIRECTOR, HUMAN RESOURCES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 3 0 / 2 0 1 1

Transaction ID: SA11.408924

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10250.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 267 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. FRITZ SCHAEFER

Mailing Address 691 DEER PARK ROAD

City

DIX HILLS

State

NY

Zip Code

11746-6201

FEC ID number of contributing
federal political committee.

C

Name of Employer
ATLANTIC NURSERY, INC.Occupation
GARDNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	4	/	2	0	1	1

Transaction ID: SA11.407769

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROBERT K. SCHAEBERLE

Mailing Address 3492 ROCKCLIFF PLACE

City

LONGWOOD

State

FL

Zip Code

32779-3141

FEC ID number of contributing
federal political committee.

C

Name of Employer
CIT GROUPOccupation
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: SA11.407001

Amount of Each Receipt this Period

400.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. ELIZABETH F. SCHAFER

Mailing Address 736 CRESCENT ROAD

City

JACKSON

State

MI

Zip Code

49203-3965

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	7	/	2	0	1	1

Transaction ID: SA11.417883

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2650.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 268 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. DEBBIE SCHILLER

Mailing Address 40 MONTVIEW AVENUE

City

SHORT HILLS

State

NJ

Zip Code

07078-2035

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	5	/	2	0	1	1

Transaction ID: SA11.411633

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. HOWARD SCHILLER

Mailing Address 40 MONTVIEW AVENUE

City

SHORT HILLS

State

NJ

Zip Code

07078-2035

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	5	/	2	0	1	1

Transaction ID: SA11.411635

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. ALYCE V. SCHLECH

Mailing Address 611 NE ALSBURY BLVD.
APARTMENT 504

City

BURLESON

State

TX

Zip Code

76028-2697

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	4	/	2	0	1	1

Transaction ID: SA11.410193

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10500.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 269 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. LOUIS SCHOOLER

Mailing Address 5186 CARROLL CANYON ROAD

City

SAN DIEGO

State

CA

Zip Code

92121-1729

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	1

Transaction ID: SA11.419380

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. PAUL C. SCHORR, IV

Mailing Address 720 PARK AVENUE
APARTMENT 5A

City

NEW YORK

State

NY

Zip Code

10021-4954

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE BLACKSTONE GROUP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

PRIVATE EQUITY INVESTOR

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	5		2	0	1	1

Transaction ID: SA11.413182

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. GERALD A. SCHWALBACH

Mailing Address 10446 N. 74TH STREET
STE. 150

City

SCOTTSDALE

State

AZ

Zip Code

85258-1045

FEC ID number of contributing
federal political committee.

C

Name of Employer
SPENSA DEVELOPMENT GROUP,
L.L.C.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

CHAIRMAN/SELF-EMPLOYED

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	5		2	0	1	1

Transaction ID: SA11.420307

Amount of Each Receipt this Period

500.00

CONTRIBUTION

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 270 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. JOHN C. SCHWEITZER

Mailing Address 100 CONGRESS AVENUE
SUITE 1600City State Zip Code
AUSTIN TX 78701-2746FEC ID number of contributing
federal political committee.**C**Name of Employer
SELF-EMPLOYEDOccupation
INVESTMENTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	6		2	0	1	1

Transaction ID: SA11.420407

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. KATHLEEN P. SCHWEICH

Mailing Address 7144 WYDOWN BLVD.

City State Zip Code
ST. LOUIS MO 63105-3021FEC ID number of contributing
federal political committee.**C**Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	4		2	0	1	1

Transaction ID: SA11.424136

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. ELIZABETH H. SCOTT

Mailing Address 226 W. RITTENHOUSE SQUARE #3005

City State Zip Code
PHILADELPHIA PA 19103-5763FEC ID number of contributing
federal political committee.**C**Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	4		2	0	1	1

Transaction ID: SA11.413143

Amount of Each Receipt this Period

500.00

CONTRIBUTION

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 271 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. LUCILLE R. SEELY

Mailing Address 835 S. RIDGEWAY DRIVE

City

STURGEON BAY

State

WI

Zip Code

54235-1694

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11.407106

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. LUCILLE R. SEELY

Mailing Address 835 S. RIDGEWAY DRIVE

City

STURGEON BAY

State

WI

Zip Code

54235-1694

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 9 / 2 0 1 1

Transaction ID: SA11.410889

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. LUCILLE R. SEELY

Mailing Address 835 S. RIDGEWAY DRIVE

City

STURGEON BAY

State

WI

Zip Code

54235-1694

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.417515

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 272 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. DREW SHATTUCK

Mailing Address 12 JORDAN LANE

City

PORTLAND

State

CT

Zip Code

06480-1620

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	1	1

Transaction ID: SA11.415186

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JAMES SHEA

Mailing Address 70-168 SONORA ROAD

City

RANCHO MIRAGE

State

CA

Zip Code

92270-3431

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11.406542

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JAMES SHEA

Mailing Address 70-168 SONORA ROAD

City

RANCHO MIRAGE

State

CA

Zip Code

92270-3431

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11.410986

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 273 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. JAMES SHEA

Mailing Address 70-168 SONORA ROAD

City

RANCHO MIRAGE

State

CA

Zip Code

92270-3431

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	1	/	2	0	1	1

Transaction ID: SA11.415957

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. SUZANNE J. SHELLMAN

Mailing Address 724 S. BROADWAY
UNIT A.

City

REDONDO BEACH

State

CA

Zip Code

90277-4691

FEC ID number of contributing
federal political committee.

C

Name of Employer
CAPITAL GROUP COMPANIESOccupation
CURRENCY TRADER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	3	/	2	0	1	1

Transaction ID: SA11.412984

Amount of Each Receipt this Period

400.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. THEORA SHELLEY

Mailing Address 10624 E. TERRA DRIVE

City

SCOTTSDALE

State

AZ

Zip Code

85258-6118

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.406224

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 274 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. PATRICK SHEN

Mailing Address 1101 15TH STREET

City

WASHINGTON

State

DC

Zip Code

20005-5002

FEC ID number of contributing
federal political committee.

C

Name of Employer
FRAGOMEN LLP

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 7 / 2 0 1 1

Transaction ID: SA11.415474

Amount of Each Receipt this Period

300.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. J. PAUL SHIVELY

Mailing Address 238 SILVERADO SPRINGS DRIVE

City

NAPA

State

CA

Zip Code

94558-1556

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.412380

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. J. PAUL SHIVELY

Mailing Address 238 SILVERADO SPRINGS DRIVE

City

NAPA

State

CA

Zip Code

94558-1556

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 1 / 2 0 1 1

Transaction ID: SA11.415905

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 275 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

DR. J. PAUL SHIVELY

Mailing Address 238 SILVERADO SPRINGS DRIVE

City

NAPA

State

CA

Zip Code

94558-1556

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.418565

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROBERT M. SHOEMAKER

Mailing Address 4501 POTTERY PLACE

City

DESTIN

State

FL

Zip Code

32541-3427

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 1 1

Transaction ID: SA11.410321

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ROBERT M. SHOEMAKER

Mailing Address 4501 POTTERY PLACE

City

DESTIN

State

FL

Zip Code

32541-3427

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 1 / 2 0 1 1

Transaction ID: SA11.415881

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1100.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 276 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. ROBERT T. SHUTTS

Mailing Address 2010 BRANDYWINE DRIVE

City

WINTER PARK

State

FL

Zip Code

32789-6111

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 2 / 2 0 1 1

Transaction ID: SA11.422914

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. NORBERT A. SIEGFRIED

Mailing Address 8230 FORSYTH BLVD.
SUITE 201

City

SAINT LOUIS

State

MO

Zip Code

63105-1692

FEC ID number of contributing
federal political committee.

C

Name of Employer
SIEGFRIED INSURANCE

Occupation
INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 1 / 2 0 1 1

Transaction ID: SA11.415901

Amount of Each Receipt this Period

375.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. L. E. SIMMONS

Mailing Address 600 TRAVIS STREET, SUITE 6600

City

HOUSTON

State

TX

Zip Code

77002-2921

FEC ID number of contributing
federal political committee.

C

Name of Employer
SCF PARTNERS

Occupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 5 / 2 0 1 1

Transaction ID: SA11.411634

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5625.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 277 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. L. E. SIMMONS

Mailing Address 600 TRAVIS STREET, SUITE 6600

City

HOUSTON

State

TX

Zip Code

77002-2921

FEC ID number of contributing
federal political committee.

C

Name of Employer
SCF PARTNERS

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 8 / 2 0 1 1

Transaction ID: SA11.456799

Amount of Each Receipt this Period

2719.24

CONTRIBUTION

IN-KIND: CATERING FOR PAC;
REFUNDED \$2,719.24 ON 06/-
28/2011

B.

Full Name (Last, First, Middle Initial)

MS. VIRGINIA E. SIMMONS

Mailing Address 2923 DEL MONTE DRIVE

City

HOUSTON

State

TX

Zip Code

77019-3211

FEC ID number of contributing
federal political committee.

C

Name of Employer
STUDENT

Occupation

STUDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 1 1

Transaction ID: SA11.410467

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. VIRGINIA W. SIMMONS

Mailing Address 2923 DEL MONTE DRIVE

City

HOUSTON

State

TX

Zip Code

77019-3211

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 5 / 2 0 1 1

Transaction ID: SA11.411629

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

12719.24

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 278 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. WILLIAM MARTIN SIMMONS

Mailing Address 600 TRAVIS STREET
SUITE 6600

City	State	Zip Code
HOUSTON	TX	77002-2921

FEC ID number of contributing
federal political committee.

C

Name of Employer
STUDENTOccupation
STUDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	7	/	2	0	1	1

Transaction ID: SA11.410459

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WILLIAM W. SINGLETON

Mailing Address 1517 MONACO DRIVE

City	State	Zip Code
PACIFIC PALISADES	CA	90272-2727

FEC ID number of contributing
federal political committee.

C

Name of Employer
SINGLETON GROUPOccupation
REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	4	/	2	0	1	1

Transaction ID: SA11.418956

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. GREG SLAMOWITZ

Mailing Address 137 RIVERSIDE DRIVE, APT 6D

City	State	Zip Code
NEW YORK	NY	10024-3721

FEC ID number of contributing
federal political committee.

C

Name of Employer
AMBROSE EMPLOYER GROUP,
LLCOccupation
CO-CEO & CO-FOUNDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.409607

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10500.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 279 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. HARRY E. SLOAN

Mailing Address 10250 CONSTELLATION BLVD.
FLOOR 27

City	State	Zip Code
LOS ANGELES	CA	90067-6227

FEC ID number of contributing
federal political committee.

C

Name of Employer
MGM STUDIOSOccupation
C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	8	/	2	0	1	1

Transaction ID: SA11.416826

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. BOYD C. SMITH

Mailing Address 301 COLERIDGE AVENUE

City	State	Zip Code
PALO ALTO	CA	94301-3608

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.411223

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. C. DONALD SMITH

Mailing Address INFO REQUESTED

City	State	Zip Code
INFO REQUESTED	XX	99999

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	3	/	2	0	1	1

Transaction ID: SA11.426485

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10500.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 280 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MS. HOPE SMITH

Mailing Address 37 PIPING ROCK ROAD

City

LOCUST VALLEY

State

NY

Zip Code

11560-2207

FEC ID number of contributing
federal political committee.

C

Name of Employer
PARTNER IN FAMILY OFFICE

Occupation

CONSULTANT

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	1	/	2	0	1	1

Transaction ID: SA11.415817

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. HYRUM W. SMITH

Mailing Address 150 W 1400 N

City

GUNLOCK

State

UT

Zip Code

84733

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED FRANKLIN COVEY

Occupation

C.E.O. & CHAIRMAN

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	7	/	2	0	1	1

Transaction ID: SA11.410324

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. JILL SMITH

Mailing Address 301 COLERIDGE AVENUE

City

PALO ALTO

State

CA

Zip Code

94301-3608

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	8	/	2	0	1	1

Transaction ID: SA11.418170

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10250.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 281 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. WARREN C. SMITH, JR.

Mailing Address 38 COOLIDGE LANE

City

DEDHAM

State

MA

Zip Code

02026-5805

FEC ID number of contributing
federal political committee.

C

Name of Employer
STALEY CAPITAL

Occupation

INVESTMENT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 8 / 2 0 1 1

Transaction ID: SA11.416817

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WILLIAM D. SMITHBURG

Mailing Address 676 N. MICHIGAN AVENUE
SUITE 3860

City

CHICAGO

State

IL

Zip Code

60611-2837

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 9 / 2 0 1 1

Transaction ID: SA11.417009

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. JANET M. SNAPP

Mailing Address 18 BOYCES WHARF

City

CHARLESTON

State

SC

Zip Code

29401-2525

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.413383

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10250.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 282 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. DAVID L. SOLOMON

Mailing Address 4333 CHICKERING LANE

City

NASHVILLE

State

TN

Zip Code

37215-4913

FEC ID number of contributing
federal political committee.

C

Name of Employer
MERIJAGS PRIVATE EQUITYOccupation
INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	1	1

Transaction ID: SA11.418535

Amount of Each Receipt this Period

1250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. SANDRA J. SORIERO

Mailing Address P.O. BOX 1209

City

POTH

State

TX

Zip Code

78147-1209

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	1

Transaction ID: SA11.417878

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. THOMAS SORIERO

Mailing Address P.O. BOX 1209

City

POTH

State

TX

Zip Code

78147-1209

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	1

Transaction ID: SA11.417875

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

11250.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 283 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. RICHARD M. SOTELL

Mailing Address 31 LATHROP ROAD

City

WELLESLEY

State

MA

Zip Code

02482-7011

FEC ID number of contributing
federal political committee.

C

Name of Employer
KRAEMATON GROUP

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 3 / 2 0 1 1

Transaction ID: SA11.412864

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

R. STERLING SPAFFORD

Mailing Address 1238 W. LIONS HEAD DRIVE

City

WASHINGTON

State

UT

Zip Code

84780-8425

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.406590

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DAVID SPENCE

Mailing Address 2021 S. WARSON ROAD

City

SAINT LOUIS

State

MO

Zip Code

63124-1151

FEC ID number of contributing
federal political committee.

C

Name of Employer
ALPHA PACKAGING

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.419395

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 284 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. RICHARD V. SPENCER

Mailing Address P.O. BOX 1842

City

WILSON

State

WY

Zip Code

83014-1842

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.406312

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. YOLANDE H. SPRAWISNKI

Mailing Address 1130 SYLVAN PLACE

City

MONTEREY

State

CA

Zip Code

93940-4903

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	7	/	2	0	1	1

Transaction ID: SA11.415561

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JEFFREY CRAIG SPRECHER

Mailing Address 2100 RIVER EDGE PARKWAY
STE. 1500

City

ATLANTA

State

GA

Zip Code

30328-4693

FEC ID number of contributing
federal political committee.

C

Name of Employer
INTERCONTINENTALEXCHANGE,
INC.Occupation
C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.406299

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

SEE REATTRIBUTION

SUBTOTAL of Receipts This Page (optional)

15250.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 285 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.Full Name (Last, First, Middle Initial)
MS. KELLY L. LOEFFLERMailing Address 2100 RIVER EDGE PARKWAY
SUITE 500

City ATLANTA State GA Zip Code 30328-4676

FEC ID number of contributing
federal political committee.**C**Name of Employer
INTERCONTINENTAL EXCHANGEOccupation
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.406301

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

[MEMO ITEM]

REATTRIBUTION FROM SPOUSE

B.Full Name (Last, First, Middle Initial)
MR. JEFFREY CRAIG SPRECHERMailing Address 2100 RIVER EDGE PARKWAY
STE. 1500

City ATLANTA State GA Zip Code 30328-4693

FEC ID number of contributing
federal political committee.**C**Name of Employer
INTERCONTINENTALEXCHANGE,
INC.Occupation
C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.406299B

Amount of Each Receipt this Period

-5000.00

CONTRIBUTION

[MEMO ITEM]

REATTRIBUTION TO SPOUSE

C.Full Name (Last, First, Middle Initial)
MS. ELEANOR C. ST. LAURENT

Mailing Address 5115 DUBOIS DRIVE

City VANCOUVER State WA Zip Code 98661-6614

FEC ID number of contributing
federal political committee.**C**Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	1	/	2	0	1	1

Transaction ID: SA11.416037

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 286 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. LESLIE STANFORD

Mailing Address 7 CANTITOE LANE

City

CHERRY HILLS VILLA

State

CO

Zip Code

80113-6111

FEC ID number of contributing
federal political committee.**C**Name of Employer
HEALTHQUEST INTERANTIONAL
INC

Occupation

NUTRITIONAL SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	1	/	2	0	1	1

Transaction ID: SA11.413952

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. STEVEN F. STANLEY

Mailing Address 5039 VIA SANTANA

City

DOS VIENTOS

State

CA

Zip Code

91320-6983

FEC ID number of contributing
federal political committee.**C**Name of Employer
SELF-EMPLOYED

Occupation

DENTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	4	/	2	0	1	1

Transaction ID: SA11.411370

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. DOLA HAMILTON STEMBERG

Mailing Address 5 LOUISBURG SQUARE

City

BOSTON

State

MA

Zip Code

02108-1202

FEC ID number of contributing
federal political committee.**C**Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	6	/	2	0	1	1

Transaction ID: SA11.408499

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6250.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 287 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. THOMAS G. STEMBERG

Mailing Address 6 ALWYNGTON ROAD

City

BROOKLINE

State

MA

Zip Code

02467-1853

FEC ID number of contributing
federal political committee.

C

Name of Employer
HIGHLAND CAPITAL

Occupation

VENTURE CAPITAL

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.409600

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. FRED STEPHENS

Mailing Address 2407 CLAYTON LANE

City

WICHITA FALLS

State

TX

Zip Code

76308-3904

FEC ID number of contributing
federal political committee.

C

Name of Employer
STEPHEN'S ENGINEERING

Occupation

PETROLEUM ENGINEER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.412633

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. MARC I. STERN

Mailing Address 23700 MALIBU COLONY ROAD

City

MALIBU

State

CA

Zip Code

90265-6629

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE T.C.W. GROUP, INC.

Occupation

VICE CHAIRMAN & C.E.O.

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	5	/	2	0	1	1

Transaction ID: SA11.411631

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10500.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 288 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. MARC I. STERN

Mailing Address 23700 MALIBU COLONY ROAD

City

MALIBU

State

CA

Zip Code

90265-6629

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE T.C.W. GROUP, INC.

Occupation

VICE CHAIRMAN & C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.413853A

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

CHARGED BACK \$5,000.00 ON
03/01/2011**B.**

Full Name (Last, First, Middle Initial)

MR. MARC I. STERN

Mailing Address 23700 MALIBU COLONY ROAD

City

MALIBU

State

CA

Zip Code

90265-6629

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE T.C.W. GROUP, INC.

Occupation

VICE CHAIRMAN & C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	1	/	2	0	1	1

Transaction ID: SA11.413853B

Amount of Each Receipt this Period

-5000.00

CONTRIBUTION

CHARGED BACK

C.

Full Name (Last, First, Middle Initial)

MRS. JAYME J. STEVENSON

Mailing Address 65 SAINT NICHOLAS ROAD

City

DARIEN

State

CT

Zip Code

06820-2823

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: SA11.411075

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 289 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. PETER L. STEVENSON

Mailing Address 17 NORTH ENCINO ROAD

City

LAGUNA BEACH

State

CA

Zip Code

92651-6705

FEC ID number of contributing
federal political committee.

C

Name of Employer
STEVENSON SYSTEMS, INC.

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	9		2	0	1	1

Transaction ID: SA11.410736

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. GEORGENIA STEWART

Mailing Address 6715 MUSTANG STREET

City

LAS VEGAS

State

NV

Zip Code

89131-3137

FEC ID number of contributing
federal political committee.

C

Name of Employer
NEVADA CONCRETE SERVICE

Occupation

MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	7		2	0	1	1

Transaction ID: SA11.415564

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. GORDON E. STEWART

Mailing Address 900 MEYER LANE

City

REDONDO BEACH

State

CA

Zip Code

90278-5216

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	7		2	0	1	1

Transaction ID: SA11.410592

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 290 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. GORDON E. STEWART

Mailing Address 900 MEYER LANE

City

REDONDO BEACH

State

CA

Zip Code

90278-5216

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 0 / 2 0 1 1

Transaction ID: SA11.414825

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. GORDON E. STEWART

Mailing Address 900 MEYER LANE

City

REDONDO BEACH

State

CA

Zip Code

90278-5216

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.418120

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. MARY L. STONE

Mailing Address 6 WHITTIER PLACE
UNIT 6-P

City

BOSTON

State

MA

Zip Code

02114-1443

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 7 / 2 0 1 1

Transaction ID: SA11.408793

Amount of Each Receipt this Period

300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 291 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. RICHARD M. STORMONT

Mailing Address 2980 NANCY CREEK ROAD NW

City

ATLANTA

State

GA

Zip Code

30327-2000

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	3	/	2	0	1	1

Transaction ID: SA11.426476

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. ADA A. STRASENBURGH

Mailing Address P.O. BOX 608

City

OCEAN VIEW

State

NJ

Zip Code

08230-0608

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: SA11.406195

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. ADA A. STRASENBURGH

Mailing Address P.O. BOX 608

City

OCEAN VIEW

State

NJ

Zip Code

08230-0608

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	7	/	2	0	1	1

Transaction ID: SA11.411765

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1350.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 292 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. ALEXANDER D. STUART

Mailing Address 506 N. WASHINGTON ROAD

City

LAKE FOREST

State

IL

Zip Code

60045-2326

FEC ID number of contributing
federal political committee.

C

Name of Employer

NORTH STAR INVESTMENTS

Occupation

INVESTMENT PROFESSIONAL

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	4	/	2	0	1	1

Transaction ID: SA11.411367

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. LYLE STUCKI

Mailing Address 4007 LACOSTA COURT

City

LOUISVILLE

State

KY

Zip Code

40299-1430

FEC ID number of contributing
federal political committee.

C

Name of Employer

UNIQUE MANAGEMENT SERVICES

Occupation

BUSINESS OWNER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.406304

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. TOM SADBERRY

Mailing Address 5465 MOREHOUSE DRIVE
SUITE 260

City

SAN DIEGO

State

CA

Zip Code

92121-4714

FEC ID number of contributing
federal political committee.

C

Name of Employer

SADBERRY PROPERTIES

Occupation

CHAIRMAN

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	8	/	2	0	1	1

Transaction ID: SA11.419381

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 293 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. ALICE E. SUMIDA

Mailing Address 2309 SW 1ST AVENUE
APARTMENT 1545

City State Zip Code
PORTLAND OR 97201-5076

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 8 / 2 0 1 1

Transaction ID: SA11.415735

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. NICK SWYKA

Mailing Address 3023 DEL MONTE DR.

City State Zip Code
HOUSTON TX 77019-3213

FEC ID number of contributing
federal political committee.

C

Name of Employer
SIMMONS & CO. INTERNATIONAL

Occupation
BANKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 1 1

Transaction ID: SA11.448364

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. SHANNON SWYKA

Mailing Address 3023 DEL MONTE DR.

City State Zip Code
HOUSTON TX 77019-3213

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 1 1

Transaction ID: SA11.408938

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 294 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. RICHARD P. SYBERT

Mailing Address 101 W BROADWAY

City

SAN DIEGO

State

CA

Zip Code

92101-8201

FEC ID number of contributing
federal political committee.

C

Name of Employer
GORDON & REES L.L.P.

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 0 / 2 0 1 1

Transaction ID: SA11.414901

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. GENE T. SYKES

Mailing Address 1827 WESTRIDGE ROAD

City

LOS ANGELES

State

CA

Zip Code

90049-2215

FEC ID number of contributing
federal political committee.

C

Name of Employer
GOLDMAN SACH & CO.

Occupation

INVESTMENT BANKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.411966

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. BRUCE E. TABB

Mailing Address 5486 RUTGERS ROAD

City

SAN DIEGO

State

CA

Zip Code

92037-7819

FEC ID number of contributing
federal political committee.

C

Name of Employer
ENVIRONMENTAL DEVELOPMENT
LLC

Occupation

REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 8 / 2 0 1 1

Transaction ID: SA11.415625

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 295 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. JOHN C. TAGGART

Mailing Address 912 STONE FALLS TRAIL

City

RALEIGH

State

NC

Zip Code

27614-9389

FEC ID number of contributing
federal political committee.

C

Name of Employer
GENWORTH FINANCIAL

Occupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 3 / 2 0 1 1

Transaction ID: SA11.426475

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ERIC J. TANENBLATT

Mailing Address 1000 FOXCROFT ROAD

City

ATLANTA

State

GA

Zip Code

30327-2624

FEC ID number of contributing
federal political committee.

C

Name of Employer
MCKENNA LONG & ALDRIDGE,
LLP

Occupation
SENIOR MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 4 / 2 0 1 1

Transaction ID: SA11.466938

Amount of Each Receipt this Period

1056.49

CONTRIBUTION

IN-KIND: CATERING FOR PAC;
REFUNDED \$1,056.49 ON 03/-
06/2011

C.

Full Name (Last, First, Middle Initial)

MR. JOHN TAVLARIOS

Mailing Address 15 WRENFIELD LANE

City

DARIEN

State

CT

Zip Code

06820-2201

FEC ID number of contributing
federal political committee.

C

Name of Employer
GENERAL MARITIME CORPORAT-
ION

Occupation
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 1 1

Transaction ID: SA11.410389

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

8056.49

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 296 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. LORENA TAVLARIOS

Mailing Address 26 INDIAN SPRING RD

City

ROWAYTON

State

CT

Zip Code

06853-1307

FEC ID number of contributing
federal political committee.

C

Name of Employer
CONED SHARED SERVICES

Occupation

FINANCIAL CONTROLLER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 1 1

Transaction ID: SA11.408933

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. NIKOLAS TAVLARIOS

Mailing Address 26 INDIAN SPRING RD

City

ROWAYTON

State

CT

Zip Code

06853-1307

FEC ID number of contributing
federal political committee.

C

Name of Employer
AMPN USA

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 1 9 / 2 0 1 1

Transaction ID: SA11.406792

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. HARRY G. THOMASEN

Mailing Address 7 COLLINS ISLAND

City

NEWPORT BEACH

State

CA

Zip Code

92662-1003

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 8 / 2 0 1 1

Transaction ID: SA11.416957

Amount of Each Receipt this Period

500.00

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 297 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. THOMAS A. THOMAS

Mailing Address 2300 WEST SAHARA AVE

City

LAS VEGAS

State

NV

Zip Code

89102-4352

FEC ID number of contributing
federal political committee.

C

Name of Employer
THOMAS & MACK COOccupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.412567

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JACK THORNTON

Mailing Address PO BOX 1052

City

KETCHUM

State

ID

Zip Code

83340-1052

FEC ID number of contributing
federal political committee.

C

Name of Employer
LAJOLLA DEVELOPMENT COMPA-
NYOccupation
INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	8	/	2	0	1	1

Transaction ID: SA11.419379

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. ELIZABETH A. TILNEY

Mailing Address 5901 STONES THROW ROAD

City

HOUSTON

State

TX

Zip Code

77057-1443

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	5	/	2	0	1	1

Transaction ID: SA11.411638

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10500.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 298 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. SCHUYLER M. TILNEY

Mailing Address 5901 STONES THROW ROAD

City

HOUSTON

State

TX

Zip Code

77057-1443

FEC ID number of contributing
federal political committee.

C

Name of Employer

FAIRHOPE INVESTMENTS, L.P.

Occupation

INVESTOR/CONSULTANT

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	5	/	2	0	1	1

Transaction ID: SA11.411640

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. KENNETH A. TIPTON

Mailing Address P.O. BOX 355

City

PARK CITY

State

UT

Zip Code

84060-0355

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	8	/	2	0	1	1

Transaction ID: SA11.419516

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. WOODBURY O. TITCOMB

Mailing Address 4901 GULF SHORE BLVD N.

City

NAPLES

State

FL

Zip Code

34103-2223

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	3	/	2	0	1	1

Transaction ID: SA11.406355

Amount of Each Receipt this Period

1000.00

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 299 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. WOODBURY O. TITCOMB

Mailing Address 4901 GULF SHORE BLVD N.

City

NAPLES

State

FL

Zip Code

34103-2223

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID: SA11.412283

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. STEPHEN TOCCO

Mailing Address 11 GREGORY LANE

City

READING

State

MA

Zip Code

01867-1079

FEC ID number of contributing
federal political committee.

C

Name of Employer
MINTZ LEVIN

Occupation
BUSINESSMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 8 / 2 0 1 1

Transaction ID: SA11.416818

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. G. ROBERT TOD

Mailing Address 5 EBB TIDE DRIVE

City

CUMBERLAND FORESID

State

ME

Zip Code

04110-1104

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 4 / 2 0 1 1

Transaction ID: SA11.416473

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 300 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. MYLES E. TOLIVER

Mailing Address 5065 OLD POST ROAD

City

OGDEN

State

UT

Zip Code

84403-4340

FEC ID number of contributing
federal political committee.**C**Name of Employer
MODEL LININ, INC.

Occupation

BUSINESSMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	1	/	2	0	1	1

Transaction ID: SA11.418245

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. DOROTHY TOLL

Mailing Address 12900 RIDGEHAVEN ROAD

City

LITTLE ROCK

State

AR

Zip Code

72211-2210

FEC ID number of contributing
federal political committee.**C**Name of Employer
SELF-EMPLOYED

Occupation

SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	3	1	/	2	0	1	1

Transaction ID: SA11.409298

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JON D. TOMPKINS

Mailing Address 61708 BROKEN TOP DRIVE

City

BEND

State

OR

Zip Code

97702-1088

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.410935

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 301 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. WILLIAM TRIBOLET

Mailing Address 6747 AVENIDA ANDORRA

City

LA JOLLA

State

CA

Zip Code

92037-6405

FEC ID number of contributing
federal political committee.

C

Name of Employer

COLLINS DEVELOPMENT COMPA-
NY

Occupation

COMMERCIAL REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2751.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.418950

Amount of Each Receipt this Period

2751.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DANA L. TRIER

Mailing Address 205 WEST 76TH

City

NEW YORK

State

NY

Zip Code

10023-8221

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 1 1

Transaction ID: SA11.409342

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. BYRON D. TROTT

Mailing Address 595 SHERIDAN ROAD

City

WINNETKA

State

IL

Zip Code

60093-2321

FEC ID number of contributing
federal political committee.

C

Name of Employer

B.D.T. CAPITAL PARTNERS
L.L.C.

Occupation

MANAGING PARTNER & C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 8 / 2 0 1 1

Transaction ID: SA11.415624

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

8251.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 302 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. ALISON ARMOUR TROY

Mailing Address 56 CALHOUN DRIVE

City

GREENWICH

State

CT

Zip Code

06831-4438

FEC ID number of contributing
federal political committee.**C**Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	1	1

Transaction ID: SA11.411609

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. MICHAEL TROY

Mailing Address 56 CALHOUN DRIVE

City

GREENWICH

State

CT

Zip Code

06831-4438

FEC ID number of contributing
federal political committee.**C**Name of Employer
GOLDMAN SACH & CO.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

ADVISORY DIRECTOR

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	1	1

Transaction ID: SA11.411607

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ROBERT TURISSINI

Mailing Address 13451 STATE ROUTE 54

City

HAMMONDSPORT

State

NY

Zip Code

14840-9358

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11.407576

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10100.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 303 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. ROBERT TURISSINI

Mailing Address 13451 STATE ROUTE 54

City

HAMMONDSPORT

State

NY

Zip Code

14840-9358

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.419459

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. GEORGE UNHOCH

Mailing Address 1 ALLEN STREET

City

MARION

State

MA

Zip Code

02738-1610

FEC ID number of contributing
federal political committee.

C

Name of Employer
NEW BEDFORD THREAD COMPANY

Occupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11.410990

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. THOMAS A. VALDES

Mailing Address 13440 OAKMEADE

City

WEST PALM BEACH

State

FL

Zip Code

33418-7506

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 3 / 2 0 1 1

Transaction ID: SA11.412941

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 304 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. THOMAS A. VALDES

Mailing Address 13440 OAKMEADE

City

WEST PALM BEACH

State

FL

Zip Code

33418-7506

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	4	/	2	0	1	1

Transaction ID: SA11.424105

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. NIELS E. VALENINER

Mailing Address 524 SOUTH 600 EAST

City

SALT LAKE CITY

State

UT

Zip Code

84102-2710

FEC ID number of contributing
federal political committee.

C

Name of Employer
VCBO ARCHITECTUREOccupation
ARCHITECT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	3	1	/	2	0	1	1

Transaction ID: SA11.409312

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DAVID H. VAN SLOOTEN

Mailing Address 5155 PRINCESS ANNE ROAD

City

LA CANADA

State

CA

Zip Code

91011-2427

FEC ID number of contributing
federal political committee.

C

Name of Employer
VISTAPOINTE CAPITAL MANAG-
EMENTOccupation
INVESTMENT MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	1	/	2	0	1	1

Transaction ID: SA11.418174

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5400.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. JILL VAN SLOOTEN

Mailing Address 5155 PRINCESS ANNE ROAD

City

LA CANADA

State

CA

Zip Code

91011-2427

FEC ID number of contributing
federal political committee.

C

Name of Employer

VISTAPOINTE CAPITAL MANAG-
EMENT

Occupation

INVESTMENT MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.418175

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

LYNNE A. VANDERSLICE

Mailing Address 103 MIDDLEBROOK FARM ROAD

City

WILTON

State

CT

Zip Code

06897-2019

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 3 / 2 0 1 1

Transaction ID: SA11.412868

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JAMES F. VANVALKENBURG

Mailing Address 535 GRADYVILLE ROAD #B125

City

NEWTOWN SQUARE

State

PA

Zip Code

19073-2814

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 7 / 2 0 1 1

Transaction ID: SA11.414314

Amount of Each Receipt this Period

300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6300.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 306 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. JAMES F. VANVALKENBURG

Mailing Address 535 GRADYVILLE ROAD #B125

City

NEWTOWN SQUARE

State

PA

Zip Code

19073-2814

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 1 1

Transaction ID: SA11.433001

Amount of Each Receipt this Period

300.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. HOWARD E. VARNER

Mailing Address 222 VALHALLA DRIVE

City

SOLVANG

State

CA

Zip Code

93463-3101

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 1 1

Transaction ID: SA11.409289

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. WILLIAM C. VASSELL

Mailing Address 2777 SUMMER STREET

City

STAMFORD

State

CT

Zip Code

06905-4318

FEC ID number of contributing
federal political committee.

C

Name of Employer
MURDOCH SECURITY

Occupation
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 3 / 2 0 1 1

Transaction ID: SA11.412873

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1550.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 307 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. JAMES C. VAUGHAN

Mailing Address 11322 CONWAY ROAD

City

SAINT LOUIS

State

MO

Zip Code

63131-2403

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	2	/	2	0	1	1

Transaction ID: SA11.420149

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. TINKHAM VEALE, II

Mailing Address P.O. BOX 39

City

GATES MILLS

State

OH

Zip Code

44040-0039

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.412082

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. PAUL J. VILK, JR.

Mailing Address 2038 ATLANTIS DRIVE
P.O. BOX 162

City

YOUNGSTOWN

State

PA

Zip Code

15696-0162

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	7	/	2	0	1	1

Transaction ID: SA11.410477

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6100.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 308 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. PAUL J. VILK, JR.

Mailing Address 2038 ATLANTIS DRIVE
P.O. BOX 162

City	State	Zip Code
YOUNGSTOWN	PA	15696-0162

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	4	/	2	0	1	1

Transaction ID: SA11.414216

Amount of Each Receipt this Period

125.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ALBERTO VITALE

Mailing Address 135 GRACE TRAIL

City	State	Zip Code
PALM BEACH	FL	33480-3909

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11.412349

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. KIM WALIN

Mailing Address P.O. BOX 5010

City	State	Zip Code
NEW YORK, NY	NY	10128

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.409680

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1375.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 309 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. DON WALKER

Mailing Address 414 COVE BLUFF

City

SAN ANTONIO

State

TX

Zip Code

78216-1613

FEC ID number of contributing
federal political committee.

C

Name of Employer
PRESIDIO TITLE

Occupation

PRESIDENT/OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.417661

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. MARC P. WALSH

Mailing Address 2808 ROBINHOOD STREET

City

HOUSTON

State

TX

Zip Code

77005-2340

FEC ID number of contributing
federal political committee.

C

Name of Employer
MERRILL LYNCH

Occupation

INVESTMENTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 5 / 2 0 1 1

Transaction ID: SA11.408242

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. MONICA WALSH

Mailing Address 29 CROOKED MILE ROAD

City

DARIEN

State

CT

Zip Code

06820-2001

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 5 / 2 0 1 1

Transaction ID: SA11.411617

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

3750.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 310 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. PAUL WATKINS

Mailing Address 63 GARDEN ROAD

City

WELLESLEY HILLS

State

MA

Zip Code

02481-3016

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 3 / 2 0 1 1

Transaction ID: SA11.423547

Amount of Each Receipt this Period

300.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. MARC A. WATTS

Mailing Address 505 RANCHO BAUER

City

HOUSTON

State

TX

Zip Code

77079-6819

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE FRIEDKIN GROUP

Occupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.418259

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ALAN WAXMAN

Mailing Address 76 ALMENDRAL AVENUE

City

ATHERTON

State

CA

Zip Code

94027-4002

FEC ID number of contributing
federal political committee.

C

Name of Employer
T.P.G. CAPITAL

Occupation
INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 1 1

Transaction ID: SA11.417265

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10300.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 311 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. CHARLOTTE WAXMAN

Mailing Address 76 ALMENDRAL AVENUE

City

ATHERTON

State

CA

Zip Code

94027-4002

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2011

Transaction ID: SA11.417264

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. LINDA M. WEBSTER

Mailing Address 1908 RIVER OAKS BLVD.

City

HOUSTON

State

TX

Zip Code

77019-3112

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 17 / 2011

Transaction ID: SA11.415822A

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

CHARGED BACK \$5,000.00 ON
03/21/2011

C.

Full Name (Last, First, Middle Initial)

MRS. LINDA M. WEBSTER

Mailing Address 1908 RIVER OAKS BLVD.

City

HOUSTON

State

TX

Zip Code

77019-3112

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 21 / 2011

Transaction ID: SA11.415822B

Amount of Each Receipt this Period

-5000.00

CONTRIBUTION

CHARGED BACK

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 312 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. STEVEN A. WEBSTER

Mailing Address 1000 LOUISIANA STREET
SUITE 1500City State Zip Code
HOUSTON TX 77002-5018FEC ID number of contributing
federal political committee.**C**Name of Employer
AVISTA CAPITAL PARTNERSOccupation
PRIVATE EQUITY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	5	/	2	0	1	1

Transaction ID: SA11.411614

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. STEVEN A. WEBSTER

Mailing Address 1000 LOUISIANA STREET
SUITE 1500City State Zip Code
HOUSTON TX 77002-5018FEC ID number of contributing
federal political committee.**C**Name of Employer
AVISTA CAPITAL PARTNERSOccupation
PRIVATE EQUITY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11.412908A

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

CHARGED BACK \$5,000.00 ON
02/23/2011**C.**

Full Name (Last, First, Middle Initial)

MR. STEVEN A. WEBSTER

Mailing Address 1000 LOUISIANA STREET
SUITE 1500City State Zip Code
HOUSTON TX 77002-5018FEC ID number of contributing
federal political committee.**C**Name of Employer
AVISTA CAPITAL PARTNERSOccupation
PRIVATE EQUITY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	3	/	2	0	1	1

Transaction ID: SA11.412908B

Amount of Each Receipt this Period

-5000.00

CONTRIBUTION

CHARGED BACK

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 313 / 970

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. CHARLES R. WEIR

Mailing Address 101 CRANBROOK RD

City

BLOOMFIELD HILLS

State

MI

Zip Code

48304-3405

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 7 / 2 0 1 1

Transaction ID: SA11.408799

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. CHARLES R. WEIR

Mailing Address 101 CRANBROOK RD

City

BLOOMFIELD HILLS

State

MI

Zip Code

48304-3405

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 2 / 2 0 1 1

Transaction ID: SA11.416152

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. TED WELCH

Mailing Address 109 LYNNWOOD TERRACE

City

NASHVILLE

State

TN

Zip Code

37205-2911

FEC ID number of contributing
federal political committee.

C

Name of Employer
TED WELCH INVESTMENTS

Occupation
CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 8 / 2 0 1 1

Transaction ID: SA11.416819

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5350.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 314 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. THOMAS WESTON

Mailing Address 196 HOLLY DR.

City

ALPINE

State

UT

Zip Code

84004-1957

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	0	/	2	0	1	1

Transaction ID: SA11.417252

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. D. BRADFORD WETHERELL, JR.

Mailing Address 47 FRESH POND LANE

City

CAMBRIDGE

State

MA

Zip Code

02138-4644

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	4	/	2	0	1	1

Transaction ID: SA11.411361

Amount of Each Receipt this Period

300.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. ALICE WHEATLEY

Mailing Address 119 CORNERSTONE CIRCLE

City

FRANKLIN

State

TN

Zip Code

37064-4763

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11.413471

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1800.00

TOTAL This Period (last page this line number only)

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. DON M. WHEELER

Mailing Address 2617 OLYMPUS DRIVE

City

SALT LAKE CITY

State

UT

Zip Code

84124-2917

FEC ID number of contributing
federal political committee.

C

Name of Employer
H. & E. EQUIPMENT SUPPLY

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: SA11.412517

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DON M. WHEELER

Mailing Address 2617 OLYMPUS DRIVE

City

SALT LAKE CITY

State

UT

Zip Code

84124-2917

FEC ID number of contributing
federal political committee.

C

Name of Employer
H. & E. EQUIPMENT SUPPLY

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 8 / 2 0 1 1

Transaction ID: SA11.415714

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. KURT C. WHEELER

Mailing Address 25487 ADOBE LANE

City

LOS ALTOS HILLS

State

CA

Zip Code

94022-4502

FEC ID number of contributing
federal political committee.

C

Name of Employer
CLARUS VENTURES

Occupation

VENTURE CAPITALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.420401

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 316 / 970

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)
MRS. MARY J. WHEELER GEORGE

Mailing Address 86 REBECCA LANE

City State Zip Code
ATHERTON CA 94027-3415

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
INTERIOR DESIGNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.417871

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. BETTY B. WHETTON

Mailing Address 4824 S. TAYLOR DRIVE

City State Zip Code
TEMPE AZ 85282-7361

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 1 / 2 0 1 1

Transaction ID: SA11.409769

Amount of Each Receipt this Period

35.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. BETTY B. WHETTON

Mailing Address 4824 S. TAYLOR DRIVE

City State Zip Code
TEMPE AZ 85282-7361

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 3 / 2 0 1 1

Transaction ID: SA11.412942

Amount of Each Receipt this Period

35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5070.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 317 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MS. BETTY B. WHETTON

Mailing Address 4824 S. TAYLOR DRIVE

City

TEMPE

State

AZ

Zip Code

85282-7361

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	1	1

Transaction ID: SA11.418230

Amount of Each Receipt this Period

35.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. BETTY B. WHETTON

Mailing Address 4824 S. TAYLOR DRIVE

City

TEMPE

State

AZ

Zip Code

85282-7361

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	4		2	0	1	1

Transaction ID: SA11.424108

Amount of Each Receipt this Period

35.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. BETTY B. WHETTON

Mailing Address 4824 S. TAYLOR DRIVE

City

TEMPE

State

AZ

Zip Code

85282-7361

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	5		2	0	1	1

Transaction ID: SA11.432963

Amount of Each Receipt this Period

35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

105.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 318 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MS. BETTY B. WHETTON

Mailing Address 4824 S. TAYLOR DRIVE

City

TEMPE

State

AZ

Zip Code

85282-7361

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	5	/	2	0	1	1

Transaction ID: SA11.432964

Amount of Each Receipt this Period

35.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOHN C. WHITEHEAD

Mailing Address 16 SUTTON SQ

City

NEW YORK

State

NY

Zip Code

10022-2408

FEC ID number of contributing
federal political committee.

C

Name of Employer
AEA INVESTORSOccupation
CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	1	1

Transaction ID: SA11.417270

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. MARGARET RUTH WHITE

Mailing Address 48 APRICOT AVENUE

City

SALT LAKE CITY

State

UT

Zip Code

84103-1614

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	7	/	2	0	1	1

Transaction ID: SA11.410578

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5285.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 319 / 970

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)
MRS. RUTH WHITESIDE

Mailing Address P.O. BOX 971

City State Zip Code
WEST DOVER VT 05356-0971

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 1 1

Transaction ID: SA11.409240

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MRS. RUTH WHITESIDE

Mailing Address P.O. BOX 971

City State Zip Code
WEST DOVER VT 05356-0971

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 0 / 2 0 1 1

Transaction ID: SA11.414706

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. MARGARET C. WHITMAN

Mailing Address 24 EDGE ROAD

City State Zip Code
ATHERTON CA 94027-2226

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.419385

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. LUCY H.A. WICK

Mailing Address 8453 OLDE MILL CIRCLE WEST DRIVE

City

INDIANAPOLIS

State

IN

Zip Code

46260-2370

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 4 / 2 0 1 1

Transaction ID: SA11.411282

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. STEPHEN F. WIGGINS

Mailing Address 12 NORTH ROAD

City

DARIEN

State

CT

Zip Code

06820-6216

FEC ID number of contributing
federal political committee.

C

Name of Employer
ESSEX WOODLANDS

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 1 / 2 0 1 1

Transaction ID: SA11.409602

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. KAYCEE C. WIITA

Mailing Address 2620 S.E. BELLA VISTA LOOP

City

VANCOUVER

State

WA

Zip Code

98683-7671

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 6 / 2 0 1 1

Transaction ID: SA11.415448

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2250.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 321 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. JAMES W. WILL

Mailing Address 616 BROADWAY

City

TACOMA

State

WA

Zip Code

98402-3804

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	4		2	0	1	1

Transaction ID: SA11.407767

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JAMES W. WILL

Mailing Address 616 BROADWAY

City

TACOMA

State

WA

Zip Code

98402-3804

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	3		2	0	1	1

Transaction ID: SA11.416381

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. ADELE S. WILLDEN

Mailing Address N65W7295 CLEVELAND STREET

City

CEDARBURG

State

WI

Zip Code

53012-1858

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	4		2	0	1	1

Transaction ID: SA11.416531

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. DAVID WILLIAMS

Mailing Address 2001 HALLUM ST

City

CLOVIS

State

NM

Zip Code

88101-8685

FEC ID number of contributing
federal political committee.

C

Name of Employer
WILLIAMS INSURANCE LLC

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 1 1

Transaction ID: SA11.410441

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. GEORGE JAMES WILLIAMS, JR.

Mailing Address 2441 BRIARWOOD DRIVE

City

BOULDER

State

CO

Zip Code

80305-6801

FEC ID number of contributing
federal political committee.

C

Name of Employer
FAEGRE & BENSON L.L.P.

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 1 1

Transaction ID: SA11.417292

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. DIANE B. WILSEY

Mailing Address 2352 PINE STREET

City

SAN FRANCISCO

State

CA

Zip Code

94115-2715

FEC ID number of contributing
federal political committee.

C

Name of Employer
A. WILSEY PROPERTIES COMP-
ANY

Occupation

C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 4 / 2 0 1 1

Transaction ID: SA11.413092

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1350.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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Detailed Summary Page

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(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. DIANE B. WILSEY

Mailing Address 2352 PINE STREET

City

SAN FRANCISCO

State

CA

Zip Code

94115-2715

FEC ID number of contributing
federal political committee.

C

Name of Employer

A. WILSEY PROPERTIES COMP-
ANY

Occupation

C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	7	/	2	0	1	1

Transaction ID: SA11.414297

Amount of Each Receipt this Period

4900.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. BARBARA H. WILSON

Mailing Address 2540 GREEN STREET

City

SAN FRANCISCO

State

CA

Zip Code

94123-4629

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	4	/	2	0	1	1

Transaction ID: SA11.416467

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. GARY L. WILSON

Mailing Address 31528 VICTORIA POINT ROAD

City

MALIBU

State

CA

Zip Code

90265-2638

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

PRIVATE INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	8	/	2	0	1	1

Transaction ID: SA11.411954

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MS. PAULA WILSON

Mailing Address 12904 EAGLE DRIVE

City

BURLINGTON

State

WA

Zip Code

98233-3814

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 9 / 2 0 1 1

Transaction ID: SA11.417105

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. R. KIRK WILSON

Mailing Address 12904 EAGLE DRIVE

City

BURLINGTON

State

WA

Zip Code

98233-3814

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 1 1

Transaction ID: SA11.409077

Amount of Each Receipt this Period

375.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. WELCOME W. WILSON, SR.

Mailing Address 5858 WESTHEIMER
SUITE 800

City

HOUSTON

State

TX

Zip Code

77057-5777

FEC ID number of contributing
federal political committee.

C

Name of Employer
G.S.L. WELCOME GROUP, L.L-
.C.

Occupation

CHAIRMAN & C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 5 / 2 0 1 1

Transaction ID: SA11.415354

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

7875.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. BRIGITTE WING

Mailing Address P.O. BOX 536

City

SPRINGVILLE

State

UT

Zip Code

84663-0536

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 1 / 2 0 1 1

Transaction ID: SA11.415832

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. ABBY WINKELRIED

Mailing Address 17 WASHINGTON AVENUE

City

SHORT HILLS

State

NJ

Zip Code

07078-2074

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 1 / 2 0 1 1

Transaction ID: SA11.409594

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JON WINKELRIED

Mailing Address 17 WASHINGTON AVENUE

City

SHORT HILLS

State

NJ

Zip Code

07078-2074

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 1 / 2 0 1 1

Transaction ID: SA11.409599

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 326 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MRS. GAYLENE K. WINTERS

Mailing Address 5532 W. MISSION LANE

City

GLENDALE

State

AZ

Zip Code

85302-3239

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	0	/	2	0	1	1

Transaction ID: SA11.406913

Amount of Each Receipt this Period

300.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. C. F. WITTICHEN

Mailing Address 2709 SOUTHWOOD ROAD

City

BIRMINGHAM

State

AL

Zip Code

35223-1228

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	2	/	2	0	1	1

Transaction ID: SA11.412640

Amount of Each Receipt this Period

300.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

TERRIE E. WOOD

Mailing Address 50 ST. NICHOLAS ROAD

City

DARIEN

State

CT

Zip Code

06820-2823

FEC ID number of contributing
federal political committee.

C

Name of Employer
STATE OF CONNECTICUTOccupation
STATE LEGISLATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	3	/	2	0	1	1

Transaction ID: SA11.412874

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1600.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 327 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. CARLTON WOODARD

Mailing Address 40 S 6TH ST

City

COTTAGE GROVE

State

OR

Zip Code

97424-2015

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	1		2	0	1	1

Transaction ID: SA11.409847

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOHN H. WOODARD

Mailing Address P.O. BOX 233

City

WHITE BIRD

State

ID

Zip Code

83554-0233

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	7		2	0	1	1

Transaction ID: SA11.415596

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. MARILYNN WOODRUFF

Mailing Address 2335 W. SUNBROOK DRIVE #47

City

ST. GEORGE

State

UT

Zip Code

84770-1923

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
NONE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	5		2	0	1	1

Transaction ID: SA11.416787

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 328 / 970

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. JAMES D. WOODS

Mailing Address 3208 CHEVY CHASE DRIVE

City

HOUSTON

State

TX

Zip Code

77019-3210

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 1 1

Transaction ID: SA11.410475

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. JEANETTE F. WOODS

Mailing Address 3208 CHEVY CHASE DRIVE

City

HOUSTON

State

TX

Zip Code

77019-3210

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 5 / 2 0 1 1

Transaction ID: SA11.408223

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. JEANETTE F. WOODS

Mailing Address 3208 CHEVY CHASE DRIVE

City

HOUSTON

State

TX

Zip Code

77019-3210

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 1 1

Transaction ID: SA11.414180

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

REFUNDED \$250.00 ON 02/16-
/2011

SUBTOTAL of Receipts This Page (optional)

10250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 329 / 970

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)
MS. GLORIA A. WOODWARD

Mailing Address 6 KINGS HIGHWAY

City State Zip Code
MIDDLETOWN NJ 07748-2510

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.420282

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. ROBERT C. WRIGHT

Mailing Address 400 ARABIAN ROAD

City State Zip Code
PALM BEACH FL 33480-3006

FEC ID number of contributing
federal political committee.

C

Name of Employer
THL CAPITAL

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 0 7 / 2 0 1 1

Transaction ID: SA11.410471

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MRS. JULIE WRIGLEY

Mailing Address P.O. BOX 135

City State Zip Code
KETCHUM ID 83340-0135

FEC ID number of contributing
federal political committee.

C

Name of Employer
WRIGLEY INVESTMENTS

Occupation
PRESIDENT/C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 3 / 2 0 1 1

Transaction ID: SA11.425171

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

REFUNDED \$5,000.00 ON 03/-
04/2011

SUBTOTAL of Receipts This Page (optional)

11250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 330 / 970

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. ROBERT KING WULFF

Mailing Address 219 SHAWMUT AVE APT 2

City

BOSTON

State

MA

Zip Code

02118-2148

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 3 / 2 0 1 1

Transaction ID: SA11.405793

Amount of Each Receipt this Period

350.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. MARK WYLAND

Mailing Address P.O. BOX 1008

City

SOLANA BEACH

State

CA

Zip Code

92075-1008

FEC ID number of contributing
federal political committee.

C

Name of Employer
STATE OF CALIFORNIA

Occupation
STATE SENATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.420402

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. SCOTT E. YANCEY

Mailing Address 10300 W. CHARLESTON BLVD.
SUITE 13-233

City

LAS VEGAS

State

NV

Zip Code

89135-1037

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 3 / 2 0 1 1

Transaction ID: SA11.409960

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 331 / 970

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. WALTER J. ZABLE

Mailing Address 9333 BALBOA AVENUE

City

SAN DIEGO

State

CA

Zip Code

92123-1515

FEC ID number of contributing
federal political committee.

C

Name of Employer
CUBIC CORP.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 2 / 2 0 1 1

Transaction ID: SA11.412394

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. SPRYO ZARIFOPOULOS

Mailing Address 2150 IRONWOOD ROAD

City

SYOSSET

State

NY

Zip Code

11791-9662

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.S.G. ROOFING INC.

Occupation

ROOFER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 5 / 2 0 1 1

Transaction ID: SA11.411630

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. JANET B. ZIDE

Mailing Address 35 BINNEY LANE

City

OLD GREENWICH

State

CT

Zip Code

06870-2329

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 8 / 2 0 1 1

Transaction ID: SA11.411956

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 332 / 970

(check only one)

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. STEPHEN M. ZIDE

Mailing Address 35 BINNEY LANE

City

OLD GREENWICH

State

CT

Zip Code

06870-2329

FEC ID number of contributing
federal political committee.

C

Name of Employer
BAIN CAPITAL, L.L.C.Occupation
INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	8		2	0	1	1

Transaction ID: SA11.411962

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

1971910.99

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 333 / 970

(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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

CKE RESTAURANTS, INC. PAC

Mailing Address 6307 CARPINTERIA AVENUE
SUITE A.

City	State	Zip Code
CARPINTERIA	CA	93013-2908

FEC ID number of contributing
federal political committee.**C** C00461673

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
0	4	/	1	4	/	2	0	1	1

Transaction ID: SA11.418958

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

COOPERATIVE OF AMERICAN PHYSICIANS MUTUAL PROTECTION TRUST (CAP-MPT) FED. PAC

Mailing Address 333 S. HOPE STREET
8TH FLOOR

City	State	Zip Code
LOS ANGELES	CA	90071-3001

FEC ID number of contributing
federal political committee.**C** C00161604

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
0	5	/	1	3	/	2	0	1	1

Transaction ID: SA11.426472

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

FORUM PAC

Mailing Address 450 UNIVERSITY PLACE

City	State	Zip Code
GROSSE POINTE	MI	48230-1638

FEC ID number of contributing
federal political committee.**C** C00419994

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	3	/	2	0	1	1

Transaction ID: SA11.426474

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

12000.00

TOTAL This Period (last page this line number only)

12000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 334 / 970

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)
ELAVON

Mailing Address ONE CONCOURSE PARKWAY
SUITE 300

City State Zip Code
ATLANTA GA 30328

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

175.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 2 / 2 0 1 1

Transaction ID: SA15.001

Amount of Each Receipt this Period

175.00

BANK FEES - CREDIT

B.

Full Name (Last, First, Middle Initial)
VERIZON WIRELESS

Mailing Address PO BOX 2167

City State Zip Code
FOLSOM CA 95763

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3441.91

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 9 / 2 0 1 1

Transaction ID: SA15.002

Amount of Each Receipt this Period

3441.91

PHONE SERVICE - CREDIT

SUBTOTAL of Receipts This Page (optional)

3616.91

TOTAL This Period (last page this line number only)

3616.91

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 335 / 970

(check only one)

<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.Full Name (Last, First, Middle Initial)
GEORGIANS FOR ISAKSON

Mailing Address P.O. BOX 250116

City	State	Zip Code
ATLANTA	GA	30325

FEC ID number of contributing
federal political committee.**C** C00384693

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.85

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	1	1

Transaction ID: SA17.001

Amount of Each Receipt this Period

228.85

REIMB TO PAC; PRO-RATED
HOTEL EXP.

FAIR MARKET VALUE

B.Full Name (Last, First, Middle Initial)
ROMNEY FOR PRESIDENT, INC.

Mailing Address 585 COMMERCIAL STREET

City	State	Zip Code
BOSTON	MA	02114

FEC ID number of contributing
federal political committee.**C** C00431171

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264763.11

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	0		2	0	1	1

Transaction ID: SA17.002

Amount of Each Receipt this Period

125518.57

ASSET PURCHASE - FMV

C.Full Name (Last, First, Middle Initial)
ROMNEY FOR PRESIDENT, INC.

Mailing Address 585 COMMERCIAL STREET

City	State	Zip Code
BOSTON	MA	02114

FEC ID number of contributing
federal political committee.**C** C00431171

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264763.11

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	0		2	0	1	1

Transaction ID: SA17.003

Amount of Each Receipt this Period

743.07

OFFICE SUPPLIES - FMV

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

125747.42

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 336 / 970

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)
ROMNEY FOR PRESIDENT, INC.

Mailing Address 585 COMMERCIAL STREET

City State Zip Code
BOSTON MA 02114

FEC ID number of contributing
federal political committee.

C C00431171

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264763.11

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: SA17.004

Amount of Each Receipt this Period

34182.50

DATABASE DEVELOPMENT - FMV

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
ROMNEY FOR PRESIDENT, INC.

Mailing Address 585 COMMERCIAL STREET

City State Zip Code
BOSTON MA 02114

FEC ID number of contributing
federal political committee.

C C00431171

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264763.11

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: SA17.005

Amount of Each Receipt this Period

90518.00

WEB DEVELOPMENT - FMV

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
ROMNEY FOR PRESIDENT, INC.

Mailing Address 585 COMMERCIAL STREET

City State Zip Code
BOSTON MA 02114

FEC ID number of contributing
federal political committee.

C C00431171

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264763.11

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: SA17.006

Amount of Each Receipt this Period

75.00

FURNITURE PURCHASE - FMV

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 337 / 970

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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A.

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ROMNEY FOR PRESIDENT, INC.

Mailing Address 585 COMMERCIAL STREET

City State Zip Code
BOSTON MA 02114

FEC ID number of contributing
federal political committee.

C C00431171

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264763.11

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: SA17.007

Amount of Each Receipt this Period

95439.32

ASSET PURCHASE - FMV

B.

Full Name (Last, First, Middle Initial)
ROMNEY FOR PRESIDENT, INC.

Mailing Address 585 COMMERCIAL STREET

City State Zip Code
BOSTON MA 02114

FEC ID number of contributing
federal political committee.

C C00431171

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264763.11

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: SA17.008

Amount of Each Receipt this Period

6674.63

FURNITURE PURCHASE - FMV

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
ROMNEY FOR PRESIDENT, INC.

Mailing Address 585 COMMERCIAL STREET

City State Zip Code
BOSTON MA 02114

FEC ID number of contributing
federal political committee.

C C00431171

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264763.11

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: SA17.009

Amount of Each Receipt this Period

9850.00

PHOTOGRAPHY PURCHASE - FMV

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

95439.32

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 338 / 970

(check only one)

<input 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 checked="" type="checkbox"/> 17

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A.Full Name (Last, First, Middle Initial)
ROMNEY FOR PRESIDENT, INC.

Mailing Address 585 COMMERCIAL STREET

City	State	Zip Code
BOSTON	MA	02114

FEC ID number of contributing
federal political committee.**C** C00431171

Name of Employer

Occupation

Receipt For:

☐ Primary
 ☐ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264763.11

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	0		2	0	1	1

Transaction ID: SA17.010

Amount of Each Receipt this Period

13123.33

TECHNOLOGY EQUIPMENT PURCHASE - FMV

[MEMO ITEM]**B.**Full Name (Last, First, Middle Initial)
ROMNEY FOR PRESIDENT, INC.

Mailing Address 585 COMMERCIAL STREET

City	State	Zip Code
BOSTON	MA	02114

FEC ID number of contributing
federal political committee.**C** C00431171

Name of Employer

Occupation

Receipt For:

☐ Primary
 ☐ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264763.11

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	0		2	0	1	1

Transaction ID: SA17.011

Amount of Each Receipt this Period

50303.35

COMPUTER PURCHASE - FMV

[MEMO ITEM]**C.**Full Name (Last, First, Middle Initial)
ROMNEY FOR PRESIDENT, INC.

Mailing Address 585 COMMERCIAL STREET

City	State	Zip Code
BOSTON	MA	02114

FEC ID number of contributing
federal political committee.**C** C00431171

Name of Employer

Occupation

Receipt For:

☐ Primary
 ☐ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264763.11

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	0		2	0	1	1

Transaction ID: SA17.012

Amount of Each Receipt this Period

10272.01

PHONE SYSTEM PURCHASE - FMV

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 339 / 970

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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A.

Full Name (Last, First, Middle Initial)
ROMNEY FOR PRESIDENT, INC.

Mailing Address 585 COMMERCIAL STREET

City State Zip Code
BOSTON MA 02114

FEC ID number of contributing
federal political committee.

C C00431171

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264763.11

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: SA17.013

Amount of Each Receipt this Period

5216.00

DOMAIN PURCHASE - FMV

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
ROMNEY FOR PRESIDENT, INC.

Mailing Address 585 COMMERCIAL STREET

City State Zip Code
BOSTON MA 02114

FEC ID number of contributing
federal political committee.

C C00431171

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264763.11

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 9 / 2 0 1 1

Transaction ID: SA17.014

Amount of Each Receipt this Period

42547.82

ASSET PURCHASE - FMV

C.

Full Name (Last, First, Middle Initial)
ROMNEY FOR PRESIDENT, INC.

Mailing Address 585 COMMERCIAL STREET

City State Zip Code
BOSTON MA 02114

FEC ID number of contributing
federal political committee.

C C00431171

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264763.11

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 9 / 2 0 1 1

Transaction ID: SA17.015

Amount of Each Receipt this Period

3800.00

DOMAIN PURCHASE - FMV

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

42547.82

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 340 / 970

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)
ROMNEY FOR PRESIDENT, INC.

Mailing Address 585 COMMERCIAL STREET

City State Zip Code
BOSTON MA 02114

FEC ID number of contributing
federal political committee.

C C00431171

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264763.11

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 9 / 2 0 1 1

Transaction ID: SA17.016

Amount of Each Receipt this Period

3619.82

TECHNOLOGY EQUIPMENT PURCHASE - FMV

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
ROMNEY FOR PRESIDENT, INC.

Mailing Address 585 COMMERCIAL STREET

City State Zip Code
BOSTON MA 02114

FEC ID number of contributing
federal political committee.

C C00431171

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264763.11

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 9 / 2 0 1 1

Transaction ID: SA17.017

Amount of Each Receipt this Period

300.00

SUBSCRIPTION PURCHASE - FMV

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
ROMNEY FOR PRESIDENT, INC.

Mailing Address 585 COMMERCIAL STREET

City State Zip Code
BOSTON MA 02114

FEC ID number of contributing
federal political committee.

C C00431171

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264763.11

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 9 / 2 0 1 1

Transaction ID: SA17.018

Amount of Each Receipt this Period

34828.00

SUPPORTER LIST PURCHASE - FMV

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 341 / 970

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)
ROMNEY FOR PRESIDENT, INC.

Mailing Address 585 COMMERCIAL STREET

City State Zip Code
BOSTON MA 02114

FEC ID number of contributing
federal political committee.

C C00431171

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264763.11

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 6 / 2 0 1 1

Transaction ID: SA17.019

Amount of Each Receipt this Period

100.00

TELECOMMUNICATION SERVICE
- FMV

B.

Full Name (Last, First, Middle Initial)
ROMNEY FOR PRESIDENT, INC.

Mailing Address 585 COMMERCIAL STREET

City State Zip Code
BOSTON MA 02114

FEC ID number of contributing
federal political committee.

C C00431171

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264763.11

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: SA17.020

Amount of Each Receipt this Period

1157.40

OFFICE RENT - FMV

SUBTOTAL of Receipts This Page (optional)

1257.40

TOTAL This Period (last page this line number only)

264991.96

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 342 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. LEO BEUS

Mailing Address 1776 E. TAPESTRY HEIGHTS

City
PHOENIXState
AZZip Code
85048-4526Purpose of Disbursement
IN-KIND: CATERING FOR PAC

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.466946

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	1	1

Amount of Each Disbursement this Period

1131.92

B.

Full Name (Last, First, Middle Initial)

MS. SARAH BOREN

Mailing Address 3191 S. DAVIS BLVD.

City
BOUNTIFULState
UTZip Code
84010-5764Purpose of Disbursement
IN-KIND: EVENT SUPPLIES FOR PAC

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.414183

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	1		2	0	1	1

Amount of Each Disbursement this Period

169.56

C.

Full Name (Last, First, Middle Initial)

LANHEE CHEN

Mailing Address 30 CAMBRIDGE PARK DR. #6132

City
CAMBRIDGEState
MAZip Code
02140Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.708

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	1	1

Amount of Each Disbursement this Period

204.42

Q1 and/or wind down expen-
se

SUBTOTAL of Disbursements This Page (optional)

1505.90

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 343 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

LANHEE CHEN

Mailing Address 30 CAMBRIDGE PARK DR. #6132

City CAMBRIDGE State MA Zip Code 02140

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.765

Date of Disbursement

/ /

Amount of Each Disbursement this Period

76.17

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

LANHEE CHEN

Mailing Address 30 CAMBRIDGE PARK DR. #6132

City CAMBRIDGE State MA Zip Code 02140

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.909

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2685.61

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

ERIC FEHRNSTROM

Mailing Address 83 RISLEY ROAD

City CHESTNUT HILL State MA Zip Code 02467

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.735

Date of Disbursement

/ /

Amount of Each Disbursement this Period

30.00

Q1 and/or wind down expense

SUBTOTAL of Disbursements This Page (optional)

2791.78

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 344 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

ERIC FEHRNSTROM

Mailing Address 83 RISLEY ROAD

City
CHESTNUT HILL

State
MA

Zip Code
02467

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.910

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2736.80

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

MASON FINK

Mailing Address 80 HAYDEN AVENUE

City
LEXINGTON

State
MA

Zip Code
02421

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.733

Date of Disbursement

/ /

Amount of Each Disbursement this Period

16123.25

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

PETER FLAHERTY

Mailing Address 8 ROCKMONT ROAD

City
BELMONT

State
MA

Zip Code
02478

Purpose of Disbursement
STRATEGY CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.700

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1666.67

SUBTOTAL of Disbursements This Page (optional)

20526.72

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 345 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

DOUG GAMBLE

Mailing Address PO BOX 4517

City
CARMEL BY THE SEA

State
CA

Zip Code
93921

Purpose of Disbursement
COMMUNICATIONS CONSULTING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.372

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

KELLI HARRISON

Mailing Address 21 CENTURY STREET
APT. 1

City
MEDFORD

State
MA

Zip Code
02155

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.911

Date of Disbursement

/ /

Amount of Each Disbursement this Period

759.93

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

GARRETT JACKSON

Mailing Address 1 LEIGHTON STREET
APT. 301

City
CAMBRIDGE

State
MA

Zip Code
02141

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.912

Date of Disbursement

/ /

Amount of Each Disbursement this Period

849.31

Q1 and/or wind down expense

SUBTOTAL of Disbursements This Page (optional)

2109.24

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

JACOB KASTAN

Mailing Address 167 COLLEGE AVENUE

City
SOMERVILLE

State
MA

Zip Code
02144

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.169

Date of Disbursement

/ /

Amount of Each Disbursement this Period

44.00

B.

Full Name (Last, First, Middle Initial)

JACOB KASTAN

Mailing Address 167 COLLEGE AVENUE

City
SOMERVILLE

State
MA

Zip Code
02144

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.321

Date of Disbursement

/ /

Amount of Each Disbursement this Period

117.11

C.

Full Name (Last, First, Middle Initial)

JACOB KASTAN

Mailing Address 167 COLLEGE AVENUE

City
SOMERVILLE

State
MA

Zip Code
02144

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.720

Date of Disbursement

/ /

Amount of Each Disbursement this Period

49.10

Q1 and/or wind down expen-
se

SUBTOTAL of Disbursements This Page (optional)

210.21

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 PageFOR 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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. JACOB KASTAN

Mailing Address 167 COLLEGE AVE.

City
SOMERVILLEState
MAZip Code
02144-1313Purpose of Disbursement
IN-KIND: OFFICE SUPPLIES FOR PAC

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.466947

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	1	1

Amount of Each Disbursement this Period

53.12

B.

Full Name (Last, First, Middle Initial)

MS. SARAH LENTI

Mailing Address 217 14TH STREET NE

City
WASHINGTONState
DCZip Code
20002-6405Purpose of Disbursement
IN-KIND: PRINTING & DELIVERY FOR PAC

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.414178

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	4		2	0	1	1

Amount of Each Disbursement this Period

540.71

C.

Full Name (Last, First, Middle Initial)

CHARLES MANNING

Mailing Address PO BOX 146751

City
BOSTONState
MAZip Code
02114Purpose of Disbursement
COMMUNICATIONS CONSULTING FOR PAC

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.876

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	2		2	0	1	1

Amount of Each Disbursement this Period

5000.00

Q1 and/or wind down expen-
se

SUBTOTAL of Disbursements This Page (optional)

5593.83

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)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) CHARLES MANNING	Transaction ID: SB21B.938 Date of Disbursement																				
Mailing Address PO BOX 146751	<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>0</td><td>6</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	5		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	5		2	0	1	1												
City BOSTON State MA Zip Code 02114	Amount of Each Disbursement this Period																				
Purpose of Disbursement COMMUNICATIONS CONSULTING FOR PAC	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Candidate Name	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) ▼ Q1 and/or wind down expense																				
B. Full Name (Last, First, Middle Initial) JASON MCBRIDE	Transaction ID: SB21B.879 Date of Disbursement																				
Mailing Address APT. E-207	<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>0</td><td>5</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		2	0		2	0	1	1												
City BEDFORD State NH Zip Code 03110	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	<table border="1"> <tr> <td colspan="10">914.65</td> </tr> </table>	914.65																			
914.65																					
Candidate Name	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) ▼ Q1 and/or wind down expense																				
C. Full Name (Last, First, Middle Initial) JASON MCBRIDE	Transaction ID: SB21B.880 Date of Disbursement																				
Mailing Address APT. E-207	<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>0</td><td>5</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		2	0		2	0	1	1												
City BEDFORD State NH Zip Code 03110	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	<table border="1"> <tr> <td colspan="10">1047.77</td> </tr> </table>	1047.77																			
1047.77																					
Candidate Name	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) ▼ Q1 and/or wind down expense																				

SUBTOTAL of Disbursements This Page (optional)

6962.42

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. KEVIN P. MOORE

Mailing Address 8976 CROOKED STICK COURT

City
NAPLES

State
FL

Zip Code
34113-1678

Purpose of Disbursement
IN-KIND: CATERING & VALET SERVCS FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.466943

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2093.14

B.

Full Name (Last, First, Middle Initial)

MS. LINDA A. MURPHY TAVLARIOS

Mailing Address 15 WRENFIELD LANE

City
DARIEN

State
CT

Zip Code
06820-2201

Purpose of Disbursement
IN-KIND: EVENT STAFFING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.414179

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2064.00

C.

Full Name (Last, First, Middle Initial)

BETH MYERS

Mailing Address 201 BUCKMINSTER RD.

City
BROOKLINE

State
MA

Zip Code
02455

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.677

Date of Disbursement

/ /

Amount of Each Disbursement this Period

199.03

SUBTOTAL of Disbursements This Page (optional)

4356.17

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

BETH MYERS

Mailing Address 201 BUCKMINSTER RD.

City State Zip Code
BROOKLINE MA 02455

Purpose of Disbursement
STRATEGY CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.699

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3333.33

B.

Full Name (Last, First, Middle Initial)

ALAN NGUYEN

Mailing Address 186 FELLSWAY WEST

City State Zip Code
MEDFORD MA 02155

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.710

Date of Disbursement

/ /

Amount of Each Disbursement this Period

22.00

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

ALAN NGUYEN

Mailing Address 80 HAYDEN AVE.

City State Zip Code
LEXINGTON MA 02421

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.913

Date of Disbursement

/ /

Amount of Each Disbursement this Period

600.73

Q1 and/or wind down expense

SUBTOTAL of Disbursements This Page (optional)

3956.06

TOTAL This Period (last page this line number only)

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

Free and Strong America PAC, Inc.

FEC Schedule B (Form 3X) (Revised 02/2003)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

BRUCE NILSON

Mailing Address 40 KINGS WAY, #401A

City
WALTHAM

State
MA

Zip Code
02451

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.154

Date of Disbursement

/ /

Amount of Each Disbursement this Period

195.25

B.

Full Name (Last, First, Middle Initial)

BRUCE NILSON

Mailing Address 40 KINGS WAY, #401A

City
WALTHAM

State
MA

Zip Code
02451

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.170

Date of Disbursement

/ /

Amount of Each Disbursement this Period

14.00

C.

Full Name (Last, First, Middle Initial)

BRUCE NILSON

Mailing Address 40 KINGS WAY, #401A
APT.1

City
WALTHAM

State
MA

Zip Code
02451

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.914

Date of Disbursement

/ /

Amount of Each Disbursement this Period

715.68

Q1 and/or wind down expense

SUBTOTAL of Disbursements This Page (optional)

924.93

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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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

DANNY O'DRISCOLL

Mailing Address 8701 BELMART ROAD

City
POTOMAC

State
MD

Zip Code
20854

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.899

Date of Disbursement

/ /

Amount of Each Disbursement this Period

687.22

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

MEREDITH O'ROURKE

Mailing Address 2118 E. RANDOLPH CIRCLE

City
TALLAHASSEE

State
FL

Zip Code
32308

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.346

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1404.22

C.

Full Name (Last, First, Middle Initial)

MRS. MEREDITH O'ROURKE

Mailing Address 2118 E. RANDOLPH CIRCLE

City
TALLAHASSEE

State
FL

Zip Code
32308-0726

Purpose of Disbursement
IN-KIND: ROOM RENTAL FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.466939

Date of Disbursement

/ /

Amount of Each Disbursement this Period

908.35

SUBTOTAL of Disbursements This Page (optional)

2999.79

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)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) MR. JOHN RAKOLTA, JR.	Transaction ID: SB21B.456466 Date of Disbursement																				
Mailing Address 1876 RATHMOR 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>0</td><td>6</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	7		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	7		2	0	1	1												
City BLOOMFIELD HILLS State MI Zip Code 48304-2147	Amount of Each Disbursement this Period																				
Purpose of Disbursement IN-KIND: CATERING FOR PAC Candidate Name	<table border="1"> <tr> <td colspan="10">509.50</td> </tr> </table>	509.50																			
509.50																					
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) ▼ Q1 and/or wind down expense																				
B. Full Name (Last, First, Middle Initial) MITCHELL REISS	Transaction ID: SB21B.156 Date of Disbursement																				
Mailing Address 106 JOHN FOWLER	<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>0</td><td>2</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	3		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	3		2	0	1	1												
City WILLIAMSBURG State VA Zip Code 23185	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT Candidate Name	<table border="1"> <tr> <td colspan="10">1002.51</td> </tr> </table>	1002.51																			
1002.51																					
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) ▼																				
C. Full Name (Last, First, Middle Initial) MATTHEW RHOADES	Transaction ID: SB21B.339 Date of Disbursement																				
Mailing Address 90-92 REVERE STREET	<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>0</td><td>3</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	6		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	6		2	0	1	1												
City BOSTON State MA Zip Code 02114	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT Candidate Name	<table border="1"> <tr> <td colspan="10">59.25</td> </tr> </table>	59.25																			
59.25																					
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)

1571.26

TOTAL This Period (last page this line number only)

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

Free and Strong America PAC, Inc.

FEC Schedule B (Form 3X) (Revised 02/2003)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 356 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

STEVE ROCHE

Mailing Address 4 LEBLANC DRIVE

City
DANVERSState
MAZip Code
01923Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.160

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	3	/	2	0	1	1

Amount of Each Disbursement this Period

1433.28

B.

Full Name (Last, First, Middle Initial)

STEVE ROCHE

Mailing Address 4 LEBLANC DRIVE

City
DANVERSState
MAZip Code
01923Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.161

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	3	/	2	0	1	1

Amount of Each Disbursement this Period

1360.69

C.

Full Name (Last, First, Middle Initial)

STEVE ROCHE

Mailing Address 4 LEBLANC DRIVE

City
DANVERSState
MAZip Code
01923Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.375

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	8	/	2	0	1	1

Amount of Each Disbursement this Period

634.08

SUBTOTAL of Disbursements This Page (optional)

3428.05

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

STEVE ROCHE

Mailing Address 4 LEBLANC DRIVE

City
DANVERS

State
MA

Zip Code
01923

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.378

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1803.34

B.

Full Name (Last, First, Middle Initial)

STEVE ROCHE

Mailing Address 4 LEBLANC DRIVE

City
DANVERS

State
MA

Zip Code
01923

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.386

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1120.15

C.

Full Name (Last, First, Middle Initial)

SCOTT ROMNEY

Mailing Address 2290 FIRST NATIONAL BUILDING
660 WOODWARD AVENUE

City
DETROIT

State
MI

Zip Code
48226

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.003

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1494.81

SUBTOTAL of Disbursements This Page (optional)

4418.30

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 358 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

SCOTT ROMNEY

Mailing Address 2290 FIRST NATIONAL BUILDING
660 WOODWARD AVENUE

City State Zip Code
DETROIT MI 48226

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.377

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)

SCOTT ROMNEY

Mailing Address 2290 FIRST NATIONAL BUILDING
660 WOODWARD AVENUE

City State Zip Code
DETROIT MI 48226

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.691

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

JACQUELINE ROONEY

Mailing Address 9 COMMONWEALTH AVE.
APT. 1A

City State Zip Code
BOSTON MA 02116

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.917

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Q1 and/or wind down expen-
se

SUBTOTAL of Disbursements This Page (optional)

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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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

ANDREA SAUL

Mailing Address 28 EXETER ST., APT. 707

City
BOSTON

State
MA

Zip Code
02116

Purpose of Disbursement
COMMUNICATIONS CONSULTING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.707

Date of Disbursement

/ /

Amount of Each Disbursement this Period

16000.00

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

GABRIEL SCHOENFELD

Mailing Address 2830 W. 17TH ST.

City
BROOKLYN

State
NY

Zip Code
11224

Purpose of Disbursement
COMMUNICATIONS CONSULTING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.365

Date of Disbursement

/ /

Amount of Each Disbursement this Period

8000.00

C.

Full Name (Last, First, Middle Initial)

MR. L. E. SIMMONS

Mailing Address 600 TRAVIS STREET, SUITE 6600

City
HOUSTON

State
TX

Zip Code
77002-2921

Purpose of Disbursement
IN-KIND: CATERING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.456799

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2719.24

Q1 and/or wind down expense

SUBTOTAL of Disbursements This Page (optional)

26719.24

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 360 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

DON STIRLING

Mailing Address 2984 DANISH BROOK CIRCLE

City COTTONWOOD HEIGHTS State UT Zip Code 84121

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.011

Date of Disbursement

01 / 04 / 2011

Amount of Each Disbursement this Period

1143.77

B.

Full Name (Last, First, Middle Initial)

DON STIRLING

Mailing Address 2984 DANISH BROOK CIRCLE

City COTTONWOOD HEIGHTS State UT Zip Code 84121

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.012

Date of Disbursement

01 / 04 / 2011

Amount of Each Disbursement this Period

361.77

C.

Full Name (Last, First, Middle Initial)

DON STIRLING

Mailing Address 2984 DANISH BROOK CIRCLE

City COTTONWOOD HEIGHTS State UT Zip Code 84121

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.157

Date of Disbursement

02 / 23 / 2011

Amount of Each Disbursement this Period

1326.19

SUBTOTAL of Disbursements This Page (optional)

2831.73

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)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) DON STIRLING	Transaction ID: SB21B.174 Date of Disbursement
Mailing Address 2984 DANISH BROOK CIRCLE	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
City COTTONWOOD HEIGHTS State UT Zip Code 84121	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	<div>898.01</div>
Candidate Name	<div>Category/Type</div>
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) ▼
B. Full Name (Last, First, Middle Initial) DON STIRLING	Transaction ID: SB21B.338 Date of Disbursement
Mailing Address 2984 DANISH BROOK CIRCLE	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 6 / 2 0 1 1</div> </div>
City COTTONWOOD HEIGHTS State UT Zip Code 84121	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	<div>1491.67</div>
Candidate Name	<div>Category/Type</div>
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) ▼
C. Full Name (Last, First, Middle Initial) DON STIRLING	Transaction ID: SB21B.345 Date of Disbursement
Mailing Address 2984 DANISH BROOK CIRCLE	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 6 / 2 0 1 1</div> </div>
City COTTONWOOD HEIGHTS State UT Zip Code 84121	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	<div>866.78</div>
Candidate Name	<div>Category/Type</div>
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)

3256.46

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

DON STIRLING

Mailing Address 2984 DANISH BROOK CIRCLE

City COTTONWOOD HEIGHTS State UT Zip Code 84121

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.678

Date of Disbursement

04 / 04 / 2011

Amount of Each Disbursement this Period

356.92

B.

Full Name (Last, First, Middle Initial)

DON STIRLING

Mailing Address 2984 DANISH BROOK CIRCLE

City COTTONWOOD HEIGHTS State UT Zip Code 84121

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.925

Date of Disbursement

06 / 10 / 2011

Amount of Each Disbursement this Period

759.52

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

MR. ERIC J. TANENBLATT

Mailing Address 1000 FOXCROFT ROAD

City ATLANTA State GA Zip Code 30327-2624

Purpose of Disbursement
IN-KIND: CATERING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.466938

Date of Disbursement

03 / 14 / 2011

Amount of Each Disbursement this Period

1056.49

SUBTOTAL of Disbursements This Page (optional)

2172.93

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 363 / 970

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

LOUIS TAVARES

Mailing Address 42 HAZEN STREET

City
CHELMSFORD

State
MA

Zip Code
01824

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.918

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2065.25

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

MR. LOUIS TAVARES

Mailing Address 42 HAZEN ST

City
CHELMSFORD

State
MA

Zip Code
01824-4602

Purpose of Disbursement
IN-KIND: PRINTING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.414181

Date of Disbursement

/ /

Amount of Each Disbursement this Period

167.10

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

SAGAR VACHHANI

Mailing Address 7915 CAPRI CIRCLE

City
HOUSTON

State
TX

Zip Code
77095-3455

Purpose of Disbursement
IN-KIND: OFFICE SUPPLIES FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.466940

Date of Disbursement

/ /

Amount of Each Disbursement this Period

12.74

Q1 and/or wind down expense

SUBTOTAL of Disbursements This Page (optional)

2245.09

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

SAGAR VACHHANI

Mailing Address 7915 CAPRI CIRCLE

City
HOUSTON

State
TX

Zip Code
77095

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.721

Date of Disbursement

/ /

Amount of Each Disbursement this Period

51.00

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

SAGAR VACHHANI

Mailing Address 7915 CAPRI CIRCLE

City
HOUSTON

State
TX

Zip Code
77095

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.728

Date of Disbursement

/ /

Amount of Each Disbursement this Period

88.49

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

MATTHEW WALDRIP

Mailing Address 200 WEST SPRINGFIELD ST., #2

City
BOSTON

State
MA

Zip Code
02118

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.004

Date of Disbursement

/ /

Amount of Each Disbursement this Period

854.96

SUBTOTAL of Disbursements This Page (optional)

994.45

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 365 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MATTHEW WALDRIP

Mailing Address 200 WEST SPRINGFIELD ST., #2

City
BOSTON

State
MA

Zip Code
02118

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.702

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

609.63

B.

Full Name (Last, First, Middle Initial)

WILLIAM E WALKER

Mailing Address 3990 WASHINGTON AVE., SUITE 1138

City
HOUSTON

State
TX

Zip Code
77007

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.342

Date of Disbursement

03 / 16 / 2011

Amount of Each Disbursement this Period

639.75

C.

Full Name (Last, First, Middle Initial)

WILLIAM E WALKER

Mailing Address 3990 WASHINGTON AVE., SUITE 1138

City
HOUSTON

State
TX

Zip Code
77007

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.343

Date of Disbursement

03 / 16 / 2011

Amount of Each Disbursement this Period

813.50

SUBTOTAL of Disbursements This Page (optional)

2062.88

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 366 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MEG WHITMAN

Mailing Address 24 EDGE RD.

City
ATHERTON

State
CA

Zip Code
94027

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.755

Date of Disbursement

/ /

Amount of Each Disbursement this Period

249.40

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

ACTION FIRST

Mailing Address 501 26TH STREET SOUTH
SUITE 200

City
ARLINGTON

State
VA

Zip Code
22202

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.123

Date of Disbursement

/ /

Amount of Each Disbursement this Period

329.00

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

ADMINISTAFF COMPANIES

Mailing Address 19001 CRESCENT SPRINGS DRIVE

City
KINGWOOD

State
TX

Zip Code
77339

Purpose of Disbursement
PAYROLL TAXES/INSURANCE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.907

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4421.67

Q1 and/or wind down expense

SUBTOTAL of Disbursements This Page (optional)

5000.07

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 PageFOR LINE NUMBER:
(check only one)

PAGE 367 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

ADMINISTAFF COMPANIES

Mailing Address 19001 CRESCENT SPRINGS DRIVE

City KINGWOOD State TX Zip Code 77339

Purpose of Disbursement
PAYROLL SERVICE FEES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.908

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	1	1

Amount of Each Disbursement this Period

4198.86

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

AIR FRANTZ, INC.

Mailing Address 8 SOUND SHORE DRIVE

City GREENWICH State CT Zip Code 06830

Purpose of Disbursement
TRAVEL ON 02/04/2011

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.048

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	4		2	0	1	1

Amount of Each Disbursement this Period

1071.00

C.

Full Name (Last, First, Middle Initial)

AMERICAN EXPRESS

Mailing Address P.O. BOX 2855

City NEW YORK State NY Zip Code 10116

Purpose of Disbursement
CREDIT CARD PAYMENT

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.001

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	2		2	0	1	1

Amount of Each Disbursement this Period

228.85

SEE CHARGE BELOW

SUBTOTAL of Disbursements This Page (optional)

5498.71

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 368 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

ATLANTA MARRIOTT BUCKHEAD HOTEL AND CONFERENCE CENTER

Mailing Address 3405 LENOX ROAD NE

City
ATLANTA

State
GA

Zip Code
30326

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.002

Date of Disbursement

/ /

Amount of Each Disbursement this Period

228.85

[MEMO ITEM]

ISAKSON REIMBURSEMENT SOU-
GHT

B.

Full Name (Last, First, Middle Initial)

AMERICAN EXPRESS

Mailing Address PO BOX 2855

City
NEW YORK

State
NY

Zip Code
10116

Purpose of Disbursement
CREDIT CARD PAYMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.049

Date of Disbursement

/ /

Amount of Each Disbursement this Period

6310.60

SEE CHARGES BELOW

C.

Full Name (Last, First, Middle Initial)

ABU DHABI HILTON

Mailing Address PO BOX 877

City
ABU DHABI, UAE

State

Zip Code

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.053

Date of Disbursement

/ /

Amount of Each Disbursement this Period

341.10

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

6310.60

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

ABU DHABI HILTON

Mailing Address PO BOX 877

City State Zip Code

ABU DHABI, UAE

Purpose of Disbursement

TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.054

Date of Disbursement

/ /

Amount of Each Disbursement this Period

387.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

ABU DHABI HILTON

Mailing Address PO BOX 877

City State Zip Code

ABU DHABI, UAE

Purpose of Disbursement

EXCHANGE FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.110

Date of Disbursement

/ /

Amount of Each Disbursement this Period

9.21

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

ABU DHABI HILTON

Mailing Address PO BOX 877

City State Zip Code

ABU DHABI, UAE

Purpose of Disbursement

EXCHANGE FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.111

Date of Disbursement

/ /

Amount of Each Disbursement this Period

10.46

[MEMO ITEM]

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 370 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

AMERICAN AIRLINES

Mailing Address P O BOX 582820-MD-766

City
TULSA

State
OK

Zip Code
74158

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.057

Date of Disbursement

/ /

Amount of Each Disbursement this Period

156.70

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

AU BON PAIN CAFE

Mailing Address 1251 AVE OF THE AMERICAS

City
NEW YORK

State
NY

Zip Code
10020

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.050

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2.60

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

AU BON PAIN CAFE

Mailing Address UNIT #192 LOGAN AIRPORT TERMINAL A

City
BOSTON

State
MA

Zip Code
02110

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.059

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3.74

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

Free and Strong America PAC, Inc.

[MEMO ITEM]

[MEMO ITEM]

[MEMO ITEM]

FEC Schedule B (Form 3X) (Revised 02/2003)

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 372 / 970

<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)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) DELTA AIR LINES	Transaction ID: SB21B.062 Date of Disbursement																				
Mailing Address ATLANTA AIRPORT	<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>0</td><td>2</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	7		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	7		2	0	1	1												
City ATLANTA State GA Zip Code 30344	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL	<table border="1"> <tr> <td colspan="10">158.70</td> </tr> </table>	158.70																			
158.70																					
Candidate Name	[MEMO ITEM]																				
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) ▼																				
B. Full Name (Last, First, Middle Initial) DELTA AIR LINES	Transaction ID: SB21B.063 Date of Disbursement																				
Mailing Address DEPT 680 1030 DELTA BLVD	<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>0</td><td>2</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	7		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	7		2	0	1	1												
City ATLANTA State GA Zip Code 30354	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL	<table border="1"> <tr> <td colspan="10">257.50</td> </tr> </table>	257.50																			
257.50																					
Candidate Name	[MEMO ITEM]																				
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) ▼																				
C. Full Name (Last, First, Middle Initial) DELTA AIR LINES	Transaction ID: SB21B.064 Date of Disbursement																				
Mailing Address DEPT 680 1030 DELTA BLVD	<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>0</td><td>2</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	7		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	7		2	0	1	1												
City ATLANTA State GA Zip Code 30354	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL	<table border="1"> <tr> <td colspan="10">3666.45</td> </tr> </table>	3666.45																			
3666.45																					
Candidate Name	[MEMO ITEM]																				
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)

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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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

DELTA AIR LINES

Mailing Address ATLANTA AIRPORT

City ATLANTA State GA Zip Code 30320

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.065

Date of Disbursement

02 / 07 / 2011

Amount of Each Disbursement this Period

419.40

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

DELTA AIR LINES

Mailing Address ATLANTA AIRPORT

City ATLANTA State GA Zip Code 30344

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.066

Date of Disbursement

02 / 07 / 2011

Amount of Each Disbursement this Period

156.70

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

DELTA AIR LINES

Mailing Address ATLANTA AIRPORT

City ATLANTA State GA Zip Code 30344

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.067

Date of Disbursement

02 / 07 / 2011

Amount of Each Disbursement this Period

313.70

[MEMO ITEM]

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 PageFOR 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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

DOWNTOWN TAXI MGMT INC

Mailing Address 330 BUTLER ST

City
BROOKLYNState
NYZip Code
11217Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.069

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	7		2	0	1	1

Amount of Each Disbursement this Period

11.40

[MEMO ITEM]**B.**

Full Name (Last, First, Middle Initial)

ED'S CHOWDER HOUSE

Mailing Address 44 W 63RD ST

City
NEW YORKState
NYZip Code
10023Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.070

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	7		2	0	1	1

Amount of Each Disbursement this Period

22.60

[MEMO ITEM]**C.**

Full Name (Last, First, Middle Initial)

EMIRATES AIRLINE

Mailing Address PO BOX 686

City
DUBAI, UAE

State

Zip Code

Purpose of Disbursement
CREDIT: TRAVEL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.116

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	7		2	0	1	1

Amount of Each Disbursement this Period

-5949.10

[MEMO ITEM]

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)

Free and Strong America PAC, Inc.

A. EXECUTIVE OWNERS HOLDING

Full Name (Last, First, Middle Initial)

EXECUTIVE OWNERS HOLDING

Mailing Address 21-03 44TH AVE, SUITE 201

City
LONG ISLAND CITY

State
NY

Zip Code
11101

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.071

Date of Disbursement

02 / 07 / 2011

Amount of Each Disbursement this Period

13.70

[MEMO ITEM]

B. FEDEX

Full Name (Last, First, Middle Initial)

FEDEX

Mailing Address 1919 CONNECTICUT AVENUE

City
WASHINGTON

State
DC

Zip Code
20009

Purpose of Disbursement
DELIVERY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.072

Date of Disbursement

02 / 07 / 2011

Amount of Each Disbursement this Period

5.81

[MEMO ITEM]

C. GOTHAM YELLOW LLC

Full Name (Last, First, Middle Initial)

GOTHAM YELLOW LLC

Mailing Address 134 02 33RD AVE

City
FLUSHING

State
NY

Zip Code
11354

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.073

Date of Disbursement

02 / 07 / 2011

Amount of Each Disbursement this Period

8.25

[MEMO ITEM]

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

HERTZ

Mailing Address 14501 HERTZ QUAIL SPGS PK

City OKLAHOMA CITY State OK Zip Code 73134

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.074

Date of Disbursement

02 / 07 / 2011

Amount of Each Disbursement this Period

192.98

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

HILTON

Mailing Address 755 CROSSOVER LN

City MEMPHIS State TN Zip Code 38117

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.078

Date of Disbursement

02 / 07 / 2011

Amount of Each Disbursement this Period

681.85

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

HILTON GARDEN INN JFK

Mailing Address 14818 134TH ST

City JAMAICA State NY Zip Code 11430

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.075

Date of Disbursement

02 / 07 / 2011

Amount of Each Disbursement this Period

37.95

[MEMO ITEM]

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

HILTON GARDEN INN JFK

Mailing Address 14818 134TH ST

City
JAMAICA

State
NY

Zip Code
11430

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.076

Date of Disbursement

/ /

Amount of Each Disbursement this Period

63.40

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

HILTON GARDEN INN JFK

Mailing Address 14818 134TH ST

City
JAMAICA

State
NY

Zip Code
11430

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.077

Date of Disbursement

/ /

Amount of Each Disbursement this Period

227.27

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

J AND I MAINTENANCE CORP

Mailing Address 341 BERGEN ST

City
BROOKLYN

State
NY

Zip Code
11217

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.079

Date of Disbursement

/ /

Amount of Each Disbursement this Period

14.25

[MEMO ITEM]

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City
SALT LAKE CITY

State
UT

Zip Code
84121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.080

Date of Disbursement

/ /

Amount of Each Disbursement this Period

258.70

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City
SALT LAKE CITY

State
UT

Zip Code
84121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.081

Date of Disbursement

/ /

Amount of Each Disbursement this Period

438.70

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

JW MARRIOT HOTEL

Mailing Address PO BOX 16590

City
DUBAI, UAE

State

Zip Code

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.082

Date of Disbursement

/ /

Amount of Each Disbursement this Period

349.03

[MEMO ITEM]

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)
Free and Strong America PAC, Inc.

<p>A.</p> <p>Full Name (Last, First, Middle Initial) JW MARRIOT HOTEL</p> <p>Mailing Address PO BOX 16590</p> <p>City DUBAI, UAE State Zip Code</p> <p>Purpose of Disbursement TRAVEL EXPENSE</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>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.083</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 228.38</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) JW MARRIOT HOTEL</p> <p>Mailing Address PO BOX 16590</p> <p>City DUBAI, UAE State Zip Code</p> <p>Purpose of Disbursement TRAVEL EXPENSE</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>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.084</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 228.38</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) JW MARRIOT HOTEL</p> <p>Mailing Address PO BOX 16590</p> <p>City DUBAI, UAE State Zip Code</p> <p>Purpose of Disbursement EXCHANGE FEE</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>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.112</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 9.42</p> <p>[MEMO ITEM]</p>

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

JW MARRIOT HOTEL

Mailing Address PO BOX 16590

City State Zip Code

DUBAI, UAE

Purpose of Disbursement

EXCHANGE FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.113

Date of Disbursement

/ /

Amount of Each Disbursement this Period

6.17

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

JW MARRIOT HOTEL

Mailing Address PO BOX 16590

City State Zip Code

DUBAI, UAE

Purpose of Disbursement

EXCHANGE FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.114

Date of Disbursement

/ /

Amount of Each Disbursement this Period

6.17

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

LEGAL TEST KITCHEN 212

Mailing Address 23 TERMINAL A

City State Zip Code

BOSTON

MA

02128

Purpose of Disbursement

TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.085

Date of Disbursement

/ /

Amount of Each Disbursement this Period

17.60

[MEMO ITEM]

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

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(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MASS PORT LOGAN PARKING

Mailing Address 1 HARBORSIDE DR STE 200S

City
BOSTON

State
MA

Zip Code
02128

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.086

Date of Disbursement

/ /

Amount of Each Disbursement this Period

36.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

NEILLIOS AT LEXINGTON

Mailing Address 53 BEDFORD ST

City
LEXINGTON

State
MA

Zip Code
02420

Purpose of Disbursement
MEETING EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.087

Date of Disbursement

/ /

Amount of Each Disbursement this Period

34.40

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

NYC TAXI

Mailing Address 14945 NORTHERN BLVD APT 3

City
FLUSHING

State
NY

Zip Code
11354

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.056

Date of Disbursement

/ /

Amount of Each Disbursement this Period

6.67

[MEMO ITEM]

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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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) NYC TAXI	Transaction ID: SB21B.058 Date of Disbursement
Mailing Address 142 W 21ST ST	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 7 / 2 0 1 1</div> </div>
City NEW YORK State NY Zip Code 10011	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL	<div>9.84</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) NYC TAXI	Transaction ID: SB21B.088 Date of Disbursement
Mailing Address 718 OUTLOOK AVE	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 7 / 2 0 1 1</div> </div>
City WEST BABYLON State NY Zip Code 11704	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSE	<div>12.50</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) NYC TAXI	Transaction ID: SB21B.089 Date of Disbursement
Mailing Address 3703 21ST ST	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 7 / 2 0 1 1</div> </div>
City LONG ISLAND CITY State NY Zip Code 11101	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSE	<div>9.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
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)

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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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

NYC TAXI

Mailing Address 3108 NORTHERN BLVD

City
LONG ISLAND CITY

State
NY

Zip Code
11101

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.108

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4.83

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

OLIVER'S BAR AND GRILL

Mailing Address 190 W 4TH ST

City
NEW YORK

State
NY

Zip Code
10014

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.090

Date of Disbursement

/ /

Amount of Each Disbursement this Period

49.43

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

PANERA BREAD

Mailing Address 1100 LEXINGTON ST

City
WALTHAM

State
MA

Zip Code
02452

Purpose of Disbursement
MEETING EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.091

Date of Disbursement

/ /

Amount of Each Disbursement this Period

14.72

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

Free and Strong America PAC, Inc.

[MEMO ITEM]

[MEMO ITEM]

[MEMO ITEM]

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

SHELL OIL

Mailing Address 12700 NORTHBOROUGH

City
HOUSTON

State
TX

Zip Code
77067

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.095

Date of Disbursement

/ /

Amount of Each Disbursement this Period

50.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

SOUTHWEST AIRLINES

Mailing Address PO BOX 36611

City
DALLAS

State
TX

Zip Code
75235

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.096

Date of Disbursement

/ /

Amount of Each Disbursement this Period

479.70

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

STARBUCKS

Mailing Address 1889 BROADWAY

City
NEW YORK

State
NY

Zip Code
10023

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.051

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4.84

[MEMO ITEM]

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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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

STARBUCKS

Mailing Address 1889 BROADWAY

City
NEW YORK

State
NY

Zip Code
10023

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.052

Date of Disbursement

/ /

Amount of Each Disbursement this Period

7.56

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

STARBUCKS

Mailing Address INTL ARRIVALS BLDG 51

City
JAMAICA

State
NY

Zip Code
11430

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.068

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5.06

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

SUBWAY

Mailing Address 1666 K ST NW

City
WASHINGTON

State
DC

Zip Code
20006

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.097

Date of Disbursement

/ /

Amount of Each Disbursement this Period

14.83

[MEMO ITEM]

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

TTI TECHNOLOGIES INC

Mailing Address 891 AMSTERDAM AVE

City NEW YORK State NY Zip Code 10025

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.098

Date of Disbursement

02 / 07 / 2011

Amount of Each Disbursement this Period

3.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

TTI TECHNOLOGIES INC

Mailing Address 891 AMSTERDAM AVE

City NEW YORK State NY Zip Code 10025

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.099

Date of Disbursement

02 / 07 / 2011

Amount of Each Disbursement this Period

3.64

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

UNITED AIRLINES

Mailing Address 1200 E ALGONQUIN RD

City ELK GROVE VILLAGE State IL Zip Code 60007

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.100

Date of Disbursement

02 / 07 / 2011

Amount of Each Disbursement this Period

98.00

[MEMO ITEM]

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 388 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

UNITED AIRLINES

Mailing Address 1200 E ALGONQUIN RD

City
ELK GROVE VILLAGE

State
IL

Zip Code
60007

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.101

Date of Disbursement

/ /

Amount of Each Disbursement this Period

421.70

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City
PHOENIX

State
AZ

Zip Code
85034

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.102

Date of Disbursement

/ /

Amount of Each Disbursement this Period

150.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City
PHOENIX

State
AZ

Zip Code
85034

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.103

Date of Disbursement

/ /

Amount of Each Disbursement this Period

165.00

[MEMO ITEM]

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.104

Date of Disbursement

02 / 07 / 2011

Amount of Each Disbursement this Period

337.70

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.105

Date of Disbursement

02 / 07 / 2011

Amount of Each Disbursement this Period

313.70

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.106

Date of Disbursement

02 / 07 / 2011

Amount of Each Disbursement this Period

313.70

[MEMO ITEM]

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 390 / 970

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) US AIRWAYS	Transaction ID: SB21B.107 Date of Disbursement
Mailing Address 4000 E SKY HARBOR BLVD	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 7 / 2 0 1 1</div> </div>
City PHOENIX State AZ Zip Code 85034	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL	<div>172.70</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
B. Full Name (Last, First, Middle Initial) USPS	Transaction ID: SB21B.055 Date of Disbursement
Mailing Address 25 DORCHESTER AVE	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 7 / 2 0 1 1</div> </div>
City BOSTON State MA Zip Code 02205	Amount of Each Disbursement this Period
Purpose of Disbursement POSTAGE	<div>18.80</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
C. Full Name (Last, First, Middle Initial) WHOLE FOODS MARKET CIR	Transaction ID: SB21B.109 Date of Disbursement
Mailing Address 10 COLUMBUS CIR STE SC101	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 7 / 2 0 1 1</div> </div>
City NEW YORK State NY Zip Code 10019	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSE	<div>10.89</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]

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 391 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

AMERICAN EXPRESS

Mailing Address PO BOX 2855

City
NEW YORK

State
NY

Zip Code
10116

Purpose of Disbursement
CREDIT CARD PAYMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.181

Date of Disbursement

/ /

Amount of Each Disbursement this Period

49921.91

SEE CHARGES BELOW

B.

Full Name (Last, First, Middle Initial)

ACADIANA

Mailing Address 901 NEW YRK AVE NW # 200A

City
WASHINGTON

State
DC

Zip Code
20001

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.279

Date of Disbursement

/ /

Amount of Each Disbursement this Period

9.60

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

ACADIANA

Mailing Address 901 NEW YRK AVE NW # 200A

City
WASHINGTON

State
DC

Zip Code
20001

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.280

Date of Disbursement

/ /

Amount of Each Disbursement this Period

195.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

49921.91

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)

PAGE 392 / 970

<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)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) ACE CAB	Transaction ID: SB21B.304 Date of Disbursement
Mailing Address 5010 SOUTH VALLEY VIEW BLVD	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 7 / 2 0 1 1</div> </div>
City LAS VEGAS State NV Zip Code 89118	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSE	<div>24.24</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
B. Full Name (Last, First, Middle Initial) ADOBE-MACROMEDIA	Transaction ID: SB21B.278 Date of Disbursement
Mailing Address 801 N 34TH ST	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 7 / 2 0 1 1</div> </div>
City SEATTLE State WA Zip Code 98103	Amount of Each Disbursement this Period
Purpose of Disbursement SOFTWARE PURCHASE	<div>477.06</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
C. Full Name (Last, First, Middle Initial) AIRCELL	Transaction ID: SB21B.219 Date of Disbursement
Mailing Address 303 S TECHNOLOGY CT	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 7 / 2 0 1 1</div> </div>
City BROOMFIELD State CO Zip Code 80021	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSE	<div>9.95</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]

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 393 / 970

<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)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) AMERICAN AIRLINES	Transaction ID: SB21B.284 Date of Disbursement																				
Mailing Address 7645 E 63RD ST, SUITE 600	<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>0</td><td>3</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	7		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	7		2	0	1	1												
City TULSA State OK Zip Code 74133	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL	<table border="1"> <tr> <td colspan="10">183.20</td> </tr> </table>	183.20																			
183.20																					
Candidate Name	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) ▼																				
B. Full Name (Last, First, Middle Initial) AMERICAN AIRLINES	Transaction ID: SB21B.285 Date of Disbursement																				
Mailing Address 7645 E 63RD ST, SUITE 600	<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>0</td><td>3</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	7		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	7		2	0	1	1												
City TULSA State OK Zip Code 74133	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL	<table border="1"> <tr> <td colspan="10">992.70</td> </tr> </table>	992.70																			
992.70																					
Candidate Name	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) ▼																				
C. Full Name (Last, First, Middle Initial) AMERICAN AIRLINES	Transaction ID: SB21B.286 Date of Disbursement																				
Mailing Address 7645 E 63RD ST, SUITE 600	<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>0</td><td>3</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	7		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	7		2	0	1	1												
City TULSA State OK Zip Code 74133	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL	<table border="1"> <tr> <td colspan="10">297.70</td> </tr> </table>	297.70																			
297.70																					
Candidate Name	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)

PAGE 394 / 970

<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)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) AMERICAN AIRLINES	Transaction ID: SB21B.287 Date of Disbursement																				
Mailing Address 7645 E 63RD ST, SUITE 600	<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>0</td><td>3</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	7		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	7		2	0	1	1												
City TULSA State OK Zip Code 74133	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL	<table border="1"> <tr> <td colspan="10">218.70</td> </tr> </table>	218.70																			
218.70																					
Candidate Name	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																			
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) BLUE ROOM RESTAURANT	Transaction ID: SB21B.192 Date of Disbursement																				
Mailing Address 2321 18TH ST NW	<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>0</td><td>3</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	7		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	7		2	0	1	1												
City WASHINGTON State DC Zip Code 20009	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE	<table border="1"> <tr> <td colspan="10">150.80</td> </tr> </table>	150.80																			
150.80																					
Candidate Name	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																			
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) BOJANGLES	Transaction ID: SB21B.249 Date of Disbursement																				
Mailing Address 5501 JOSH BIRMINGHAM PKWY	<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>0</td><td>3</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	7		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	7		2	0	1	1												
City CHARLOTTE State NC Zip Code 28208	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE	<table border="1"> <tr> <td colspan="10">4.69</td> </tr> </table>	4.69																			
4.69																					
Candidate Name	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																			
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)

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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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

BOSTON HARBOR HOTEL

Mailing Address 70 ROWES WHARF

City
BOSTON

State
MA

Zip Code
02110

Purpose of Disbursement
ROOM RENTAL AND CATERING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.274

Date of Disbursement

03 / 07 / 2011

Amount of Each Disbursement this Period

3876.54

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

C P A C

Mailing Address 1007 CAMERON ST

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
REGISTRATION FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.184

Date of Disbursement

03 / 07 / 2011

Amount of Each Disbursement this Period

625.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

COURTYARD BY MARRIOTT

Mailing Address 1900 CONNECTICUT AVE NW

City
WASHINGTON

State
DC

Zip Code
20009

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.191

Date of Disbursement

03 / 07 / 2011

Amount of Each Disbursement this Period

367.11

[MEMO ITEM]

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

DELTA AIR LINES

Mailing Address ATLANTA AIRPORT

City ATLANTA State GA Zip Code 30344

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.288

Date of Disbursement

03 / 07 / 2011

Amount of Each Disbursement this Period

114.70

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

DELTA AIR LINES

Mailing Address ATLANTA AIRPORT

City ATLANTA State GA Zip Code 30344

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.289

Date of Disbursement

03 / 07 / 2011

Amount of Each Disbursement this Period

426.20

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

DELTA AIR LINES

Mailing Address ATLANTA AIRPORT

City ATLANTA State GA Zip Code 30344

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.290

Date of Disbursement

03 / 07 / 2011

Amount of Each Disbursement this Period

68.20

[MEMO ITEM]

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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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

DELTA AIR LINES

Mailing Address ATLANTA AIRPORT

City
ATLANTA

State
GA

Zip Code
30344

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.291

Date of Disbursement

/ /

Amount of Each Disbursement this Period

555.50

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

DELTA AIR LINES

Mailing Address ATLANTA AIRPORT

City
ATLANTA

State
GA

Zip Code
30344

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.292

Date of Disbursement

/ /

Amount of Each Disbursement this Period

337.70

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

EMPIRE HOTEL

Mailing Address 44 W 63RD ST

City
NEW YORK

State
NY

Zip Code
10023

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.247

Date of Disbursement

/ /

Amount of Each Disbursement this Period

999.18

[MEMO ITEM]

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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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

ENRGI CATERING

Mailing Address 555 ZANG ST STE 300

City
LAKEWOOD

State
CO

Zip Code
80228

Purpose of Disbursement
CATERING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.251

Date of Disbursement

/ /

Amount of Each Disbursement this Period

801.17

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

FEDEX OFFICE

Mailing Address 2660 WOODLEY RD NW

City
WASHINGTON

State
DC

Zip Code
20008

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.208

Date of Disbursement

/ /

Amount of Each Disbursement this Period

30.72

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

FEDEX OFFICE

Mailing Address 2660 WOODLEY RD NW

City
WASHINGTON

State
DC

Zip Code
20008

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.209

Date of Disbursement

/ /

Amount of Each Disbursement this Period

59.29

[MEMO ITEM]

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)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) FEDEX OFFICE	Transaction ID: SB21B.211 Date of Disbursement																				
Mailing Address 2660 WOODLEY RD NW	<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>0</td><td>3</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	7		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	7		2	0	1	1												
City WASHINGTON State DC Zip Code 20008	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE	<table border="1"> <tr> <td colspan="10">9.69</td> </tr> </table>	9.69																			
9.69																					
Candidate Name	[MEMO ITEM]																				
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) ▼																				
B. Full Name (Last, First, Middle Initial) FEDEX OFFICE	Transaction ID: SB21B.212 Date of Disbursement																				
Mailing Address 2660 WOODLEY RD NW	<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>0</td><td>3</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	7		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	7		2	0	1	1												
City WASHINGTON State DC Zip Code 20008	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE	<table border="1"> <tr> <td colspan="10">12.72</td> </tr> </table>	12.72																			
12.72																					
Candidate Name	[MEMO ITEM]																				
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) ▼																				
C. Full Name (Last, First, Middle Initial) FEDEX OFFICE	Transaction ID: SB21B.213 Date of Disbursement																				
Mailing Address 2660 WOODLEY RD NW	<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>0</td><td>3</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	7		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	7		2	0	1	1												
City WASHINGTON State DC Zip Code 20008	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE	<table border="1"> <tr> <td colspan="10">42.57</td> </tr> </table>	42.57																			
42.57																					
Candidate Name	[MEMO ITEM]																				
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)

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

Free and Strong America PAC, Inc.

[MEMO ITEM]

[MEMO ITEM]

[MEMO ITEM]

FEC Schedule B (Form 3X) (Revised 02/2003)

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 401 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

GBC BLUE

Mailing Address 5721 SE COLUMBIA WAY
SUITE 190

City VANCOUVER State WA Zip Code 98661

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.300

Date of Disbursement

03 / 07 / 2011

Amount of Each Disbursement this Period

11.91

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

GORDON BIRSCH

Mailing Address REAGAN AIRPORT TERMINAL A RM 278

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.298

Date of Disbursement

03 / 07 / 2011

Amount of Each Disbursement this Period

10.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

GRAND AMERICA

Mailing Address 555 S MAIN ST

City SALT LAKE CITY State UT Zip Code 84111

Purpose of Disbursement
ROOM RENTAL AND CATERING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.250

Date of Disbursement

03 / 07 / 2011

Amount of Each Disbursement this Period

881.44

[MEMO ITEM]

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)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) HERTZ	Transaction ID: SB21B.293 Date of Disbursement
Mailing Address 14501 HERTZ QUAIL SPGS PK	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 7 / 2 0 1 1</div> </div>
City OKLAHOMA CITY State OK Zip Code 73134	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSE	<div>610.10</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
B. Full Name (Last, First, Middle Initial) INNEMOTION ENTERTAINM CO	Transaction ID: SB21B.248 Date of Disbursement
Mailing Address 4801 EXECUTIVE PARK CT	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 7 / 2 0 1 1</div> </div>
City JACKSONVILLE State FL Zip Code 32216	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSE	<div>21.85</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
C. Full Name (Last, First, Middle Initial) JETBLUE AIRWAYS	Transaction ID: SB21B.256 Date of Disbursement
Mailing Address 6322 S 3000 E STE G10	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 7 / 2 0 1 1</div> </div>
City SALT LAKE CITY State UT Zip Code 84121	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL	<div>205.70</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City
SALT LAKE CITY

State
UT

Zip Code
84121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.257

Date of Disbursement

/ /

Amount of Each Disbursement this Period

205.70

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City
SALT LAKE CITY

State
UT

Zip Code
84121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.258

Date of Disbursement

/ /

Amount of Each Disbursement this Period

175.70

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City
SALT LAKE CITY

State
UT

Zip Code
84121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.259

Date of Disbursement

/ /

Amount of Each Disbursement this Period

20.00

[MEMO ITEM]

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 404 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City
SALT LAKE CITY

State
UT

Zip Code
84121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.260

Date of Disbursement

/ /

Amount of Each Disbursement this Period

205.70

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City
SALT LAKE CITY

State
UT

Zip Code
84121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.261

Date of Disbursement

/ /

Amount of Each Disbursement this Period

20.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City
SALT LAKE CITY

State
UT

Zip Code
84121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.262

Date of Disbursement

/ /

Amount of Each Disbursement this Period

135.70

[MEMO ITEM]

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 405 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City
SALT LAKE CITY

State
UT

Zip Code
84121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.263

Date of Disbursement

/ /

Amount of Each Disbursement this Period

20.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City
SALT LAKE CITY

State
UT

Zip Code
84121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.264

Date of Disbursement

/ /

Amount of Each Disbursement this Period

20.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City
SALT LAKE CITY

State
UT

Zip Code
84121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.265

Date of Disbursement

/ /

Amount of Each Disbursement this Period

20.00

[MEMO ITEM]

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 406 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City
SALT LAKE CITY

State
UT

Zip Code
84121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.266

Date of Disbursement

/ /

Amount of Each Disbursement this Period

20.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City
SALT LAKE CITY

State
UT

Zip Code
84121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.267

Date of Disbursement

/ /

Amount of Each Disbursement this Period

99.70

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City
SALT LAKE CITY

State
UT

Zip Code
84121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.268

Date of Disbursement

/ /

Amount of Each Disbursement this Period

99.70

[MEMO ITEM]

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 407 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City
SALT LAKE CITY

State
UT

Zip Code
84121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.269

Date of Disbursement

/ /

Amount of Each Disbursement this Period

99.70

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City
SALT LAKE CITY

State
UT

Zip Code
84121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.270

Date of Disbursement

/ /

Amount of Each Disbursement this Period

133.70

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City
SALT LAKE CITY

State
UT

Zip Code
84121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.271

Date of Disbursement

/ /

Amount of Each Disbursement this Period

133.70

[MEMO ITEM]

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 PageFOR LINE NUMBER:
(check only one)

PAGE 408 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City
SALT LAKE CITYState
UTZip Code
84121Purpose of Disbursement
TRAVEL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.272

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	7		2	0	1	1

Amount of Each Disbursement this Period

133.70

[MEMO ITEM]**B.**

Full Name (Last, First, Middle Initial)

JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City
SALT LAKE CITYState
UTZip Code
84121Purpose of Disbursement
TRAVEL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.273

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	7		2	0	1	1

Amount of Each Disbursement this Period

178.70

[MEMO ITEM]**C.**

Full Name (Last, First, Middle Initial)

MARRIOTT

Mailing Address 1331 PENNSYLVANIA

City
WASHINGTONState
DCZip Code
20004Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.188

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	7		2	0	1	1

Amount of Each Disbursement this Period

1583.40

[MEMO ITEM]**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)
Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)
MARRIOTT

Mailing Address 2660 WOODLEY RD NW

City WASHINGTON State DC Zip Code 20008

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.205

Date of Disbursement

03 / 07 / 2011

Amount of Each Disbursement this Period

1425.08

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
MARRIOTT

Mailing Address 2660 WOODLEY RD NW

City WASHINGTON State DC Zip Code 20008

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.206

Date of Disbursement

03 / 07 / 2011

Amount of Each Disbursement this Period

950.69

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
MARRIOTT

Mailing Address 2660 WOODLEY RD NW

City WASHINGTON State DC Zip Code 20008

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.207

Date of Disbursement

03 / 07 / 2011

Amount of Each Disbursement this Period

992.04

[MEMO ITEM]

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 410 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MARRIOTT

Mailing Address 2660 WOODLEY RD NW

City
WASHINGTON

State
DC

Zip Code
20008

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.215

Date of Disbursement

03 / 07 / 2011

Amount of Each Disbursement this Period

41.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

MARRIOTT

Mailing Address 630 CLEARWATER PARK RD

City
WEST PALM BEACH

State
FL

Zip Code
33401

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.252

Date of Disbursement

03 / 07 / 2011

Amount of Each Disbursement this Period

287.49

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

MARRIOTT

Mailing Address 630 CLEARWATER PARK RD

City
WEST PALM BEACH

State
FL

Zip Code
33401

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.253

Date of Disbursement

03 / 07 / 2011

Amount of Each Disbursement this Period

287.49

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

Free and Strong America PAC, Inc.

[MEMO ITEM]

[MEMO ITEM]

[MEMO ITEM]

FEC Schedule B (Form 3X) (Revised 02/2003)

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 412 / 970

<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)
Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)
MARRIOTT

Mailing Address 75 S WEST TEMPLE

City State Zip Code
SALT LAKE CITY UT 84101

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.277

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4.26

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
MARRIOTT

Mailing Address 1895 SIDEWINDER DR

City State Zip Code
PARK CITY UT 84060

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.294

Date of Disbursement

/ /

Amount of Each Disbursement this Period

231.89

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
MASS PORT LOGAN PARKING

Mailing Address 1 HARBORSIDE DR STE 200S

City State Zip Code
BOSTON MA 02128

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.182

Date of Disbursement

/ /

Amount of Each Disbursement this Period

48.00

[MEMO ITEM]

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MASS PORT LOGAN PARKING

Mailing Address 1 HARBORSIDE DR STE 200S

City
BOSTON

State
MA

Zip Code
02128

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.183

Date of Disbursement

/

Amount of Each Disbursement this Period

24.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

MINDSHIFT TECHNOLOGIES

Mailing Address 3975 FAIR RIDGE DR # S200

City
FAIRFAX

State
VA

Zip Code
22033

Purpose of Disbursement
COMPUTER PURCHASE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.227

Date of Disbursement

/

Amount of Each Disbursement this Period

6025.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

MONTAGE DEER VALLEY

Mailing Address 9100 MARSAC AVE

City
PARK CITY

State
UT

Zip Code
84060

Purpose of Disbursement
ROOM RENTAL AND CATERING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.281

Date of Disbursement

/

Amount of Each Disbursement this Period

4101.58

[MEMO ITEM]

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 414 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

OMNI SHOREHAM HOTEL

Mailing Address 2500 CALVERT ST NW

City
WASHINGTON

State
DC

Zip Code
20008

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.194

Date of Disbursement

/ /

Amount of Each Disbursement this Period

7.50

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

OMNI SHOREHAM HOTEL

Mailing Address 2500 CALVERT ST NW

City
WASHINGTON

State
DC

Zip Code
20008

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.195

Date of Disbursement

/ /

Amount of Each Disbursement this Period

182.06

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

OMNI SHOREHAM HOTEL

Mailing Address 2500 CALVERT ST NW

City
WASHINGTON

State
DC

Zip Code
20008

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.196

Date of Disbursement

/ /

Amount of Each Disbursement this Period

42.30

[MEMO ITEM]

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

OMNI SHOREHAM HOTEL

Mailing Address 2500 CALVERT ST NW

City
WASHINGTON

State
DC

Zip Code
20008

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.197

Date of Disbursement

/ /

Amount of Each Disbursement this Period

342.36

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

OMNI SHOREHAM HOTEL

Mailing Address 2500 CALVERT ST NW

City
WASHINGTON

State
DC

Zip Code
20008

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.198

Date of Disbursement

/ /

Amount of Each Disbursement this Period

342.36

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

OMNI SHOREHAM HOTEL

Mailing Address 2500 CALVERT ST NW

City
WASHINGTON

State
DC

Zip Code
20008

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.199

Date of Disbursement

/ /

Amount of Each Disbursement this Period

342.36

[MEMO ITEM]

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

OMNI SHOREHAM HOTEL

Mailing Address 2500 CALVERT ST NW

City
WASHINGTON

State
DC

Zip Code
20008

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.200

Date of Disbursement

/ /

Amount of Each Disbursement this Period

366.06

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

OMNI SHOREHAM HOTEL

Mailing Address 2500 CALVERT ST NW

City
WASHINGTON

State
DC

Zip Code
20008

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.201

Date of Disbursement

/ /

Amount of Each Disbursement this Period

373.72

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

OMNI SHOREHAM HOTEL

Mailing Address 2500 CALVERT ST NW

City
WASHINGTON

State
DC

Zip Code
20008

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.202

Date of Disbursement

/ /

Amount of Each Disbursement this Period

712.92

[MEMO ITEM]

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

OMNI SHOREHAM HOTEL

Mailing Address 2500 CALVERT ST NW

City
WASHINGTON

State
DC

Zip Code
20008

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.203

Date of Disbursement

/ /

Amount of Each Disbursement this Period

783.22

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

OMNI SHOREHAM HOTEL

Mailing Address 2500 CALVERT ST NW

City
WASHINGTON

State
DC

Zip Code
20008

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.204

Date of Disbursement

/ /

Amount of Each Disbursement this Period

342.36

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

OPEN CITY RESTAURANT

Mailing Address 2331 CALVERT ST NW

City
WASHINGTON

State
DC

Zip Code
20008

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.193

Date of Disbursement

/ /

Amount of Each Disbursement this Period

57.26

[MEMO ITEM]

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

PATROON

Mailing Address 160 E 46TH ST

City
NEW YORK

State
NY

Zip Code
10017

Purpose of Disbursement
MEETING EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.190

Date of Disbursement

/ /

Amount of Each Disbursement this Period

6488.20

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

PIZZA BOLIS

Mailing Address 1511 U ST NW

City
WASHINGTON

State
DC

Zip Code
20009

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.189

Date of Disbursement

/ /

Amount of Each Disbursement this Period

94.16

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

PROVENCE BOGIES

Mailing Address 32001 AGOURA RD

City
WESTLAKE VILLAGE

State
CA

Zip Code
91361

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.221

Date of Disbursement

/ /

Amount of Each Disbursement this Period

39.38

[MEMO ITEM]

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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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) PROVENCE BOGIES	Transaction ID: SB21B.222
Mailing Address 32001 AGOURA RD	Date of Disbursement
City WESTLAKE VILLAGE State CA Zip Code 91361	<div> <div>03</div> <div>07</div> <div>2011</div> </div>
Purpose of Disbursement TRAVEL EXPENSE	Amount of Each Disbursement this Period
Candidate Name	<div>354.93</div>
<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	[MEMO ITEM]
B. Full Name (Last, First, Middle Initial) ROADHOUSE 66	Transaction ID: SB21B.225
Mailing Address 3400 SKY HARBOR BLVD	Date of Disbursement
City PHOENIX State AZ Zip Code 85034	<div> <div>03</div> <div>07</div> <div>2011</div> </div>
Purpose of Disbursement TRAVEL EXPENSE	Amount of Each Disbursement this Period
Candidate Name	<div>15.59</div>
<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	[MEMO ITEM]
C. Full Name (Last, First, Middle Initial) RSVP PARTY RENTAL INC	Transaction ID: SB21B.275
Mailing Address 709 N 400 W SUITE 2	Date of Disbursement
City N. SALT LAKE CITY State UT Zip Code 84054	<div> <div>03</div> <div>07</div> <div>2011</div> </div>
Purpose of Disbursement EVENT SUPPLIES FOR PAC	Amount of Each Disbursement this Period
Candidate Name	<div>231.06</div>
<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	[MEMO ITEM]

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

SILVERSTONE AMENITY CENTER

Mailing Address 3405 E OVERLAND RD STE 15

City
MERIDIAN

State
ID

Zip Code
83642

Purpose of Disbursement
MEETING EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.226

Date of Disbursement

Amount of Each Disbursement this Period

798.06

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

SOUTHWEST AIRLINES

Mailing Address PO BOX 36611

City
DALLAS

State
TX

Zip Code
75235

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.295

Date of Disbursement

Amount of Each Disbursement this Period

198.70

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

SOUTHWEST AIRLINES

Mailing Address PO BOX 36611

City
DALLAS

State
TX

Zip Code
75235

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.296

Date of Disbursement

Amount of Each Disbursement this Period

503.40

[MEMO ITEM]

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)

Free and Strong America PAC, Inc.

<p>A.</p> <p>Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES</p> <p>Mailing Address PO BOX 36611</p> <p>City DALLAS State TX Zip Code 75235</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.297</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 7 / 2 0 1 1</div> </div> </p> <p>Amount of Each Disbursement this Period <div>155.70</div> </p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) STARBUCKS</p> <p>Mailing Address TERMINAL B</p> <p>City EAST BOSTON State MA Zip Code 02128</p> <p>Purpose of Disbursement TRAVEL EXPENSE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.301</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 7 / 2 0 1 1</div> </div> </p> <p>Amount of Each Disbursement this Period <div>4.60</div> </p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) TALKPATH LLC</p> <p>Mailing Address 3155 E PATRICK LN SUITE 1</p> <p>City LAS VEGAS State NV Zip Code 89120</p> <p>Purpose of Disbursement TRAVEL EXPENSE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.220</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 7 / 2 0 1 1</div> </div> </p> <p>Amount of Each Disbursement this Period <div>93.62</div> </p> <p>[MEMO ITEM]</p>

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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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

TAXIPASSVEGAS.COM

Mailing Address 92 HORATIO ST APT 2A

City
NEW YORK

State
NY

Zip Code
10014

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.282

Date of Disbursement

/ /

Amount of Each Disbursement this Period

40.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

TAXIPASSVEGAS.COM

Mailing Address 92 HORATIO ST APT 2A

City
NEW YORK

State
NY

Zip Code
10014

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.283

Date of Disbursement

/ /

Amount of Each Disbursement this Period

46.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

TERRACE RESTAURANT

Mailing Address TERMINAL ONE 3RD FLOOR

City
SALT LAKE CITY

State
UT

Zip Code
84122

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.303

Date of Disbursement

/ /

Amount of Each Disbursement this Period

29.20

[MEMO ITEM]

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 423 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

THE BILTMORE HOTEL

Mailing Address 1200 ANASTASIA AVE

City
CORAL GABLES

State
FL

Zip Code
33134

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.185

Date of Disbursement

/ /

Amount of Each Disbursement this Period

321.58

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

THE SUPPLIES GUYS

Mailing Address 268 GREENWOOD AVE

City
MIDLAND PARK

State
NJ

Zip Code
07432

Purpose of Disbursement
EVENT EXPENSE FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.218

Date of Disbursement

/ /

Amount of Each Disbursement this Period

413.65

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

TRAVEL TRADERS

Mailing Address 2660 WOODLEY RD NW

City
WASHINGTON

State
DC

Zip Code
20008

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.210

Date of Disbursement

/ /

Amount of Each Disbursement this Period

8.48

[MEMO ITEM]

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 424 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

TRAVEL TRADERS

Mailing Address 2660 WOODLEY RD NW

City
WASHINGTON

State
DC

Zip Code
20008

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.216

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4.23

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

TRAVEL TRADERS

Mailing Address 2660 WOODLEY RD NW

City
WASHINGTON

State
DC

Zip Code
20008

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.217

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4.23

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

UNITED AIRLINES

Mailing Address 1200 E ALGONQUIN RD

City
ELK GROVE VILLAGE

State
IL

Zip Code
60007

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.186

Date of Disbursement

/ /

Amount of Each Disbursement this Period

215.70

[MEMO ITEM]

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 425 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

UNITED AIRLINES

Mailing Address 1200 E ALGONQUIN RD

City
ELK GROVE VILLAGE

State
IL

Zip Code
60007

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.187

Date of Disbursement

/ /

Amount of Each Disbursement this Period

245.70

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City
PHOENIX

State
AZ

Zip Code
85034

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.228

Date of Disbursement

/ /

Amount of Each Disbursement this Period

10.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City
PHOENIX

State
AZ

Zip Code
85034

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.229

Date of Disbursement

/ /

Amount of Each Disbursement this Period

378.20

[MEMO ITEM]

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City
PHOENIX

State
AZ

Zip Code
85034

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.230

Date of Disbursement

/ /

Amount of Each Disbursement this Period

50.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City
PHOENIX

State
AZ

Zip Code
85034

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.231

Date of Disbursement

/ /

Amount of Each Disbursement this Period

67.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City
PHOENIX

State
AZ

Zip Code
85034

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.232

Date of Disbursement

/ /

Amount of Each Disbursement this Period

150.00

[MEMO ITEM]

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.233

Date of Disbursement

03 / 07 / 2011

Amount of Each Disbursement this Period

341.40

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.234

Date of Disbursement

03 / 07 / 2011

Amount of Each Disbursement this Period

135.70

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.235

Date of Disbursement

03 / 07 / 2011

Amount of Each Disbursement this Period

99.70

[MEMO ITEM]

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 428 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.236

Date of Disbursement

03 / 07 / 2011

Amount of Each Disbursement this Period

99.70

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.237

Date of Disbursement

03 / 07 / 2011

Amount of Each Disbursement this Period

124.70

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.238

Date of Disbursement

03 / 07 / 2011

Amount of Each Disbursement this Period

137.40

[MEMO ITEM]

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 429 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.239

Date of Disbursement

03 / 07 / 2011

Amount of Each Disbursement this Period

227.80

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.240

Date of Disbursement

03 / 07 / 2011

Amount of Each Disbursement this Period

317.80

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.241

Date of Disbursement

03 / 07 / 2011

Amount of Each Disbursement this Period

591.10

[MEMO ITEM]

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 430 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.242

Date of Disbursement

/ /

Amount of Each Disbursement this Period

24.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.243

Date of Disbursement

/ /

Amount of Each Disbursement this Period

798.70

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.244

Date of Disbursement

/ /

Amount of Each Disbursement this Period

407.40

[MEMO ITEM]

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 431 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

US AIRWAYS

Mailing Address 4000 E. SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.245

Date of Disbursement

03 / 07 / 2011

Amount of Each Disbursement this Period

8.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

US AIRWAYS

Mailing Address 4000 E. SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.246

Date of Disbursement

03 / 07 / 2011

Amount of Each Disbursement this Period

8.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

VENETIAN/PALAZZO

Mailing Address 3355 LAS VEGAS BLVD S

City LAS VEGAS State NV Zip Code 89109

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.223

Date of Disbursement

03 / 07 / 2011

Amount of Each Disbursement this Period

275.93

[MEMO ITEM]

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 432 / 970

<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)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) VENETIAN/PALAZZO	Transaction ID: SB21B.224 Date of Disbursement																				
Mailing Address 3355 LAS VEGAS BLVD S	<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>0</td><td>3</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	7		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	7		2	0	1	1												
City LAS VEGAS State NV Zip Code 89109	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE	<table border="1"> <tr> <td colspan="10">166.88</td> </tr> </table>	166.88																			
166.88																					
Candidate Name	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) ▼																				
B. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS	Transaction ID: SB21B.359 Date of Disbursement																				
Mailing Address PO BOX 2855	<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>0</td><td>3</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	2		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	2		2	0	1	1												
City NEW YORK State NY Zip Code 10116	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE	<table border="1"> <tr> <td colspan="10">228.85</td> </tr> </table>	228.85																			
228.85																					
Candidate Name	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) ▼																				
C. Full Name (Last, First, Middle Initial) ATLANTA MARRIOTT BUCKHEAD HOTEL AND CONFERENCE CENTER	Transaction ID: SB21B.360 Date of Disbursement																				
Mailing Address 3405 LENOX ROAD NE	<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>0</td><td>3</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	2		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	2		2	0	1	1												
City ATLANTA State GA Zip Code 30326	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL	<table border="1"> <tr> <td colspan="10">228.85</td> </tr> </table>	228.85																			
228.85																					
Candidate Name	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]

SEE CHARGES BELOW

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

228.85

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 PageFOR LINE NUMBER:
(check only one)

PAGE 433 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

AMERICAN EXPRESS

Mailing Address PO BOX 2855

City
NEW YORKState
NYZip Code
10116Purpose of Disbursement
CREDIT CARD PAYMENT

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.397

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	0		2	0	1	1

Amount of Each Disbursement this Period

95708.18

SEE CHARGES BELOW

B.

Full Name (Last, First, Middle Initial)

6 COLUMBUS

Mailing Address 6 COLUMBUS CIR

City
NEW YORKState
NYZip Code
10019Purpose of Disbursement
MEETING EXPENSE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.398

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	0		2	0	1	1

Amount of Each Disbursement this Period

465.43

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

AMERICAN AIRLINES

Mailing Address 7645 E 63RD ST, SUITE 600

City
TULSAState
OKZip Code
74133Purpose of Disbursement
TRAVEL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.401

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	0		2	0	1	1

Amount of Each Disbursement this Period

633.40

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

95708.18

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

AMERICAN AIRLINES

Mailing Address 7645 E 63RD ST, SUITE 600

City
TULSA

State
OK

Zip Code
74133

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.402

Date of Disbursement

/ /

Amount of Each Disbursement this Period

455.70

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

AMERICAN AIRLINES

Mailing Address 7645 E 63RD ST, SUITE 600

City
TULSA

State
OK

Zip Code
74133

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.403

Date of Disbursement

/ /

Amount of Each Disbursement this Period

356.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

AMERICAN AIRLINES

Mailing Address 7681 E GRAY RD

City
SCOTTSDALE

State
AZ

Zip Code
85260

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.404

Date of Disbursement

/ /

Amount of Each Disbursement this Period

16.50

[MEMO ITEM]

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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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) AMERICAN AIRLINES	Transaction ID: SB21B.529 Date of Disbursement
Mailing Address 7645 E 63RD ST, SUITE 600	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 0 / 2 0 1 1</div> </div>
City TULSA State OK Zip Code 74133	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSE	<div> <div></div> <div>4.49</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
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) ▼
B. Full Name (Last, First, Middle Initial) AMERICAN TRAFFIC SOLUTION	Transaction ID: SB21B.405 Date of Disbursement
Mailing Address 7681 E GRAY RD	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 0 / 2 0 1 1</div> </div>
City SCOTTSDALE State AZ Zip Code 85260	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSE	<div> <div></div> <div>6.28</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
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) ▼
C. Full Name (Last, First, Middle Initial) AMERICAN TRAFFIC SOLUTION	Transaction ID: SB21B.406 Date of Disbursement
Mailing Address 7681 E GRAY RD	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 0 / 2 0 1 1</div> </div>
City SCOTTSDALE State AZ Zip Code 85260	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSE	<div> <div></div> <div>3.70</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
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)

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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)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) AMTRAK <hr/> Mailing Address 60 MASSACHUSETTS AVE NE	Transaction ID: SB21B.407 Date of Disbursement <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>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	1	1												
City WASHINGTON State DC Zip Code 20002 Purpose of Disbursement TRAVEL Candidate Name <div style="border: 1px solid black; width: 50px; height: 20px; margin: 5px auto;"></div> Category/Type 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:	Amount of Each Disbursement this Period <div style="border: 1px solid black; width: 100%; text-align: right; padding-right: 10px;">131.00</div> [MEMO ITEM]																				
B. Full Name (Last, First, Middle Initial) AMTRAK <hr/> Mailing Address 60 MASSACHUSETTS AVE NE	Transaction ID: SB21B.408 Date of Disbursement <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>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	1	1												
City WASHINGTON State DC Zip Code 20002 Purpose of Disbursement TRAVEL Candidate Name <div style="border: 1px solid black; width: 50px; height: 20px; margin: 5px auto;"></div> Category/Type 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:	Amount of Each Disbursement this Period <div style="border: 1px solid black; width: 100%; text-align: right; padding-right: 10px;">131.00</div> [MEMO ITEM]																				
C. Full Name (Last, First, Middle Initial) AMTRAK <hr/> Mailing Address 60 MASSACHUSETTS AVE NE	Transaction ID: SB21B.409 Date of Disbursement <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>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	1	1												
City WASHINGTON State DC Zip Code 20002 Purpose of Disbursement TRAVEL Candidate Name <div style="border: 1px solid black; width: 50px; height: 20px; margin: 5px auto;"></div> Category/Type 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:	Amount of Each Disbursement this Period <div style="border: 1px solid black; width: 100%; text-align: right; padding-right: 10px;">162.00</div> [MEMO ITEM]																				

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

APPLE

Mailing Address 75 MIDDLESEX TURNPIKE

City
BURLINGTON

State
MA

Zip Code
01803

Purpose of Disbursement
EQUIPMENT PURCHASE FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.410

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

827.63

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

ARAMARK SERVICES CO

Mailing Address BANK ONE PLZ

City
CHICAGO

State
IL

Zip Code
60670

Purpose of Disbursement
WEB SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.411

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

8.47

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

AT&T

Mailing Address 12525 CINGULAR WAY

City
ALPHARETTA

State
GA

Zip Code
30004

Purpose of Disbursement
DATA SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.412

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

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 PageFOR LINE NUMBER:
(check only one)

PAGE 438 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

AT&T

Mailing Address 12525 CINGULAR WAY

City
ALPHARETTAState
GAZip Code
30004Purpose of Disbursement
DATA SERVICES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.413

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	0	/	2	0	1	1

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]**B.**

Full Name (Last, First, Middle Initial)

AT&T

Mailing Address 12525 CINGULAR WAY

City
ALPHARETTAState
GAZip Code
30004Purpose of Disbursement
DATA SERVICES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.414

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	0	/	2	0	1	1

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]**C.**

Full Name (Last, First, Middle Initial)

AU BON PAIN CAFE

Mailing Address PHILADELPHIA INT AIRPORT TERMINAL

City
PHILADELPHIAState
PAZip Code
19153Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.415

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	0	/	2	0	1	1

Amount of Each Disbursement this Period

6.72

[MEMO ITEM]**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 439 / 970

<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)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) AU BON PAIN CAFE	Transaction ID: SB21B.416 Date of Disbursement
Mailing Address LOGAN C AIRSIDE PIER B LOGAN AIRPO	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 0 / 2 0 1 1</div> </div>
City BOSTON State MA Zip Code 02128	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSE	<div> <div></div> <div>5.34</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
B. Full Name (Last, First, Middle Initial) AVIS RENT A CAR CORP	Transaction ID: SB21B.417 Date of Disbursement
Mailing Address CORR./FIN. ADDRESS	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 0 / 2 0 1 1</div> </div>
City GARDEN CITY State NY Zip Code 11530	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSE	<div> <div></div> <div>677.92</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
C. Full Name (Last, First, Middle Initial) BAJA FRESH	Transaction ID: SB21B.418 Date of Disbursement
Mailing Address 220 MIRACLE MILE STE 230	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 0 / 2 0 1 1</div> </div>
City CORAL GABLES State FL Zip Code 33134	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSE	<div> <div></div> <div>9.48</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]

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 440 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

BERGHOFF CAFE

Mailing Address OHARE UNITED TERMINAL C CONCOURSE

City
CHICAGO

State
IL

Zip Code
60666

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.419

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

10.10

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

BEST BUY

Mailing Address 769 DONALD LYNCH BLVD

City
MARLBOROUGH

State
MA

Zip Code
01752

Purpose of Disbursement
EQUIPMENT PURCHASE FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.420

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

198.87

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

BOBBY VAN'S STEAKHOUSE

Mailing Address 809 15TH ST NW

City
WASHINGTON

State
DC

Zip Code
20005

Purpose of Disbursement
MEETING EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.421

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

944.05

[MEMO ITEM]

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 441 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

BOBBY VAN'S STEAKHOUSE

Mailing Address 809 15TH ST NW

City
WASHINGTON

State
DC

Zip Code
20005

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.422

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

17.30

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

BOSTON COACH CORP

Mailing Address 70 FARGO ST

City
BOSTON

State
MA

Zip Code
02210

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.423

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

479.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

BOSTON TAXI

Mailing Address 3703 21ST ST

City
LONG ISLAND CITY

State
NY

Zip Code
11101

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.424

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

29.88

[MEMO ITEM]

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 442 / 970

<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)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) BOSTON TAXI	Transaction ID: SB21B.425 Date of Disbursement																				
Mailing Address 3703 21ST ST	<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>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	1	1												
City LONG ISLAND CITY State NY Zip Code 11101	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE	<table border="1"> <tr> <td colspan="10">28.63</td> </tr> </table>	28.63																			
28.63																					
Candidate Name	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) ▼																				
B. Full Name (Last, First, Middle Initial) BOSTON TAXI	Transaction ID: SB21B.426 Date of Disbursement																				
Mailing Address 3703 21ST ST	<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>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	1	1												
City LONG ISLAND CITY State NY Zip Code 11101	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE	<table border="1"> <tr> <td colspan="10">24.19</td> </tr> </table>	24.19																			
24.19																					
Candidate Name	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) ▼																				
C. Full Name (Last, First, Middle Initial) BOSTON TAXI	Transaction ID: SB21B.427 Date of Disbursement																				
Mailing Address 3703 21ST ST	<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>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	1	1												
City LONG ISLAND CITY State NY Zip Code 11101	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE	<table border="1"> <tr> <td colspan="10">27.13</td> </tr> </table>	27.13																			
27.13																					
Candidate Name	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)

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

Free and Strong America PAC, Inc.

[MEMO ITEM]

[MEMO ITEM]

[MEMO ITEM]

FEC Schedule B (Form 3X) (Revised 02/2003)

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 444 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

BUSINESS CENTER SERV

Mailing Address 1392 BORREGAS AVENUE

City SUNNYVALE State CA Zip Code 94089

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.432

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

20.76

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

BUSINESS CENTER SERV

Mailing Address 1392 BORREGAS AVENUE

City SUNNYVALE State CA Zip Code 94089

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.433

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

45.88

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

CHECKERED CAB

Mailing Address 103 FULKERSON ST

City CAMBRIDGE State MA Zip Code 02141

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.435

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

28.00

[MEMO ITEM]

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 445 / 970

<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)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) CHECKERED CAB	Transaction ID: SB21B.436 Date of Disbursement																				
Mailing Address 103 FULKERSON ST	<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>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	1	1												
City CAMBRIDGE State MA Zip Code 02141	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE	<table border="1"> <tr> <td colspan="10">28.60</td> </tr> </table>	28.60																			
28.60																					
Candidate Name	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) ▼																				
B. Full Name (Last, First, Middle Initial) CHEDDARS	Transaction ID: SB21B.437 Date of Disbursement																				
Mailing Address 201 ALEWIFE BROOK PKWY	<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>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	1	1												
City CAMBRIDGE State MA Zip Code 02138	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE	<table border="1"> <tr> <td colspan="10">40.66</td> </tr> </table>	40.66																			
40.66																					
Candidate Name	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) ▼																				
C. Full Name (Last, First, Middle Initial) CHEEBURGER CHEEBURGER	Transaction ID: SB21B.438 Date of Disbursement																				
Mailing Address 460 S. ROSEMARY AVE.	<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>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	1	1												
City WEST PALM BEACH State FL Zip Code 33401	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE	<table border="1"> <tr> <td colspan="10">16.72</td> </tr> </table>	16.72																			
16.72																					
Candidate Name	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)

PAGE 446 / 970

<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)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) CHILI'S	Transaction ID: SB21B.439 Date of Disbursement																				
Mailing Address PBI AIRPORT, BLDG 1000	<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>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	1	1												
City WEST PALM BEACH State FL Zip Code 33406	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE	<table border="1"> <tr> <td colspan="10">11.61</td> </tr> </table>	11.61																			
11.61																					
Candidate Name	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) ▼																				
B. Full Name (Last, First, Middle Initial) CHIVES CATERING	Transaction ID: SB21B.440 Date of Disbursement																				
Mailing Address 801 38TH AVE NE	<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>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	1	1												
City SAINT PETERSBURG State FL Zip Code 33704	Amount of Each Disbursement this Period																				
Purpose of Disbursement CATERING FOR PAC	<table border="1"> <tr> <td colspan="10">1088.19</td> </tr> </table>	1088.19																			
1088.19																					
Candidate Name	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) ▼																				
C. Full Name (Last, First, Middle Initial) CITY CLUB OF FORT WORTH	Transaction ID: SB21B.441 Date of Disbursement																				
Mailing Address 301 COMMERCE ST STE 400	<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>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	1	1												
City FORT WORTH State TX Zip Code 76102	Amount of Each Disbursement this Period																				
Purpose of Disbursement ROOM RENTAL AND CATERING FOR PAC	<table border="1"> <tr> <td colspan="10">1202.75</td> </tr> </table>	1202.75																			
1202.75																					
Candidate Name	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)

PAGE 447 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

CMT BOSTON

Mailing Address 4250 24TH ST

City
LONG ISLAND CITY

State
NY

Zip Code
11101

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.442

Date of Disbursement

/ /

Amount of Each Disbursement this Period

21.70

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

CONTINENTAL

Mailing Address 600 JEFFERSON ST

City
HOUSTON

State
TX

Zip Code
77002

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.443

Date of Disbursement

/ /

Amount of Each Disbursement this Period

527.70

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

CONTINENTAL

Mailing Address 600 JEFFERSON ST

City
HOUSTON

State
TX

Zip Code
77002

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.444

Date of Disbursement

/ /

Amount of Each Disbursement this Period

527.70

[MEMO ITEM]

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 448 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

CONTINENTAL

Mailing Address 600 JEFFERSON ST

City
HOUSTON

State
TX

Zip Code
77002

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.445

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

310.90

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

COREL CORPORATION

Mailing Address PLANETENWEG 43-59 HOOFFDDORP

City

State

Zip Code
02132

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.446

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

8.95

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

COURTYARD BY MARRIOTT

Mailing Address 2700 LITTLE ROCK RD

City
CHARLOTTE

State
NC

Zip Code
28214

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.447

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

167.77

[MEMO ITEM]

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 449 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

COURTYARD BY MARRIOTT

Mailing Address 1050 BAYHILL DR

City
SAN BRUNO

State
CA

Zip Code
94066

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.448

Date of Disbursement

/ /

Amount of Each Disbursement this Period

10.11

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

COURTYARD CORAL GABLES

Mailing Address 2051 S LE JEUNE RD

City
MIAMI

State
FL

Zip Code
33134

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.449

Date of Disbursement

/ /

Amount of Each Disbursement this Period

258.77

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

COURTYARD CORAL GABLES

Mailing Address 2051 S LE JEUNE RD

City
MIAMI

State
FL

Zip Code
33134

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.450

Date of Disbursement

/ /

Amount of Each Disbursement this Period

258.77

[MEMO ITEM]

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 450 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

COYOTE LAKES GOLF CL

Mailing Address 18800 N COYOTE LAKES PKWY

City
SURPRISE

State
AZ

Zip Code
85374

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.451

Date of Disbursement

/ /

Amount of Each Disbursement this Period

7.50

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

COYOTE LAKES GOLF CL

Mailing Address 18800 N COYOTE LAKES PKWY

City
SURPRISE

State
AZ

Zip Code
85374

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.452

Date of Disbursement

/ /

Amount of Each Disbursement this Period

11.26

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

CVS

Mailing Address 175 CAMBRIDGE ST

City
BOSTON

State
MA

Zip Code
02114

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.453

Date of Disbursement

/ /

Amount of Each Disbursement this Period

23.02

[MEMO ITEM]

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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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

DELTA AIR LINES

Mailing Address DEPT 680 1030 DELTA BLVD

City
ATLANTA

State
GA

Zip Code
30354

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.454

Date of Disbursement

/ /

Amount of Each Disbursement this Period

460.70

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

DELTA AIR LINES

Mailing Address DEPT 680 1030 DELTA BLVD

City
ATLANTA

State
GA

Zip Code
30354

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.455

Date of Disbursement

/ /

Amount of Each Disbursement this Period

538.70

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

DELTA AIR LINES

Mailing Address DEPT 680 1030 DELTA BLVD

City
ATLANTA

State
GA

Zip Code
30354

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.456

Date of Disbursement

/ /

Amount of Each Disbursement this Period

478.80

[MEMO ITEM]

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

DELTA AIR LINES

Mailing Address DEPT 680 1030 DELTA BLVD

City
ATLANTA

State
GA

Zip Code
30354

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.457

Date of Disbursement

/ /

Amount of Each Disbursement this Period

369.40

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

DELTA AIR LINES

Mailing Address DEPT 680 1030 DELTA BLVD

City
ATLANTA

State
GA

Zip Code
30354

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.458

Date of Disbursement

/ /

Amount of Each Disbursement this Period

145.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

DELTA AIR LINES

Mailing Address DEPT 680 1030 DELTA BLVD

City
ATLANTA

State
GA

Zip Code
30354

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.459

Date of Disbursement

/ /

Amount of Each Disbursement this Period

494.10

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

Free and Strong America PAC, Inc.

03 / 30 / 2011

[MEMO ITEM]

[MEMO ITEM]

[MEMO ITEM]

FEC Schedule B (Form 3X) (Revised 02/2003)

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 454 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

DIGITAL RIVER PACIFIC

Mailing Address 9625 W 76TH ST

City
EDEN PRAIRIE

State
MN

Zip Code
55344

Purpose of Disbursement
WEB SERVICE FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.463

Date of Disbursement

/ /

Amount of Each Disbursement this Period

15.93

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

DIRECTV INC

Mailing Address 2230 E IMPERIAL HWY

City
EL SEGUNDO

State
CA

Zip Code
90245

Purpose of Disbursement
SATELLITE TV

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.464

Date of Disbursement

/ /

Amount of Each Disbursement this Period

91.34

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

DROPBOX

Mailing Address 760 MARKET STREET SUITE1150

City
SAN FRANCISCO

State
CA

Zip Code
94102

Purpose of Disbursement
SUBSCRIPTION FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.465

Date of Disbursement

/ /

Amount of Each Disbursement this Period

19.99

[MEMO ITEM]

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 455 / 970

<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)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) DUNKIN DONUTS	Transaction ID: SB21B.466 Date of Disbursement																				
Mailing Address 715 BOYLSTON ST	<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>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	1	1												
City BOSTON State MA Zip Code 02116	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE	<table border="1"> <tr> <td colspan="10">48.06</td> </tr> </table>	48.06																			
48.06																					
Candidate Name	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) ▼																				
B. Full Name (Last, First, Middle Initial) ENTERPRISE RENT A CAR	Transaction ID: SB21B.467 Date of Disbursement																				
Mailing Address 8003 BROADWAY AVE	<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>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	1	1												
City CLEVELAND State OH Zip Code 44105	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE	<table border="1"> <tr> <td colspan="10">111.25</td> </tr> </table>	111.25																			
111.25																					
Candidate Name	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) ▼																				
C. Full Name (Last, First, Middle Initial) ENTERPRISE RENT A CAR	Transaction ID: SB21B.468 Date of Disbursement																				
Mailing Address 160 AVIATION DRIVE NORTH	<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>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	1	1												
City NAPLES State FL Zip Code 34104	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE	<table border="1"> <tr> <td colspan="10">359.97</td> </tr> </table>	359.97																			
359.97																					
Candidate Name	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)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

FAIRFIELD-SCOTTSDALE

Mailing Address 13440 N SCOTTSDALE RD

City
SCOTTSDALE

State
AZ

Zip Code
85254

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.469

Date of Disbursement

/ /

Amount of Each Disbursement this Period

385.22

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

FAST TAXI

Mailing Address 18 LEDGE VIEW MAIN STREET

City
NORTH CONWAY

State
NH

Zip Code
03860

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.470

Date of Disbursement

/ /

Amount of Each Disbursement this Period

504.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

FEDEX

Mailing Address 1919 CONNECTICUT AVENUE

City
WASHINGTON

State
DC

Zip Code
20009

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.471

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5.46

[MEMO ITEM]

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

FEDEX

Mailing Address 1919 CONNECTICUT AVENUE

City
WASHINGTON

State
DC

Zip Code
20009

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.472

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

12.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

FEDEX

Mailing Address 1919 CONNECTICUT AVENUE

City
WASHINGTON

State
DC

Zip Code
20009

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.473

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

22.58

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

FEDEX

Mailing Address 1919 CONNECTICUT AVENUE

City
WASHINGTON

State
DC

Zip Code
20009

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.474

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

24.34

[MEMO ITEM]

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)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) FEDEX	Transaction ID: SB21B.475 Date of Disbursement
Mailing Address 1919 CONNECTICUT AVENUE	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 0 / 2 0 1 1</div> </div>
City WASHINGTON State DC Zip Code 20009	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSE	<div>49.04</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
B. Full Name (Last, First, Middle Initial) FEDEX	Transaction ID: SB21B.476 Date of Disbursement
Mailing Address 1919 CONNECTICUT AVENUE	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 0 / 2 0 1 1</div> </div>
City WASHINGTON State DC Zip Code 20009	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSE	<div>283.69</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
C. Full Name (Last, First, Middle Initial) FEDEX	Transaction ID: SB21B.477 Date of Disbursement
Mailing Address 3875 AIRWAYS BLVD	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 0 / 2 0 1 1</div> </div>
City MEMPHIS State TN Zip Code 38116	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSE	<div>79.68</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]

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)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) FEDEX OFFICE	Transaction ID: SB21B.478 Date of Disbursement
Mailing Address 2417 PONCE DE LEON BLVD	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 0 / 2 0 1 1</div> </div>
City CORAL GABLES State FL Zip Code 33134	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSE	<div> <div></div> <div>7.48</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
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) ▼
B. Full Name (Last, First, Middle Initial) FEDEX OFFICE	Transaction ID: SB21B.479 Date of Disbursement
Mailing Address 2417 PONCE DE LEON BLVD	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 0 / 2 0 1 1</div> </div>
City CORAL GABLES State FL Zip Code 33134	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSE	<div> <div></div> <div>47.49</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
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) ▼
C. Full Name (Last, First, Middle Initial) FEDEX OFFICE	Transaction ID: SB21B.480 Date of Disbursement
Mailing Address 13637 N TATUM BLVD STE 28	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 0 / 2 0 1 1</div> </div>
City PHOENIX State AZ Zip Code 85032	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSE	<div> <div></div> <div>7.64</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
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)

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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)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) FEDEX OFFICE	Transaction ID: SB21B.481 Date of Disbursement																				
Mailing Address 13637 N TATUM BLVD STE 28	<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>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	1	1												
City PHOENIX State AZ Zip Code 85032	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE	<table border="1"> <tr> <td colspan="10">10.67</td> </tr> </table>	10.67																			
10.67																					
Candidate Name	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) ▼																				
B. Full Name (Last, First, Middle Initial) FORT WORTH HILTON	Transaction ID: SB21B.482 Date of Disbursement																				
Mailing Address 815 MAIN ST	<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>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	1	1												
City FORTH WORTH State TX Zip Code 76102	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE	<table border="1"> <tr> <td colspan="10">13.40</td> </tr> </table>	13.40																			
13.40																					
Candidate Name	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) ▼																				
C. Full Name (Last, First, Middle Initial) GBC BLUE	Transaction ID: SB21B.483 Date of Disbursement																				
Mailing Address 5721 SE COLUMBIA WAY SUITE 190	<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>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	1	1												
City VANCOUVER State WA Zip Code 98661	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE	<table border="1"> <tr> <td colspan="10">2.78</td> </tr> </table>	2.78																			
2.78																					
Candidate Name	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)

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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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

GBC BLUE

Mailing Address 5721 SE COLUMBIA WAY SUITE 190

City
VANCOUVER

State
WA

Zip Code
98661

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.484

Date of Disbursement

/ /

Amount of Each Disbursement this Period

15.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

GENERAL NUTRITION CTRS

Mailing Address PO BOX 12449

City
PITTSBURGH

State
PA

Zip Code
15231

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.485

Date of Disbursement

/ /

Amount of Each Disbursement this Period

18.10

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

GOTOWEBINAR

Mailing Address 7414 HOLLISTER AVENUE

City
GOLETA

State
CA

Zip Code
93117

Purpose of Disbursement
WEB SERVICE FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.486

Date of Disbursement

/ /

Amount of Each Disbursement this Period

99.00

[MEMO ITEM]

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 462 / 970

<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)
Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)
GRASSFIELDS FOOD SPIRITS

Mailing Address 878 LEXINGTON ST # 880

City WALTHAM State MA Zip Code 02452

Purpose of Disbursement
MEETING EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.487

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

44.42

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
GREEN MOUNTAIN COFFEE

Mailing Address 33 COFFEE LN

City WATERBURY State VT Zip Code 05676

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.488

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

78.78

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
HAMPTON INN & SUITES

Mailing Address 1788 WHITE MOUNTAIN HWY

City NORTH CONWAY State NH Zip Code 03860

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.489

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

195.11

[MEMO ITEM]

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

HAMPTON INN & SUITES

Mailing Address 1788 WHITE MOUNTAIN HWY

City NORTH CONWAY State NH Zip Code 03860

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.490

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

202.80

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

HAMPTON INN & SUITES

Mailing Address 1788 WHITE MOUNTAIN HWY

City NORTH CONWAY State NH Zip Code 03860

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.491

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

195.11

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

HARVARD CLUB OF NY CITY

Mailing Address 27 W 44TH ST

City NEW YORK State NY Zip Code 10036

Purpose of Disbursement
ROOM RENTAL AND CATERING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.492

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

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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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

HERTZ

Mailing Address 14501 HERTZ QUAIL SPGS PK

City
OKLAHOMA CITY

State
OK

Zip Code
73134

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.493

Date of Disbursement

/ /

Amount of Each Disbursement this Period

204.58

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

HERTZ

Mailing Address 14501 HERTZ QUAIL SPGS PK

City
OKLAHOMA CITY

State
OK

Zip Code
73134

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.494

Date of Disbursement

/ /

Amount of Each Disbursement this Period

137.50

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

HERTZ

Mailing Address 14501 HERTZ QUAIL SPGS PK

City
OKLAHOMA CITY

State
OK

Zip Code
73134

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.495

Date of Disbursement

/ /

Amount of Each Disbursement this Period

206.79

[MEMO ITEM]

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

HERTZ

Mailing Address 14501 HERTZ QUAIL SPGS PK

City
OKLAHOMA CITY

State
OK

Zip Code
73134

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.496

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

263.89

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

HERTZ

Mailing Address 14501 HERTZ QUAIL SPGS PK

City
OKLAHOMA CITY

State
OK

Zip Code
73134

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.497

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

180.05

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

HERTZ

Mailing Address 14501 HERTZ QUAIL SPGS PK

City
OKLAHOMA CITY

State
OK

Zip Code
73134

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.498

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

196.95

[MEMO ITEM]

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

HERTZ

Mailing Address 14501 HERTZ QUAIL SPGS PK

City
OKLAHOMA CITY

State
OK

Zip Code
73134

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.499

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

241.05

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

HERTZ

Mailing Address 14501 HERTZ QUAIL SPGS PK

City
OKLAHOMA CITY

State
OK

Zip Code
73134

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.500

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

387.24

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

HERTZ

Mailing Address 14501 HERTZ QUAIL SPGS PK

City
OKLAHOMA CITY

State
OK

Zip Code
73134

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.501

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

203.94

[MEMO ITEM]

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 467 / 970

<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)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) HERTZ	Transaction ID: SB21B.502 Date of Disbursement																				
Mailing Address 14501 HERTZ QUAIL SPGS PK	<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>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	1	1												
City OKLAHOMA CITY State OK Zip Code 73134	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE	<table border="1"> <tr> <td colspan="10">175.91</td> </tr> </table>	175.91																			
175.91																					
Candidate Name	[MEMO ITEM]																				
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) ▼																				
B. Full Name (Last, First, Middle Initial) HERTZ	Transaction ID: SB21B.503 Date of Disbursement																				
Mailing Address 14501 HERTZ QUAIL SPGS PK	<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>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	1	1												
City OKLAHOMA CITY State OK Zip Code 73134	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE	<table border="1"> <tr> <td colspan="10">237.54</td> </tr> </table>	237.54																			
237.54																					
Candidate Name	[MEMO ITEM]																				
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) ▼																				
C. Full Name (Last, First, Middle Initial) HERTZ	Transaction ID: SB21B.504 Date of Disbursement																				
Mailing Address 14501 HERTZ QUAIL SPGS PK	<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>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	1	1												
City OKLAHOMA CITY State OK Zip Code 73134	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE	<table border="1"> <tr> <td colspan="10">136.27</td> </tr> </table>	136.27																			
136.27																					
Candidate Name	[MEMO ITEM]																				
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)

PAGE 468 / 970

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

HERTZ

Mailing Address 14501 HERTZ QUAIL SPGS PK

City
OKLAHOMA CITY

State
OK

Zip Code
73134

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.505

Date of Disbursement

/ /

Amount of Each Disbursement this Period

69.99

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

HERTZ

Mailing Address 14501 HERTZ QUAIL SPGS PK

City
OKLAHOMA CITY

State
OK

Zip Code
73134

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.506

Date of Disbursement

/ /

Amount of Each Disbursement this Period

101.99

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

HERTZ

Mailing Address 14501 HERTZ QUAIL SPGS PK

City
OKLAHOMA CITY

State
OK

Zip Code
73134

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.507

Date of Disbursement

/ /

Amount of Each Disbursement this Period

54.69

[MEMO ITEM]

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 469 / 970

<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)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) HERTZ	Transaction ID: SB21B.508 Date of Disbursement																				
Mailing Address 14501 HERTZ QUAIL SPGS PK	<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>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	1	1												
City OKLAHOMA CITY State OK Zip Code 73134	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE	<table border="1"> <tr> <td colspan="10">452.27</td> </tr> </table>	452.27																			
452.27																					
Candidate Name	<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> 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]																				
B. Full Name (Last, First, Middle Initial) HERTZ	Transaction ID: SB21B.509 Date of Disbursement																				
Mailing Address 14501 HERTZ QUAIL SPGS PK	<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>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	1	1												
City OKLAHOMA CITY State OK Zip Code 73134	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE	<table border="1"> <tr> <td colspan="10">470.72</td> </tr> </table>	470.72																			
470.72																					
Candidate Name	<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> 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]																				
C. Full Name (Last, First, Middle Initial) HILTON	Transaction ID: SB21B.510 Date of Disbursement																				
Mailing Address 333 1ST ST S	<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>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	1	1												
City SAINT PETERSBURG State FL Zip Code 33701	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE	<table border="1"> <tr> <td colspan="10">1704.18</td> </tr> </table>	1704.18																			
1704.18																					
Candidate Name	<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> 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]																				

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 470 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

HILTON

Mailing Address 755 CROSSOVER LN

City
MEMPHIS

State
TN

Zip Code
38117

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.516

Date of Disbursement

/ /

Amount of Each Disbursement this Period

204.87

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

HILTON BOSTON BACK BAY

Mailing Address 40 DALTON ST

City
BOSTON

State
MA

Zip Code
02115

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.511

Date of Disbursement

/ /

Amount of Each Disbursement this Period

273.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

HILTON GARDEN INN

Mailing Address 600 S COLORADO BLVD

City
DEMVER

State
CO

Zip Code
80246

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.512

Date of Disbursement

/ /

Amount of Each Disbursement this Period

14.00

[MEMO ITEM]

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 471 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

HILTON GARDEN INN

Mailing Address 600 S COLORADO BLVD

City
DENVER

State
CO

Zip Code
80246

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.513

Date of Disbursement

/ /

Amount of Each Disbursement this Period

167.62

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

HILTON GARDEN INN

Mailing Address 600 S COLORADO BLVD

City
DENVER

State
CO

Zip Code
80246

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.514

Date of Disbursement

/ /

Amount of Each Disbursement this Period

175.62

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

HILTON GARDEN INN

Mailing Address 600 S COLORADO BLVD

City
DENVER

State
CO

Zip Code
80246

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.515

Date of Disbursement

/ /

Amount of Each Disbursement this Period

9.50

[MEMO ITEM]

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 472 / 970

<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)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) HOLIDAY INN EXPRESS	Transaction ID: SB21B.518 Date of Disbursement																				
Mailing Address 1732 WHITE MOUNTAIN HWY	<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>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	1	1												
City NORTH CONWAY State NH Zip Code 03860	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE	<table border="1"> <tr> <td colspan="10">155.82</td> </tr> </table>	155.82																			
155.82																					
Candidate Name	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]																				
B. Full Name (Last, First, Middle Initial) HUDSON NEWS	Transaction ID: SB21B.519 Date of Disbursement																				
Mailing Address LOGAN AIRPORT TERMINAL B	<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>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	1	1												
City EAST BOSTON State MA Zip Code 02128	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE	<table border="1"> <tr> <td colspan="10">1.99</td> </tr> </table>	1.99																			
1.99																					
Candidate Name	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]																				
C. Full Name (Last, First, Middle Initial) HUGHES CATERING	Transaction ID: SB21B.520 Date of Disbursement																				
Mailing Address 4351 NE 12TH TER	<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>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	1	1												
City OAKLAND PARK State FL Zip Code 33334	Amount of Each Disbursement this Period																				
Purpose of Disbursement CATERING FOR PAC	<table border="1"> <tr> <td colspan="10">1134.20</td> </tr> </table>	1134.20																			
1134.20																					
Candidate Name	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]																				

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 473 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

HYATT PLACE BUCKHEAD

Mailing Address 3242 PEACHTREE RD NE

City
ATLANTA

State
GA

Zip Code
30305

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.521

Date of Disbursement

/ /

Amount of Each Disbursement this Period

164.45

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

HYATT PLACE BUCKHEAD

Mailing Address 3242 PEACHTREE RD NE

City
ATLANTA

State
GA

Zip Code
30305

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.522

Date of Disbursement

/ /

Amount of Each Disbursement this Period

169.85

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

HYATT PLACE SAN ANTONIO

Mailing Address 7615 JONES MALTSBERGER RD

City
SAN ANTONIO

State
TX

Zip Code
78216

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.523

Date of Disbursement

/ /

Amount of Each Disbursement this Period

135.43

[MEMO ITEM]

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

HYATT PLACE SAN ANTONIO

Mailing Address 7615 JONES MALTSBERGER RD

City State Zip Code
SAN ANTONIO TX 78216

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.524

Date of Disbursement

/ /

Amount of Each Disbursement this Period

140.84

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

HYATT PLACE

Mailing Address 295 LAKEVIEW AVE

City State Zip Code
WEST PALM BEACH FL 33401

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.525

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3.18

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

HYATT PLACE

Mailing Address 295 LAKEVIEW AVE

City State Zip Code
WEST PALM BEACH FL 33401

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.526

Date of Disbursement

/ /

Amount of Each Disbursement this Period

243.09

[MEMO ITEM]

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 475 / 970

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

HYATT PLACE

Mailing Address 295 LAKEVIEW AVE

City
WEST PALM BEACH

State
FL

Zip Code
33401

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.527

Date of Disbursement

/ /

Amount of Each Disbursement this Period

260.74

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

ILLY RESTAURANT

Mailing Address 300 TERMINAL E BOSTON LOGAN IINT'L

City
BOSTON

State
MA

Zip Code
02128

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.528

Date of Disbursement

/ /

Amount of Each Disbursement this Period

10.65

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City
SALT LAKE CITY

State
UT

Zip Code
84121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.531

Date of Disbursement

/ /

Amount of Each Disbursement this Period

65.00

[MEMO ITEM]

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City
SALT LAKE CITY

State
UT

Zip Code
84121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.532

Date of Disbursement

/ /

Amount of Each Disbursement this Period

65.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City
SALT LAKE CITY

State
UT

Zip Code
84121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.533

Date of Disbursement

/ /

Amount of Each Disbursement this Period

453.70

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City
SALT LAKE CITY

State
UT

Zip Code
84121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.534

Date of Disbursement

/ /

Amount of Each Disbursement this Period

533.70

[MEMO ITEM]

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 477 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City
SALT LAKE CITY

State
UT

Zip Code
84121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.535

Date of Disbursement

/ /

Amount of Each Disbursement this Period

195.70

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City
SALT LAKE CITY

State
UT

Zip Code
84121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.536

Date of Disbursement

/ /

Amount of Each Disbursement this Period

150.70

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City
SALT LAKE CITY

State
UT

Zip Code
84121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.537

Date of Disbursement

/ /

Amount of Each Disbursement this Period

115.70

[MEMO ITEM]

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City
SALT LAKE CITY

State
UT

Zip Code
84121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.538

Date of Disbursement

/ /

Amount of Each Disbursement this Period

373.70

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City
SALT LAKE CITY

State
UT

Zip Code
84121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.539

Date of Disbursement

/ /

Amount of Each Disbursement this Period

313.70

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City
SALT LAKE CITY

State
UT

Zip Code
84121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.540

Date of Disbursement

/ /

Amount of Each Disbursement this Period

165.70

[MEMO ITEM]

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)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 479 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City
SALT LAKE CITY

State
UT

Zip Code
84121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.541

Date of Disbursement

/ /

Amount of Each Disbursement this Period

10.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City
SALT LAKE CITY

State
UT

Zip Code
84121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.542

Date of Disbursement

/ /

Amount of Each Disbursement this Period

40.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City
SALT LAKE CITY

State
UT

Zip Code
84121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.543

Date of Disbursement

/ /

Amount of Each Disbursement this Period

40.00

[MEMO ITEM]

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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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City
SALT LAKE CITY

State
UT

Zip Code
84121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.544

Date of Disbursement

/ /

Amount of Each Disbursement this Period

60.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City
SALT LAKE CITY

State
UT

Zip Code
84121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.545

Date of Disbursement

/ /

Amount of Each Disbursement this Period

124.70

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City
SALT LAKE CITY

State
UT

Zip Code
84121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.546

Date of Disbursement

/ /

Amount of Each Disbursement this Period

124.70

[MEMO ITEM]

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 481 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City
SALT LAKE CITY

State
UT

Zip Code
84121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.547

Date of Disbursement

/ /

Amount of Each Disbursement this Period

864.40

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City
SALT LAKE CITY

State
UT

Zip Code
84121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.548

Date of Disbursement

/ /

Amount of Each Disbursement this Period

189.70

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City
SALT LAKE CITY

State
UT

Zip Code
84121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.549

Date of Disbursement

/ /

Amount of Each Disbursement this Period

189.70

[MEMO ITEM]

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City
SALT LAKE CITY

State
UT

Zip Code
84121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.550

Date of Disbursement

/ /

Amount of Each Disbursement this Period

388.70

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City
SALT LAKE CITY

State
UT

Zip Code
84121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.551

Date of Disbursement

/ /

Amount of Each Disbursement this Period

45.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

JW MARRIOTT

Mailing Address 150 CLAYTON LN

City
DENVER

State
CO

Zip Code
80206

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.552

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3108.77

[MEMO ITEM]

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 483 / 970

<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)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) KICKASS CUPCAKES	Transaction ID: SB21B.553 Date of Disbursement																				
Mailing Address 378 HIGHLAND AVE	<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>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	1	1												
City SOMERVILLE State MA Zip Code 02144	Amount of Each Disbursement this Period																				
Purpose of Disbursement MEETING EXPENSE Candidate Name	<table border="1"> <tr> <td colspan="10">108.00</td> </tr> </table>	108.00																			
108.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]																				
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
B. Full Name (Last, First, Middle Initial) LEES' DELI	Transaction ID: SB21B.554 Date of Disbursement																				
Mailing Address 170 SPEAR ST	<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>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	1	1												
City SAN FRANCISCO State CA Zip Code 94105	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE Candidate Name	<table border="1"> <tr> <td colspan="10">8.35</td> </tr> </table>	8.35																			
8.35																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]																				
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
C. Full Name (Last, First, Middle Initial) LENOVO	Transaction ID: SB21B.555 Date of Disbursement																				
Mailing Address 1209 N ORANGE ST	<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>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	1	1												
City WILMINGTON State DE Zip Code 19801	Amount of Each Disbursement this Period																				
Purpose of Disbursement EQUIPMENT PURCHASE Candidate Name	<table border="1"> <tr> <td colspan="10">1009.33</td> </tr> </table>	1009.33																			
1009.33																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]																				
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 PageFOR 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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

LENOX HOTEL

Mailing Address 710 BOYLSTON ST

City
BOSTONState
MAZip Code
02116Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.556

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	0		2	0	1	1

Amount of Each Disbursement this Period

268.96

[MEMO ITEM]**B.**

Full Name (Last, First, Middle Initial)

LEXIS-NEXIS

Mailing Address 9393 SPRINGBORO PIKE

City
MIAMISBURGState
OHZip Code
45342Purpose of Disbursement
SUBSCRIPTION FOR PAC

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.557

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	0		2	0	1	1

Amount of Each Disbursement this Period

600.00

[MEMO ITEM]**C.**

Full Name (Last, First, Middle Initial)

LOEWS VANDERBILT HOTEL

Mailing Address 2100 W END AVE

City
NASHVILLEState
TNZip Code
37203Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.558

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	0		2	0	1	1

Amount of Each Disbursement this Period

1795.35

[MEMO ITEM]**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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

LOEWS VANDERBILT HOTEL

Mailing Address 2100 W END AVE

City
NASHVILLE

State
TN

Zip Code
37203

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.559

Date of Disbursement

/ /

Amount of Each Disbursement this Period

203.54

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

LOGICLINK

Mailing Address 16620 ASTON

City
IRVINE

State
CA

Zip Code
92606

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.430

Date of Disbursement

/ /

Amount of Each Disbursement this Period

12.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

LONGHORN STEAKS

Mailing Address 250 FRANKLIN VILLAGE DR

City
FRANKLIN

State
MA

Zip Code
02038

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.560

Date of Disbursement

/ /

Amount of Each Disbursement this Period

59.36

[MEMO ITEM]

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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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MAGGIANO'S

Mailing Address 16405 N SCOTTSDALE RD

City
SCOTTSDALE

State
AZ

Zip Code
85254

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.561

Date of Disbursement

/ /

Amount of Each Disbursement this Period

27.37

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

MANGIA 48

Mailing Address 16 E.48TH STREET

City
NEW YORK

State
NY

Zip Code
10017

Purpose of Disbursement
CATERING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.562

Date of Disbursement

/ /

Amount of Each Disbursement this Period

93.22

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

MANGIA 48

Mailing Address 16 E.48TH STREET

City
NEW YORK

State
NY

Zip Code
10017

Purpose of Disbursement
CATERING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.563

Date of Disbursement

/ /

Amount of Each Disbursement this Period

521.75

[MEMO ITEM]

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MARRIOTT

Mailing Address 1331 PENNSYLVANIA AVE NW

City
WASHINGTON

State
DC

Zip Code
20004

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.564

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

6740.84

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

MARRIOTT

Mailing Address 1331 PENNSYLVANIA AVE NW

City
WASHINGTON

State
DC

Zip Code
20004

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.565

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

1195.61

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

MARRIOTT

Mailing Address 1331 PENNSYLVANIA AVE NW

City
WASHINGTON

State
DC

Zip Code
20004

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.566

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

1237.07

[MEMO ITEM]

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MARRIOTT

Mailing Address 1221 22ND ST NW

City
WASHINGTON

State
DC

Zip Code
20037

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.567

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

399.61

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

MARRIOTT

Mailing Address 1535 BROADWAY

City
NEW YORK

State
NY

Zip Code
10036

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.568

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

346.61

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

MARRIOTT

Mailing Address 1535 BROADWAY

City
NEW YORK

State
NY

Zip Code
10036

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.569

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

346.61

[MEMO ITEM]

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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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MARRIOTT

Mailing Address 1535 BROADWAY

City
NEW YORK

State
NY

Zip Code
10036

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.570

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5.66

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

MARRIOTT

Mailing Address 111 CRAWFORD AVE

City
CONSHOHOCKEN

State
PA

Zip Code
19428

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.571

Date of Disbursement

/ /

Amount of Each Disbursement this Period

312.12

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

MARRIOTT

Mailing Address 111 CRAWFORD AVE

City
CONSHOHOCKEN

State
PA

Zip Code
19428

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.572

Date of Disbursement

/ /

Amount of Each Disbursement this Period

314.71

[MEMO ITEM]

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MASS PORT LOGAN PARKING

Mailing Address 1 HARBORSIDE DR

City
BOSTON

State
MA

Zip Code
02128

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.575

Date of Disbursement

/ /

Amount of Each Disbursement this Period

96.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

MASS PORT LOGAN PARKING

Mailing Address 1 HARBORSIDE DR

City
BOSTON

State
MA

Zip Code
02128

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.576

Date of Disbursement

/ /

Amount of Each Disbursement this Period

72.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

MCCABES

Mailing Address 699 5TH AVE S

City
NAPLES

State
FL

Zip Code
34102

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.577

Date of Disbursement

/ /

Amount of Each Disbursement this Period

13.61

[MEMO ITEM]

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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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) MGH GARAGE	Transaction ID: SB21B.573 Date of Disbursement
Mailing Address 55 FRUIT STREET	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 0 / 2 0 1 1</div> </div>
City BOSTON State MA Zip Code 02114	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSE	<div>40.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
B. Full Name (Last, First, Middle Initial) MGH GARAGE	Transaction ID: SB21B.574 Date of Disbursement
Mailing Address 55 FRUIT STREET	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 0 / 2 0 1 1</div> </div>
City BOSTON State MA Zip Code 02114	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSE	<div>7.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
C. Full Name (Last, First, Middle Initial) MINDSHIFT TECHNOLOGIES	Transaction ID: SB21B.578 Date of Disbursement
Mailing Address 3975 FAIR RIDGE DR # S200	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 0 / 2 0 1 1</div> </div>
City FAIRFAX State VA Zip Code 22033	Amount of Each Disbursement this Period
Purpose of Disbursement EQUIPMENT PURCHASE FOR PAC	<div>6025.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]

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 PageFOR 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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MOE'S SOUTHWEST GRILL

Mailing Address 1331 PENNSYLVANIA AVE NW

City
WASHINGTONState
DCZip Code
20004Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.579

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	0		2	0	1	1

Amount of Each Disbursement this Period

11.42

[MEMO ITEM]**B.**

Full Name (Last, First, Middle Initial)

MONTAGE DEER VALLEY

Mailing Address 9100 MARSAC AVE

City
PARK CITYState
UTZip Code
84060Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.580

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	0		2	0	1	1

Amount of Each Disbursement this Period

992.32

[MEMO ITEM]**C.**

Full Name (Last, First, Middle Initial)

NATURAL ISLAND

Mailing Address BOSTON LOGAN AIRPORT

City
BOSTONState
MAZip Code
02108Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.581

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	0		2	0	1	1

Amount of Each Disbursement this Period

4.97

[MEMO ITEM]**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 493 / 970

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

NEILLIOS AT LEXINGTON

Mailing Address 53 BEDFORD ST

City
LEXINGTON

State
MA

Zip Code
02420

Purpose of Disbursement
MEETING EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.582

Date of Disbursement

/ /

Amount of Each Disbursement this Period

76.65

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

NYC TAXI

Mailing Address 19 HARRIS ST

City
CARTERET

State
NJ

Zip Code
07008

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.530

Date of Disbursement

/ /

Amount of Each Disbursement this Period

39.24

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

NYC TAXI

Mailing Address 3108 NORTHERN BLVD

City
LONG ISLAND CITY

State
NY

Zip Code
11101

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.673

Date of Disbursement

/ /

Amount of Each Disbursement this Period

59.15

[MEMO ITEM]

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

O K CAFE

Mailing Address 3423 PIEDMONT RD NE # 318

City
ATLANTA

State
GA

Zip Code
30305

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.583

Date of Disbursement

/ /

Amount of Each Disbursement this Period

15.50

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

OFFICE DEPOT

Mailing Address 4504 HARDING PIKE

City
NASHVILLE

State
TN

Zip Code
37205

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.584

Date of Disbursement

/ /

Amount of Each Disbursement this Period

9.26

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

OFFICEMAX

Mailing Address 3605 WARRENSVILLE CTR RD

City
BEACHWOOD

State
OH

Zip Code
44122

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.585

Date of Disbursement

/ /

Amount of Each Disbursement this Period

297.49

[MEMO ITEM]

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 PageFOR LINE NUMBER:
(check only one)

PAGE 495 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

OFFICEMAX

Mailing Address 3605 WARRENSVILLE CTR RD

City
BEACHWOODState
OHZip Code
44122Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.586

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	0	/	2	0	1	1

Amount of Each Disbursement this Period

1381.24

[MEMO ITEM]**B.**

Full Name (Last, First, Middle Initial)

OFFICEMAX

Mailing Address 3605 WARRENSVILLE CTR RD

City
BEACHWOODState
OHZip Code
44122Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.587

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	0	/	2	0	1	1

Amount of Each Disbursement this Period

1910.51

[MEMO ITEM]**C.**

Full Name (Last, First, Middle Initial)

PACIFIC GATEWAY NEWS

Mailing Address 207 LAWRENCE AVE

City
SAN FRANCISCOState
CAZip Code
94080Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.588

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	0	/	2	0	1	1

Amount of Each Disbursement this Period

4.20

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

Free and Strong America PAC, Inc.

[MEMO ITEM]

[MEMO ITEM]

[MEMO ITEM]

A blank coordinate grid with x and y axes ranging from 0 to 10. The grid is used for plotting the graph of the function $y = \frac{1}{2}x^2$.

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 497 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

PARADIES

Mailing Address 1000 PALM BCH INTL ARPRT

City WEST PALM BEACH State FL Zip Code 33406

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.592

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	0	/	2	0	1	1

Amount of Each Disbursement this Period

4.23

[MEMO ITEM]**B.**

Full Name (Last, First, Middle Initial)

PARTYMAKER

Mailing Address 3102 MAIN ST

City DALLAS State TX Zip Code 75226

Purpose of Disbursement
EVENT SUPPLIES FOR PAC

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.593

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	0	/	2	0	1	1

Amount of Each Disbursement this Period

1226.47

[MEMO ITEM]**C.**

Full Name (Last, First, Middle Initial)

POSTRIO

Mailing Address 3377 LAS VEGAS BLVD S SUITE J

City LAS VEGAS State NV Zip Code 89109

Purpose of Disbursement
MEETING EXPENSE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.594

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	0	/	2	0	1	1

Amount of Each Disbursement this Period

1750.00

[MEMO ITEM]

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 498 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

PRODUCTIONS INC

Mailing Address 137 GLENN ST

City
LAWRENCE

State
MA

Zip Code
01843

Purpose of Disbursement
EVENT SUPPLIES FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.596

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

212.50

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

QUEEN CITY CLUB

Mailing Address 331 E 4TH ST

City
CINCINNATI

State
OH

Zip Code
45202

Purpose of Disbursement
CATERING AND ROOM RETNAL FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.597

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

1056.39

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

RADISSON HOTELS

Mailing Address 39475 WOODWARD AVE

City
BLOOMFIELD HILLS

State
MI

Zip Code
48304

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.598

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

367.92

[MEMO ITEM]

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 499 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

RANCH 1

Mailing Address 1 AVIATION CIRCLE

City
WASHINGTON

State
DC

Zip Code
20001

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.599

Date of Disbursement

/

Amount of Each Disbursement this Period

7.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

RED LOBSTER

Mailing Address 1201 EL CAMINO REAL

City
SAN BRUNO

State
CA

Zip Code
94066

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.600

Date of Disbursement

/

Amount of Each Disbursement this Period

34.03

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

RED PARKA STEAKHOUSE

Mailing Address 3 STATION STREET

City
GLEN

State
NH

Zip Code
03838

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.601

Date of Disbursement

/

Amount of Each Disbursement this Period

33.15

[MEMO ITEM]

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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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

RENAISSANCE CLEVELAND

Mailing Address 24 PUBLIC SQ

City
CLEVELAND

State
OH

Zip Code
44113

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.602

Date of Disbursement

/ /

Amount of Each Disbursement this Period

242.97

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

RENAISSANCE CLEVELAND

Mailing Address 24 PUBLIC SQ

City
CLEVELAND

State
OH

Zip Code
44113

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.603

Date of Disbursement

/ /

Amount of Each Disbursement this Period

335.82

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

RENAISSANCE HOTEL

Mailing Address 1 W WACKER DR

City
CHICAGO

State
IL

Zip Code
60601

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.604

Date of Disbursement

/ /

Amount of Each Disbursement this Period

229.65

[MEMO ITEM]

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 501 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

RENAISSANCE HOTEL

Mailing Address 1 W WACKER DR

City
CHICAGO

State
IL

Zip Code
60601

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.605

Date of Disbursement

/ /

Amount of Each Disbursement this Period

229.65

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

RENAISSANCE HOTEL

Mailing Address 1 W WACKER DR

City
CHICAGO

State
IL

Zip Code
60601

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.606

Date of Disbursement

/ /

Amount of Each Disbursement this Period

263.95

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

RESIDENCE INN

Mailing Address 600 W GAINES ST

City
TALLAHASSEE

State
FL

Zip Code
32310

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.607

Date of Disbursement

/ /

Amount of Each Disbursement this Period

212.69

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

Free and Strong America PAC, Inc.

[MEMO ITEM]

[MEMO ITEM]

[MEMO ITEM]

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

SHELL OIL

Mailing Address 12700 NORTHBOROUGH

City
HOUSTON

State
TX

Zip Code
77067

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.612

Date of Disbursement

/ /

Amount of Each Disbursement this Period

73.14

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

SKY ASIAN BISTRO

Mailing Address PHILADELPHIA INTL AIRPORT TERMINAL

City
PHILADELPHIA

State
PA

Zip Code
19153

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.613

Date of Disbursement

/ /

Amount of Each Disbursement this Period

9.18

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

SMP HOLT

Mailing Address 16365 JAMES MADISON HWY

City
GORDONSVILLE

State
VA

Zip Code
22942

Purpose of Disbursement
BOOK PURCHASE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.614

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1761.11

[MEMO ITEM]

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 504 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

SMP HOLT

Mailing Address 16365 JAMES MADISON HWY

City
GORDONSVILLE

State
VA

Zip Code
22942

Purpose of Disbursement
BOOK PURCHASE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.615

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1056.54

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

SMP HOLT

Mailing Address 16365 JAMES MADISON HWY

City
GORDONSVILLE

State
VA

Zip Code
22942

Purpose of Disbursement
BOOK PURCHASE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.616

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4142.16

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

SMP HOLT

Mailing Address 16365 JAMES MADISON HWY

City
GORDONSVILLE

State
VA

Zip Code
22942

Purpose of Disbursement
BOOK PURCHASE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.617

Date of Disbursement

/ /

Amount of Each Disbursement this Period

219.70

[MEMO ITEM]

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 505 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

SOUTHWEST AIRLINES

Mailing Address PO BOX 36611

City
DALLAS

State
TX

Zip Code
75235

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.618

Date of Disbursement

/ /

Amount of Each Disbursement this Period

422.70

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

SOUTHWEST AIRLINES

Mailing Address PO BOX 36611

City
DALLAS

State
TX

Zip Code
75235

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.619

Date of Disbursement

/ /

Amount of Each Disbursement this Period

208.70

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

SOUTHWEST AIRLINES

Mailing Address PO BOX 36611

City
DALLAS

State
TX

Zip Code
75235

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.620

Date of Disbursement

/ /

Amount of Each Disbursement this Period

208.70

[MEMO ITEM]

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 506 / 970

<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)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES	Transaction ID: SB21B.621 Date of Disbursement																				
Mailing Address PO BOX 36611	<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>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	1	1												
City DALLAS State TX Zip Code 75235	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL	<table border="1"> <tr> <td colspan="10">437.70</td> </tr> </table>	437.70																			
437.70																					
Candidate Name	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) ▼																				
B. Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES	Transaction ID: SB21B.622 Date of Disbursement																				
Mailing Address PO BOX 36611	<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>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	1	1												
City DALLAS State TX Zip Code 75235	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL	<table border="1"> <tr> <td colspan="10">437.70</td> </tr> </table>	437.70																			
437.70																					
Candidate Name	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) ▼																				
C. Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES	Transaction ID: SB21B.623 Date of Disbursement																				
Mailing Address PO BOX 36611	<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>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	1	1												
City DALLAS State TX Zip Code 75235	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL	<table border="1"> <tr> <td colspan="10">374.40</td> </tr> </table>	374.40																			
374.40																					
Candidate Name	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)

PAGE 507 / 970

<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)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES	Transaction ID: SB21B.624																				
Mailing Address PO BOX 36611	Date of Disbursement																				
City DALLAS State TX Zip Code 75235	<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>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	1	1												
Purpose of Disbursement TRAVEL	Amount of Each Disbursement this Period																				
Candidate Name	<table border="1"> <tr> <td>374.40</td> </tr> </table>	374.40																			
374.40																					
<table border="1"> <tr> <td>Office Sought:</td> <td> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </td> <td>Disbursement For:</td> <td> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </td> </tr> <tr> <td>State:</td> <td>District:</td> <td></td> <td></td> </tr> </table>	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:			[MEMO ITEM]												
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																		
State:	District:																				
B. Full Name (Last, First, Middle Initial) SPECIALTYS CAFE	Transaction ID: SB21B.625																				
Mailing Address 150 SPEAR ST	Date of Disbursement																				
City SAN FRANCISCO State CA Zip Code 94105	<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>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	1	1												
Purpose of Disbursement TRAVEL EXPENSE	Amount of Each Disbursement this Period																				
Candidate Name	<table border="1"> <tr> <td>5.57</td> </tr> </table>	5.57																			
5.57																					
<table border="1"> <tr> <td>Office Sought:</td> <td> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </td> <td>Disbursement For:</td> <td> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </td> </tr> <tr> <td>State:</td> <td>District:</td> <td></td> <td></td> </tr> </table>	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:			[MEMO ITEM]												
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																		
State:	District:																				
C. Full Name (Last, First, Middle Initial) SPECIALTYS CAFE	Transaction ID: SB21B.626																				
Mailing Address 150 SPEAR ST	Date of Disbursement																				
City SAN FRANCISCO State CA Zip Code 94105	<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>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	1	1												
Purpose of Disbursement TRAVEL EXPENSE	Amount of Each Disbursement this Period																				
Candidate Name	<table border="1"> <tr> <td>15.17</td> </tr> </table>	15.17																			
15.17																					
<table border="1"> <tr> <td>Office Sought:</td> <td> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </td> <td>Disbursement For:</td> <td> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </td> </tr> <tr> <td>State:</td> <td>District:</td> <td></td> <td></td> </tr> </table>	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:			[MEMO ITEM]												
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)

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 508 / 970

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

SPRINGHILL SUITES

Mailing Address 430 PLYMOUTH RD

City
PLYMOUTH MEETING

State
PA

Zip Code
19462

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.609

Date of Disbursement

/ /

Amount of Each Disbursement this Period

193.91

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

STAPLES

Mailing Address 1070 LEXINGTON ST

City
WALTHAM

State
MA

Zip Code
02452

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.627

Date of Disbursement

/ /

Amount of Each Disbursement this Period

14.86

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

STAPLES

Mailing Address 1070 LEXINGTON ST

City
WALTHAM

State
MA

Zip Code
02452

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.628

Date of Disbursement

/ /

Amount of Each Disbursement this Period

25.50

[MEMO ITEM]

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 509 / 970

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

STAPLES

Mailing Address 1070 LEXINGTON ST

City
WALTHAM

State
MA

Zip Code
02452

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.629

Date of Disbursement

/ /

Amount of Each Disbursement this Period

19.11

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

STAPLES

Mailing Address 1070 LEXINGTON ST

City
WALTHAM

State
MA

Zip Code
02452

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.630

Date of Disbursement

/ /

Amount of Each Disbursement this Period

89.09

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

STAPLES

Mailing Address 1070 LEXINGTON ST

City
WALTHAM

State
MA

Zip Code
02452

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.631

Date of Disbursement

/ /

Amount of Each Disbursement this Period

75.85

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

Free and Strong America PAC, Inc.

[MEMO ITEM]

[MEMO ITEM]

[MEMO ITEM]

FEC Schedule B (Form 3X) (Revised 02/2003)

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 511 / 970

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) STARBUCKS	Transaction ID: SB21B.434 Date of Disbursement
Mailing Address 1000 TURNAGE BLVD	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 0 / 2 0 1 1</div> </div>
City WEST PALM BEACH State CA Zip Code 33406	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSE	<div>4.40</div>
Candidate Name	<div>Category/Type</div>
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]
B. Full Name (Last, First, Middle Initial) STARBUCKS	Transaction ID: SB21B.635 Date of Disbursement
Mailing Address 1841 BROADWAY	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 0 / 2 0 1 1</div> </div>
City NEW YORK State NY Zip Code 10023	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSE	<div>12.50</div>
Candidate Name	<div>Category/Type</div>
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]
C. Full Name (Last, First, Middle Initial) STARBUCKS	Transaction ID: SB21B.636 Date of Disbursement
Mailing Address TERMINAL B	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 0 / 2 0 1 1</div> </div>
City EAST BOSTON State MA Zip Code 02128	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSE	<div>4.39</div>
Candidate Name	<div>Category/Type</div>
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]

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

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) STARBUCKS <hr/> Mailing Address TERMINAL B	Transaction ID: SB21B.637 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 0 / 2 0 1 1</div> </div>
<div> <div>City EAST BOSTON State MA Zip Code 02128</div> <div>Purpose of Disbursement TRAVEL EXPENSE</div> <div>Candidate Name</div> </div> <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div> <div>Category/Type</div>	Amount of Each Disbursement this Period <div>5.45</div> [MEMO ITEM]
B. Full Name (Last, First, Middle Initial) SUNDANCE SQUARE GARAGE <hr/> Mailing Address 201 COMMERCE ST	Transaction ID: SB21B.639 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 0 / 2 0 1 1</div> </div>
<div> <div>City FORT WORTH State TX Zip Code 76102</div> <div>Purpose of Disbursement TRAVEL EXPENSE</div> <div>Candidate Name</div> </div> <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div> <div>Category/Type</div>	Amount of Each Disbursement this Period <div>5.00</div> [MEMO ITEM]
C. Full Name (Last, First, Middle Initial) SUNOCO <hr/> Mailing Address PO BOX 2301	Transaction ID: SB21B.638 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 0 / 2 0 1 1</div> </div>
<div> <div>City TULSA State OK Zip Code 74102</div> <div>Purpose of Disbursement TRAVEL EXPENSE</div> <div>Candidate Name</div> </div> <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div> <div>Category/Type</div>	Amount of Each Disbursement this Period <div>32.22</div> [MEMO ITEM]

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

T3 CIAO

Mailing Address TERMINAL 3 BLDG 53 678 VANWYCK EX

City
JAMAICA

State
NY

Zip Code
11430

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.640

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

7.93

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

TADS

Mailing Address 701 7TH AVE

City
NEW YORK

State
NY

Zip Code
10036

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.641

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

18.05

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

TAJ BOSTON

Mailing Address 15 ARLINGTON ST

City
BOSTON

State
MA

Zip Code
02116

Purpose of Disbursement
ROOM RENTAL AND CATERING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.642

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

650.00

[MEMO ITEM]

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

TAJ BOSTON

Mailing Address 15 ARLINGTON ST

City
BOSTON

State
MA

Zip Code
02116

Purpose of Disbursement
ROOM RENTAL AND CATERING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.643

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

4592.39

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

TALKPATH LLC

Mailing Address 3155 E PATRICK LN SUITE 1

City
LAS VEGAS

State
NV

Zip Code
89120

Purpose of Disbursement
EQUIPMENT PURCHASE FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.644

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

2011.45

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

TELEFLORA

Mailing Address 3737 NW 34TH STREET

City
OKLAHOMA CITY

State
OK

Zip Code
73112

Purpose of Disbursement
FLOWERS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.645

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

147.50

[MEMO ITEM]

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

THE BILTMORE HOTEL

Mailing Address 1200 ANASTASIA AVE

City CORAL GABLES State FL Zip Code 33134

Purpose of Disbursement
ROOM RENTAL AND CATERING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.646

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

2011.19

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

THE BILTMORE HOTEL

Mailing Address 1200 ANASTASIA AVE

City CORAL GABLES State FL Zip Code 33134

Purpose of Disbursement
ROOM RENTAL AND CATERING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.647

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

1001.10

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

THE CHEESECAKE FACTORY

Mailing Address 600 E LAS OLAS BLVD

City FT. LAUDERDALE State FL Zip Code 33301

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.648

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

46.83

[MEMO ITEM]

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
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) THE GOVENORS CLUB	Transaction ID: SB21B.649 Date of Disbursement
Mailing Address 202 1/2 S ADAMS ST	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 0 / 2 0 1 1</div> </div>
City TALLAHASSEE State FL Zip Code 32301	Amount of Each Disbursement this Period
Purpose of Disbursement MEETING EXPENSE	<div>444.84</div>
Candidate Name	<div>Category/Type</div>
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) ▼
B. Full Name (Last, First, Middle Initial) THE ISLAND HOTEL NEWPORT	Transaction ID: SB21B.650 Date of Disbursement
Mailing Address 690 NEWPORT CENTER DR	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 0 / 2 0 1 1</div> </div>
City NEWPORT BEACH State CA Zip Code 92660	Amount of Each Disbursement this Period
Purpose of Disbursement MEETING EXPENSE	<div>500.00</div>
Candidate Name	<div>Category/Type</div>
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) ▼
C. Full Name (Last, First, Middle Initial) THE OLD EBBITT GRILL	Transaction ID: SB21B.651 Date of Disbursement
Mailing Address 675 15TH ST NW	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 0 / 2 0 1 1</div> </div>
City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSE	<div>53.58</div>
Candidate Name	<div>Category/Type</div>
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)
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Detailed Summary Page

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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

THE UNION CLUB

Mailing Address 1211 EUCLID AVE

City
CLEVELAND

State
OH

Zip Code
44115

Purpose of Disbursement
MEETING EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.652

Date of Disbursement

/ /

Amount of Each Disbursement this Period

660.03

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

U FOODS GRILL

Mailing Address TERMINAL B KIERA FOOD CRT BA-A12

City
BOSTON

State
MA

Zip Code
02128

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.653

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5.87

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

UNION 76

Mailing Address 420 S. KEELER

City
BARTLESVILLE

State
OK

Zip Code
74004

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.654

Date of Disbursement

/ /

Amount of Each Disbursement this Period

49.66

[MEMO ITEM]

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
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(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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

UNION LEAGUE PARKING

Mailing Address 1415 SANSOM ST

City
PHILADELPHIA

State
PA

Zip Code
19102

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.655

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

26.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

UNITED AIRLINES

Mailing Address 1200 E ALGONQUIN RD

City
ELK GROVE VILLAGE

State
IL

Zip Code
60007

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.656

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

325.70

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

UPPER CRUST

Mailing Address 41 WALTHAM ST

City
LEXINGTON

State
MA

Zip Code
02421

Purpose of Disbursement
MEETING EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.657

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

149.40

[MEMO ITEM]

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 PageFOR 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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City
PHOENIXState
AZZip Code
85034Purpose of Disbursement
TRAVEL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.658

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	0	/	2	0	1	1

Amount of Each Disbursement this Period

359.70

[MEMO ITEM]**B.**

Full Name (Last, First, Middle Initial)

US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City
PHOENIXState
AZZip Code
85034Purpose of Disbursement
TRAVEL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.659

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	0	/	2	0	1	1

Amount of Each Disbursement this Period

169.70

[MEMO ITEM]**C.**

Full Name (Last, First, Middle Initial)

US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City
PHOENIXState
AZZip Code
85034Purpose of Disbursement
TRAVEL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.660

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	0	/	2	0	1	1

Amount of Each Disbursement this Period

169.70

[MEMO ITEM]**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)
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.661

Date of Disbursement

/ /

Amount of Each Disbursement this Period

369.70

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.662

Date of Disbursement

/ /

Amount of Each Disbursement this Period

150.70

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.663

Date of Disbursement

/ /

Amount of Each Disbursement this Period

264.70

[MEMO ITEM]

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.664

Date of Disbursement

/ /

Amount of Each Disbursement this Period

441.40

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.665

Date of Disbursement

/ /

Amount of Each Disbursement this Period

543.70

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.666

Date of Disbursement

/ /

Amount of Each Disbursement this Period

543.70

[MEMO ITEM]

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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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) US AIRWAYS	Transaction ID: SB21B.667 Date of Disbursement
Mailing Address 4000 E SKY HARBOR BLVD	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 0 / 2 0 1 1</div> </div>
City PHOENIX State AZ Zip Code 85034	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL	<div>165.70</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
B. Full Name (Last, First, Middle Initial) US AIRWAYS	Transaction ID: SB21B.668 Date of Disbursement
Mailing Address 4000 E SKY HARBOR BLVD	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 0 / 2 0 1 1</div> </div>
City PHOENIX State AZ Zip Code 85034	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL	<div>350.40</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
C. Full Name (Last, First, Middle Initial) US AIRWAYS	Transaction ID: SB21B.669 Date of Disbursement
Mailing Address 4000 E SKY HARBOR BLVD	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 0 / 2 0 1 1</div> </div>
City PHOENIX State AZ Zip Code 85034	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL	<div>164.70</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]

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)
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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)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) USPS	Transaction ID: SB21B.399 Date of Disbursement																				
Mailing Address 25 DORCHESTER AVE	<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>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	1	1												
City BOSTON State MA Zip Code 02205	Amount of Each Disbursement this Period																				
Purpose of Disbursement POSTAGE	<table border="1"> <tr> <td colspan="10">154.00</td> </tr> </table>	154.00																			
154.00																					
Candidate Name	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]																				
B. Full Name (Last, First, Middle Initial) USPS	Transaction ID: SB21B.400 Date of Disbursement																				
Mailing Address 25 DORCHESTER AVE	<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>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	1	1												
City BOSTON State MA Zip Code 02205	Amount of Each Disbursement this Period																				
Purpose of Disbursement POSTAGE	<table border="1"> <tr> <td colspan="10">237.90</td> </tr> </table>	237.90																			
237.90																					
Candidate Name	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]																				
C. Full Name (Last, First, Middle Initial) VIRGIN AMERICAN	Transaction ID: SB21B.670 Date of Disbursement																				
Mailing Address 555 AIRPORT BLVD FL 2ND	<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>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	1	1												
City BURLINGAME State CA Zip Code 94010	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL	<table border="1"> <tr> <td colspan="10">179.40</td> </tr> </table>	179.40																			
179.40																					
Candidate Name	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]																				

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)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) WAGON WHEEL NURSERY	Transaction ID: SB21B.671 Date of Disbursement																				
Mailing Address 927 WALTHAM ST	<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>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	1	1												
City LEXINGTON State MA Zip Code 02421	Amount of Each Disbursement this Period																				
Purpose of Disbursement MEETING EXPENSE	<table border="1"> <tr> <td colspan="10">60.21</td> </tr> </table>	60.21																			
60.21																					
Candidate Name	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) ▼																				
B. Full Name (Last, First, Middle Initial) WAGON WHEEL NURSERY	Transaction ID: SB21B.672 Date of Disbursement																				
Mailing Address 927 WALTHAM ST	<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>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	1	1												
City LEXINGTON State MA Zip Code 02421	Amount of Each Disbursement this Period																				
Purpose of Disbursement MEETING EXPENSE	<table border="1"> <tr> <td colspan="10">70.55</td> </tr> </table>	70.55																			
70.55																					
Candidate Name	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) ▼																				
C. Full Name (Last, First, Middle Initial) WEBB AUDIO VISUAL	Transaction ID: SB21B.595 Date of Disbursement																				
Mailing Address 3400 BRIDGE PARKWAY	<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>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	1	1												
City REDWOOD CITY State CA Zip Code 94065	Amount of Each Disbursement this Period																				
Purpose of Disbursement EVENT SUPPLIES FOR PAC	<table border="1"> <tr> <td colspan="10">1264.53</td> </tr> </table>	1264.53																			
1264.53																					
Candidate Name	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)

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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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

WENDY'S

Mailing Address 3000 ISLAND AVE

City
PHILADELPHIA

State
PA

Zip Code
19153

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.674

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5.39

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

WHOLE FOODS MARKET CIR

Mailing Address 10 COLUMBUS CIR STE SC101

City
NEW YORK

State
NY

Zip Code
10019

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.675

Date of Disbursement

/ /

Amount of Each Disbursement this Period

9.29

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

WOLFGANG PUCK

Mailing Address TERMINAL B BOSTON INTL AIRPORT

City
EAST BOSTON

State
MA

Zip Code
02128

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.676

Date of Disbursement

/ /

Amount of Each Disbursement this Period

12.07

[MEMO ITEM]

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)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 526 / 970

<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)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) ZOOT'S CAFE	Transaction ID: SB21B.517 Date of Disbursement																				
Mailing Address BUILDING 6-O'HARE FIELD	<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>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	1	1												
City CHICAGO State IL Zip Code 60666	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE	<table border="1"> <tr> <td colspan="10">4.98</td> </tr> </table>	4.98																			
4.98																					
Candidate Name	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) ▼																				
B. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS	Transaction ID: SB21B.766 Date of Disbursement																				
Mailing Address PO BOX 2855	<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>0</td><td>5</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	4		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	4		2	0	1	1												
City NEW YORK State NY Zip Code 10116	Amount of Each Disbursement this Period																				
Purpose of Disbursement CREDIT CARD PAYMENT	<table border="1"> <tr> <td colspan="10">54106.44</td> </tr> </table>	54106.44																			
54106.44																					
Candidate Name	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) ▼																				
C. Full Name (Last, First, Middle Initial) 7-ELEVEN STORES	Transaction ID: SB21B.767 Date of Disbursement																				
Mailing Address CITY PLACE CENTER EAST 2711 NORTH	<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>0</td><td>5</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	4		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	4		2	0	1	1												
City DALLAS State TX Zip Code 75204	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE	<table border="1"> <tr> <td colspan="10">1.78</td> </tr> </table>	1.78																			
1.78																					
Candidate Name	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)

54106.44

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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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

7-ELEVEN STORES

Mailing Address CITY PLACE CENTER EAST 2711 NORTH

City DALLAS State TX Zip Code 75204

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.768

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

7.99

[MEMO ITEM]

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

AMERICAN EXPRESS

Mailing Address PO BOX 2855

City NEW YORK State NY Zip Code 10116

Purpose of Disbursement
CREDIT: CREDIT CARD FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.871

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

-55.58

[MEMO ITEM]

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

AMERICAN TRAFFIC SOLUTION

Mailing Address 7681 E GRAY RD

City SCOTTSDALE State AZ Zip Code 85260

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.769

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

80.00

[MEMO ITEM]

Q1 and/or wind down expense

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)
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PAGE 528 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

AV VEGAS

Mailing Address 2320 DUNEVILLE ST

City LAS VEGAS State NV Zip Code 89146

Purpose of Disbursement
EVENT SUPPLIES FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.770

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

300.00

[MEMO ITEM]

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

AVIS RENTAL CAR TOLLS

Mailing Address 9 PARK PLACE

City GREAT NECK State NY Zip Code 11021

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.771

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

9.50

[MEMO ITEM]

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

BANDERA

Mailing Address 3201 E COAST HWY

City CORONA DEL MAR State CA Zip Code 92625

Purpose of Disbursement
EVENT SUPPLIES FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.772

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

112.56

[MEMO ITEM]

Q1 and/or wind down expense

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)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) BEST BUY	Transaction ID: SB21B.773 Date of Disbursement																				
Mailing Address 84 MIDDLESEX TPKE	<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>0</td><td>5</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	4		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	4		2	0	1	1												
City BURLINGTON State MA Zip Code 01803	Amount of Each Disbursement this Period																				
Purpose of Disbursement EQUIPMENT PURCHASE FOR PAC	<table border="1"> <tr> <td>63.74</td> </tr> </table>	63.74																			
63.74																					
Candidate Name	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) ▼																				
B. Full Name (Last, First, Middle Initial) BLUE RIBBON OF ARLINGTON	Transaction ID: SB21B.774 Date of Disbursement																				
Mailing Address 908 MASSACHUSETTS AVE	<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>0</td><td>5</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	4		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	4		2	0	1	1												
City ARLINGTON State MA Zip Code 02476	Amount of Each Disbursement this Period																				
Purpose of Disbursement MEETING EXPENSE	<table border="1"> <tr> <td>298.88</td> </tr> </table>	298.88																			
298.88																					
Candidate Name	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) ▼																				
C. Full Name (Last, First, Middle Initial) BOSTON TAXI	Transaction ID: SB21B.782 Date of Disbursement																				
Mailing Address 4250 24TH ST	<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>0</td><td>5</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	4		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	4		2	0	1	1												
City LONG ISLAND CITY State NY Zip Code 11101	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE	<table border="1"> <tr> <td>27.65</td> </tr> </table>	27.65																			
27.65																					
Candidate Name	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)

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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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

BURGER KING

Mailing Address 6850 AIRPORT BLVD STE 28

City State Zip Code
SACRAMENTO CA 95837

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.775

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5.52

[MEMO ITEM]

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

BUSINESS CENTER SERV

Mailing Address 1392 BORREGAS AVENUE

City State Zip Code
SUNNYVALE CA 94089

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.776

Date of Disbursement

/ /

Amount of Each Disbursement this Period

10.50

[MEMO ITEM]

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

CALIFORNIA PIZZA

Mailing Address 5757 WAYNE NEWTON BLVD

City State Zip Code
LAS VEGAS NV 89111

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.777

Date of Disbursement

/ /

Amount of Each Disbursement this Period

86.19

[MEMO ITEM]

Q1 and/or wind down expense

SUBTOTAL of Disbursements This Page (optional) ►

0.00

TOTAL This Period (last page this line number only) ►

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

Free and Strong America PAC, Inc.

FEC Schedule B (Form 3X) (Revised 02/2003)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

CHEDDARS

Mailing Address 201 ALEWIFE BROOK PKWY

City State Zip Code
CAMBRIDGE MA 02138

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.781

Date of Disbursement

/ /

Amount of Each Disbursement this Period

24.08

[MEMO ITEM]

Q1 and/or wind down expen-
se

B.

Full Name (Last, First, Middle Initial)

DELMONICOS STEAKHOUSE

Mailing Address 3355 LAS VEGAS BLVD S

City State Zip Code
LAS VEGAS NV 89109

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.783

Date of Disbursement

/ /

Amount of Each Disbursement this Period

273.57

[MEMO ITEM]

Q1 and/or wind down expen-
se

C.

Full Name (Last, First, Middle Initial)

DELMONICOS STEAKHOUSE

Mailing Address 3355 LAS VEGAS BLVD S

City State Zip Code
LAS VEGAS NV 89109

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.784

Date of Disbursement

/ /

Amount of Each Disbursement this Period

24.80

[MEMO ITEM]

Q1 and/or wind down expen-
se

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

Free and Strong America PAC, Inc.

Q1 and/or wind down expense

Q1 and/or wind down expense

Q1 and/or wind down expense

FEC Schedule B (Form 3X) (Revised 02/2003)

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

DUCALI PIZZERIA

Mailing Address 289 CAUSEWAY ST

City
BOSTON

State
MA

Zip Code
02114

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.788

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

72.99

[MEMO ITEM]

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

DUNKIN DONUTS

Mailing Address 715 BOYLSTON ST

City
BOSTON

State
MA

Zip Code
02116

Purpose of Disbursement
MEETING EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.789

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

106.20

[MEMO ITEM]

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

EARTH BAR CENTURY CITY EQ

Mailing Address 10220 CONSTELLATION BLVD

City
LOS ANGELES

State
CA

Zip Code
90067

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.790

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

7.95

[MEMO ITEM]

Q1 and/or wind down expense

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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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
EARTH BAR CENTURY CITY EQ

Mailing Address 10220 CONSTELLATION BLVD

City State Zip Code
LOS ANGELES CA 90067

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.791

Date of Disbursement

/ /

Amount of Each Disbursement this Period

7.95

[MEMO ITEM]

Q1 and/or wind down expense

B. Full Name (Last, First, Middle Initial)
ESPRESSAMENTE ILLY

Mailing Address 3339 LAS VEGAS BLVD S

City State Zip Code
LAS VEGAS NV 89109

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.792

Date of Disbursement

/ /

Amount of Each Disbursement this Period

12.43

[MEMO ITEM]

Q1 and/or wind down expense

C. Full Name (Last, First, Middle Initial)
EXPEDIA TRAVEL

Mailing Address 10190 COVINGTON CROSS DR

City State Zip Code
LAS VEGAS NV 89144

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.793

Date of Disbursement

/ /

Amount of Each Disbursement this Period

510.16

[MEMO ITEM]

Q1 and/or wind down expense

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)
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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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

FIORELLA'S JACK STACK

Mailing Address 4747 WYANDOTTE ST

City
KANSAS CITY

State
MO

Zip Code
64112

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.794

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

36.60

[MEMO ITEM]

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

GEORGE BUSH AIRPORT

Mailing Address 16930 JOHN F KENNEDY BLVD

City
HOUSTON

State
TX

Zip Code
77032

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.798

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

9.96

[MEMO ITEM]

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

GOOGLE PURCHASES

Mailing Address 1600 AMPHITHEATRE PKWY

City
MOUNTAIN VIEW

State
CA

Zip Code
94043

Purpose of Disbursement
WEB SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.799

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

5.00

[MEMO ITEM]

Q1 and/or wind down expense

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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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

GOTOWEBINAR

Mailing Address 7414 HOLLISTER AVENUE

City State Zip Code
GOLETA CA 93117

Purpose of Disbursement
WEB SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.800

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

99.00

[MEMO ITEM]

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

GRAND LUX CAFE LLC 5001

Mailing Address 3355 LAS VEGAS BLVD S

City State Zip Code
LAS VEGAS NV 89109

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.801

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

56.92

[MEMO ITEM]

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

HARVARD CLUB OF NY CITY

Mailing Address 27 W 44TH ST

City State Zip Code
NEW YORK NY 10036

Purpose of Disbursement
ROOM RENTAL AND CATERING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.803

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

13312.66

[MEMO ITEM]

Q1 and/or wind down expense

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

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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

HEALTHY GOURMET

Mailing Address JFK AIRPORT TERMINAL 3

City
JAMAICA

State
NY

Zip Code
11430

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.804

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

6.52

[MEMO ITEM]

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

HERTZ

Mailing Address 14501 HERTZ QUAIL SPGS PK

City
OKLAHOMA CITY

State
OK

Zip Code
73134

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.805

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

285.14

[MEMO ITEM]

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

HERTZ

Mailing Address 14501 HERTZ QUAIL SPGS PK

City
OKLAHOMA CITY

State
OK

Zip Code
73134

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.806

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

766.63

[MEMO ITEM]

Q1 and/or wind down expense

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 PageFOR LINE NUMBER:
(check only one)

PAGE 539 / 970

<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)

Free and Strong America PAC, Inc.

A.	Full Name (Last, First, Middle Initial) HERTZ			Transaction ID: SB21B.807 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 1 1	
	Mailing Address 14501 HERTZ QUAIL SPGS PK				
	City OKLAHOMA CITY	State OK	Zip Code 73134	Amount of Each Disbursement this Period 183.62	
	Purpose of Disbursement TRAVEL EXPENSE		Category/ Type		
	Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] Q1 and/or wind down expense	
State: District:					
B.	Full Name (Last, First, Middle Initial) HERTZ			Transaction ID: SB21B.808 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 1 1	
	Mailing Address 14501 HERTZ QUAIL SPGS PK				
	City OKLAHOMA CITY	State OK	Zip Code 73134	Amount of Each Disbursement this Period 193.01	
	Purpose of Disbursement TRAVEL EXPENSE		Category/ Type		
	Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] Q1 and/or wind down expense	
State: District:					
C.	Full Name (Last, First, Middle Initial) HERTZ			Transaction ID: SB21B.809 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 1 1	
	Mailing Address 14501 HERTZ QUAIL SPGS PK				
	City OKLAHOMA CITY	State OK	Zip Code 73134	Amount of Each Disbursement this Period 218.88	
	Purpose of Disbursement TRAVEL EXPENSE		Category/ Type		
	Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] Q1 and/or wind down expense	
State: District:					

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

HERTZ

Mailing Address 14501 HERTZ QUAIL SPGS PK

City
OKLAHOMA CITY

State
OK

Zip Code
73134

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.810

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

447.30

[MEMO ITEM]

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

HERTZ

Mailing Address 14501 HERTZ QUAIL SPGS PK

City
OKLAHOMA CITY

State
OK

Zip Code
73134

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.811

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

281.09

[MEMO ITEM]

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

HIGHLAND SPRINGS CORP

Mailing Address 5400 S HIGHLAND SPGS BLVD

City
SPRINGFIELD

State
MO

Zip Code
65809

Purpose of Disbursement
ROOM RENTAL AND CATERING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.812

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

4056.00

[MEMO ITEM]

Q1 and/or wind down expense

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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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

HOTEL BUSINESS EXPRESS CN

Mailing Address 100 DEERFIELD LN

City
MALVERN

State
PA

Zip Code
19355

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.813

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

4.39

[MEMO ITEM]

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

HOTEL BUSINESS CENTER

Mailing Address 38 BROADWAY

City
EVERETT

State
MA

Zip Code
02149

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.846

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

10.78

[MEMO ITEM]

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

HOTEL BUSINESS CENTER

Mailing Address 38 BROADWAY

City
EVERETT

State
MA

Zip Code
02149

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.847

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

20.45

[MEMO ITEM]

Q1 and/or wind down expense

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)
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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)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) HOTEL BUSINESS CENTER	Transaction ID: SB21B.848 Date of Disbursement																				
Mailing Address 38 BROADWAY	<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>0</td><td>5</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	4		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	4		2	0	1	1												
City EVERETT State MA Zip Code 02149	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE	<table border="1"> <tr> <td colspan="10">15.65</td> </tr> </table>	15.65																			
15.65																					
Candidate Name	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] Q1 and/or wind down expen- se																				
B. Full Name (Last, First, Middle Initial) HUDSON NEWS	Transaction ID: SB21B.814 Date of Disbursement																				
Mailing Address TERMINAL A LOGAN AIRPORT	<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>0</td><td>5</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	4		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	4		2	0	1	1												
City EAST BOSTON State MA Zip Code 02128	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE	<table border="1"> <tr> <td colspan="10">2.00</td> </tr> </table>	2.00																			
2.00																					
Candidate Name	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] Q1 and/or wind down expen- se																				
C. Full Name (Last, First, Middle Initial) HYATT HOTELS	Transaction ID: SB21B.815 Date of Disbursement																				
Mailing Address 2025 AVENUE OF THE STARS	<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>0</td><td>5</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	4		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	4		2	0	1	1												
City LOS ANGELES State CA Zip Code 90067	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE	<table border="1"> <tr> <td colspan="10">306.90</td> </tr> </table>	306.90																			
306.90																					
Candidate Name	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] Q1 and/or wind down expen- se																				

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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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

HYATT HOTELS

Mailing Address 2025 AVENUE OF THE STARS

City State Zip Code
LOS ANGELES CA 90067

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.816

Date of Disbursement

/ /

Amount of Each Disbursement this Period

341.90

[MEMO ITEM]

Q1 and/or wind down expen-
se

B.

Full Name (Last, First, Middle Initial)

HYATT HOTELS

Mailing Address 2025 AVENUE OF THE STARS

City State Zip Code
LOS ANGELES CA 90067

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.817

Date of Disbursement

/ /

Amount of Each Disbursement this Period

89.08

[MEMO ITEM]

Q1 and/or wind down expen-
se

C.

Full Name (Last, First, Middle Initial)

I LOVE BURGERS

Mailing Address SHOPPES AT PALAZZO, 3255 LAS VEGAS

City State Zip Code
LAS VEGAS NV 89109

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.818

Date of Disbursement

/ /

Amount of Each Disbursement this Period

120.00

[MEMO ITEM]

Q1 and/or wind down expen-
se

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)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 544 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

INTERCONTINENTAL

Mailing Address 401 WARD PKWY

City
KANSAS CITY

State
MO

Zip Code
64112

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.819

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

2336.83

[MEMO ITEM]

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

INTERCONTINENTAL

Mailing Address 401 WARD PKWY

City
KANSAS CITY

State
MO

Zip Code
64112

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.820

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

191.43

[MEMO ITEM]

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City
SALT LAKE CITY

State
UT

Zip Code
84121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.821

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

15.00

[MEMO ITEM]

Q1 and/or wind down expense

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)
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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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City
SALT LAKE CITY

State
UT

Zip Code
84121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.822

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

50.00

[MEMO ITEM]

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City
SALT LAKE CITY

State
UT

Zip Code
84121

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.823

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

903.10

[MEMO ITEM]

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

JP'S EATERY

Mailing Address 38 MAIN ST, UNIT 1

City
DURHAM

State
NH

Zip Code
03824

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.824

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

25.50

[MEMO ITEM]

Q1 and/or wind down expense

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 546 / 970

<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)
Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)
KAY AND DAVES

Mailing Address 262 26TH ST

City SANTA MONICA State CA Zip Code 90402

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.825

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

24.85

[MEMO ITEM]

Q1 and/or wind down expen-
se

B.

Full Name (Last, First, Middle Initial)
LA VALENCIA HOTEL

Mailing Address 1132 PROSPECT ST

City LA JOLLA State CA Zip Code 92037

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.826

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

2.44

[MEMO ITEM]

Q1 and/or wind down expen-
se

C.

Full Name (Last, First, Middle Initial)
LA VALENCIA HOTEL

Mailing Address 1132 PROSPECT ST

City LA JOLLA State CA Zip Code 92037

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.827

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

29.00

[MEMO ITEM]

Q1 and/or wind down expen-
se

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

LEXIS-NEXIS

Mailing Address 9393 SPRINGBORO PIKE

City
MIAMISBURG

State
OH

Zip Code
45342

Purpose of Disbursement
SUBSCRIPTION FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.828

Date of Disbursement

/ /

Amount of Each Disbursement this Period

900.00

[MEMO ITEM]

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

MARRIOTT

Mailing Address 1001 BROADWAY

City
OAKLAND

State
CA

Zip Code
94607

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.829

Date of Disbursement

/ /

Amount of Each Disbursement this Period

240.06

[MEMO ITEM]

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

MARRIOTT

Mailing Address 1001 BROADWAY

City
OAKLAND

State
CA

Zip Code
94607

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.830

Date of Disbursement

/ /

Amount of Each Disbursement this Period

301.28

[MEMO ITEM]

Q1 and/or wind down expense

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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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MCCARRAN INTL AIRPORT

Mailing Address 5757 WAYNE NEWTON BLVD

City LAS VEGAS State NV Zip Code 89111

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.831

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

2.00

[MEMO ITEM]

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

MCDONALD'S

Mailing Address 3741 BROADWAY ST

City KANSAS CITY State MO Zip Code 64111

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.832

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

3.60

[MEMO ITEM]

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

MORTGAGE BANKERS ASSOCIATION

Mailing Address 1717 RHODE ISLAND AV NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
SUBSCRIPTION FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.833

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

7.53

[MEMO ITEM]

Q1 and/or wind down expense

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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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) **MORTGAGE BANKERS ASSOCIATION**

Mailing Address 1717 RHODE ISLAND AV NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
 SUBSCRIPTION FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.834

Date of Disbursement

/ /

Amount of Each Disbursement this Period

7.84

[MEMO ITEM]

Q1 and/or wind down expense

B. Full Name (Last, First, Middle Initial) **NORTH MAIN PETROLIUM**

Mailing Address 100 CROSSING BLVD

City FRAMINGHAM State MA Zip Code 01702

Purpose of Disbursement
 TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.802

Date of Disbursement

/ /

Amount of Each Disbursement this Period

31.05

[MEMO ITEM]

Q1 and/or wind down expense

C. Full Name (Last, First, Middle Initial) **OFFICEMAX**

Mailing Address 3605 WARRENSVILLE CTR RD

City BEACHWOOD State OH Zip Code 44122

Purpose of Disbursement
 OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.835

Date of Disbursement

/ /

Amount of Each Disbursement this Period

743.02

[MEMO ITEM]

Q1 and/or wind down expense

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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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

OFFICEMAX

Mailing Address 3605 WARRENSVILLE CTR RD

City
BEACHWOOD

State
OH

Zip Code
44122

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.836

Date of Disbursement

/ /

Amount of Each Disbursement this Period

705.47

[MEMO ITEM]

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

OFFICEMAX

Mailing Address 3605 WARRENSVILLE CTR RD

City
BEACHWOOD

State
OH

Zip Code
44122

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.837

Date of Disbursement

/ /

Amount of Each Disbursement this Period

987.02

[MEMO ITEM]

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

OLIVE GARDEN

Mailing Address 219 LOUDON RD

City
CONCORD

State
NH

Zip Code
03301

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.838

Date of Disbursement

/ /

Amount of Each Disbursement this Period

36.30

[MEMO ITEM]

Q1 and/or wind down expense

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:
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

PALAZZO

Mailing Address 3355 LAS VEGAS BLVD S

City LAS VEGAS State NV Zip Code 89109

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.839

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

7.56

[MEMO ITEM]

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

POTBELLY SANDWICH WORKS

Mailing Address 5800 S CICERO AVE

City CHICAGO State IL Zip Code 60638

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.840

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

14.67

[MEMO ITEM]

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

RITZ CARLTON

Mailing Address 100 CARONDELET PLZ

City SAINT LOUIS State MO Zip Code 63105

Purpose of Disbursement
ROOM RENTAL AND CATERING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.841

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

5225.50

[MEMO ITEM]

Q1 and/or wind down expense

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)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) RITZ CARLTON	Transaction ID: SB21B.842 Date of Disbursement																				
Mailing Address 100 CARONDELET PLZ	<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>0</td><td>5</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	4		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	4		2	0	1	1												
City SAINT LOUIS State MO Zip Code 63105	Amount of Each Disbursement this Period																				
Purpose of Disbursement ROOM RENTAL AND CATERING FOR PAC	<table border="1"> <tr> <td colspan="10">1500.00</td> </tr> </table>	1500.00																			
1500.00																					
Candidate Name	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] Q1 and/or wind down expense																				
B. Full Name (Last, First, Middle Initial) SAM ADAMS BREW HOUSE	Transaction ID: SB21B.843 Date of Disbursement																				
Mailing Address HARTSFIELD INTL AIRPORT	<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>0</td><td>5</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	4		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	4		2	0	1	1												
City ATLANTA State GA Zip Code 30320	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE	<table border="1"> <tr> <td colspan="10">5.08</td> </tr> </table>	5.08																			
5.08																					
Candidate Name	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] Q1 and/or wind down expense																				
C. Full Name (Last, First, Middle Initial) SHERATON HOTEL	Transaction ID: SB21B.844 Date of Disbursement																				
Mailing Address 39 DALTON ST	<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>0</td><td>5</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	4		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	4		2	0	1	1												
City BOSTON State MA Zip Code 02199	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE	<table border="1"> <tr> <td colspan="10">903.70</td> </tr> </table>	903.70																			
903.70																					
Candidate Name	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] Q1 and/or wind down expense																				

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)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) SHYNA COMPANY	Transaction ID: SB21B.845 Date of Disbursement																				
Mailing Address 1001 BROADWAY	<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>0</td><td>5</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	4		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	4		2	0	1	1												
City OAKLAND State CA Zip Code 94607	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE	<table border="1"> <tr> <td colspan="10">4.38</td> </tr> </table>	4.38																			
4.38																					
Candidate Name	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) ▼																				
B. Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES	Transaction ID: SB21B.849 Date of Disbursement																				
Mailing Address PO BOX 36611	<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>0</td><td>5</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	4		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	4		2	0	1	1												
City DALLAS State TX Zip Code 75235	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL	<table border="1"> <tr> <td colspan="10">29.00</td> </tr> </table>	29.00																			
29.00																					
Candidate Name	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) ▼																				
C. Full Name (Last, First, Middle Initial) ST LOUIS AIRPORT SHOP	Transaction ID: SB21B.850 Date of Disbursement																				
Mailing Address 9845 SAINT CHARLES RCK RD	<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>0</td><td>5</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	4		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	4		2	0	1	1												
City SAINT ANN State MO Zip Code 63074	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE	<table border="1"> <tr> <td colspan="10">6.48</td> </tr> </table>	6.48																			
6.48																					
Candidate Name	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 PageFOR 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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

STAPLES

Mailing Address 1070 LEXINGTON ST

City
WALTHAMState
MAZip Code
02452Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.851

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	4		2	0	1	1

Amount of Each Disbursement this Period

138.74

[MEMO ITEM]Q1 and/or wind down expen-
se**B.**

Full Name (Last, First, Middle Initial)

STARBUCKS

Mailing Address 4551 JAMBOREE RD

City
NEWPORT BEACHState
CAZip Code
92660Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.852

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	4		2	0	1	1

Amount of Each Disbursement this Period

12.50

[MEMO ITEM]Q1 and/or wind down expen-
se**C.**

Full Name (Last, First, Middle Initial)

STARBUCKS

Mailing Address TERMINAL B, BOSTON INTL AIRPORT

City
EAST BOSTONState
MAZip Code
02128Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.853

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	4		2	0	1	1

Amount of Each Disbursement this Period

7.05

[MEMO ITEM]Q1 and/or wind down expen-
se

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)
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Detailed Summary Page

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) STARBUCKS	Transaction ID: SB21B.854 Date of Disbursement
Mailing Address 11155 SANTA MONICA BLVD	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 4 / 2 0 1 1</div> </div>
City LOS ANGELES State CA Zip Code 90025	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSE	<div>13.30</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] Q1 and/or wind down expense
B. Full Name (Last, First, Middle Initial) SUBWAY	Transaction ID: SB21B.855 Date of Disbursement
Mailing Address 2810 BICENTENNIAL PKWY, SUITE 110	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 4 / 2 0 1 1</div> </div>
City HENDERSON State NV Zip Code 89044	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSE	<div>2.99</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] Q1 and/or wind down expense
C. Full Name (Last, First, Middle Initial) TELEFLORA	Transaction ID: SB21B.856 Date of Disbursement
Mailing Address 3737 NW 34TH STREET	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 4 / 2 0 1 1</div> </div>
City OKLAHOMA CITY State OK Zip Code 73112	Amount of Each Disbursement this Period
Purpose of Disbursement FLOWERS	<div>176.38</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] Q1 and/or wind down expense

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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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) TELEFLORA Mailing Address 3737 NW 34TH STREET	Transaction ID: SB21B.857 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 4 / 2 0 1 1</div> </div>
City OKLAHOMA CITY State OK Zip Code 73112 Purpose of Disbursement FLOWERS 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) ▼	Amount of Each Disbursement this Period <div>162.50</div> [MEMO ITEM] Q1 and/or wind down expense
B. Full Name (Last, First, Middle Initial) TELEFLORA Mailing Address 3737 NW 34TH STREET City OKLAHOMA CITY State OK Zip Code 73112 Purpose of Disbursement FLOWERS 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.858 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 4 / 2 0 1 1</div> </div> Amount of Each Disbursement this Period <div>162.50</div> [MEMO ITEM] Q1 and/or wind down expense
C. Full Name (Last, First, Middle Initial) THE COFFEE BEAN & TEA LEAF Mailing Address THE PALAZZO CASINO RESORT, 3355 LA City LAS VEGAS State NV Zip Code 89109 Purpose of Disbursement TRAVEL EXPENSE 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.859 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 4 / 2 0 1 1</div> </div> Amount of Each Disbursement this Period <div>20.15</div> [MEMO ITEM] Q1 and/or wind down expense

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

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(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
THE ISLAND HOTEL NEWPORT

Mailing Address 690 NEWPORT CENTER DR

City NEWPORT BEACH State CA Zip Code 92660

Purpose of Disbursement
ROOM RENTAL AND CATERING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.860

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

2780.98

[MEMO ITEM]

Q1 and/or wind down expense

B. Full Name (Last, First, Middle Initial)
THE ISLAND HOTEL NEWPORT

Mailing Address 690 NEWPORT CENTER DR

City NEWPORT BEACH State CA Zip Code 92660

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.861

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

284.90

[MEMO ITEM]

Q1 and/or wind down expense

C. Full Name (Last, First, Middle Initial)
THE ISLAND HOTEL NEWPORT

Mailing Address 690 NEWPORT CENTER DR

City NEWPORT BEACH State CA Zip Code 92660

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.862

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

402.61

[MEMO ITEM]

Q1 and/or wind down expense

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

THE REGENCY CLUB

Mailing Address 10900 WILSHER BLVD #1700

City
LOS ANGELES

State
CA

Zip Code
90024

Purpose of Disbursement
ROOM RENTAL AND CATERING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.863

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

5941.31

[MEMO ITEM]

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

THE RESIDENCE INN

Mailing Address 1100 MCMORROW AVE

City
SAINT LOUIS

State
MO

Zip Code
63117

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.864

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

207.69

[MEMO ITEM]

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

THE RESIDENCE INN

Mailing Address 1100 MCMORROW AVE

City
SAINT LOUIS

State
MO

Zip Code
63117

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.865

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

215.36

[MEMO ITEM]

Q1 and/or wind down expense

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

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

THE UPPER CRUST

Mailing Address 20 CHARLES ST

City
BOSTON

State
MA

Zip Code
02114

Purpose of Disbursement
MEETING EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.866

Date of Disbursement

/ /

Amount of Each Disbursement this Period

104.35

[MEMO ITEM]

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

UNION LEAGUE PHILADELPHIA

Mailing Address 140 S BROAD ST

City
PHILADELPHIA

State
PA

Zip Code
19102

Purpose of Disbursement
CATERING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.867

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1645.06

[MEMO ITEM]

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City
PHOENIX

State
AZ

Zip Code
85034

Purpose of Disbursement
TRAVEL; CREDIT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.868

Date of Disbursement

/ /

Amount of Each Disbursement this Period

-150.70

[MEMO ITEM]

Q1 and/or wind down expense

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

VENETIAN/PALAZZO

Mailing Address 3355 LAS VEGAS BLVD S

City LAS VEGAS State NV Zip Code 89109

Purpose of Disbursement
MEETING EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.795

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

709.61

[MEMO ITEM]

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

VENETIAN/PALAZZO

Mailing Address 3355 LAS VEGAS BLVD S

City LAS VEGAS State NV Zip Code 89109

Purpose of Disbursement
MEETING EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.796

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

661.34

[MEMO ITEM]

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

VENETIAN/PALAZZO

Mailing Address 3355 LAS VEGAS BLVD S

City LAS VEGAS State NV Zip Code 89109

Purpose of Disbursement
MEETING EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.797

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

1010.33

[MEMO ITEM]

Q1 and/or wind down expense

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

VIRGIN AMERICAN

Mailing Address 555 AIRPORT BLVD FL 2ND

City
BURLINGAME

State
CA

Zip Code
94010

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.869

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1013.39

[MEMO ITEM]

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

WIENERSCHNITZEL

Mailing Address 7390 S LAS VEGAS BLVD, SUITE 100

City
LAS VEGAS

State
NV

Zip Code
89123

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.870

Date of Disbursement

/ /

Amount of Each Disbursement this Period

9.36

[MEMO ITEM]

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

AMERICAN EXPRESS

Mailing Address PO BOX 2855

City
NEW YORK

State
NY

Zip Code
10116

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.903

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4.95

SUBTOTAL of Disbursements This Page (optional)

4.95

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

AMERICAN EXPRESS

Mailing Address PO BOX 2855

City
NEW YORK

State
NY

Zip Code
10116

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.904

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1314.75

B.

Full Name (Last, First, Middle Initial)

AMERICAN EXPRESS

Mailing Address PO BOX 2855

City
NEW YORK

State
NY

Zip Code
10116

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.905

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4.95

C.

Full Name (Last, First, Middle Initial)

AMERICAN EXPRESS

Mailing Address PO BOX 2855

City
NEW YORK

State
NY

Zip Code
10116

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.906

Date of Disbursement

/ /

Amount of Each Disbursement this Period

292.30

SUBTOTAL of Disbursements This Page (optional)

1612.00

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

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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)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS	Transaction ID: SB21B.919 Date of Disbursement																				
Mailing Address PO BOX 2855	<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>0</td><td>2</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	7		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	7		2	0	1	1												
City NEW YORK State NY Zip Code 10116	Amount of Each Disbursement this Period																				
Purpose of Disbursement CREDIT CARD PAYMENT	<table border="1"> <tr> <td>8053.13</td> </tr> </table>	8053.13																			
8053.13																					
Candidate Name	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) ▼																				
SEE CHARGES BELOW																					
B. Full Name (Last, First, Middle Initial) BITEFOOD, LTD.	Transaction ID: SB21B.920 Date of Disbursement																				
Mailing Address 690 GREENWICH ST APT 4E	<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>0</td><td>2</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	7		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	7		2	0	1	1												
City GREENWICH State CT Zip Code 10014	Amount of Each Disbursement this Period																				
Purpose of Disbursement CATERING FOR PAC	<table border="1"> <tr> <td>8053.13</td> </tr> </table>	8053.13																			
8053.13																					
Candidate Name	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]																					
C. Full Name (Last, First, Middle Initial) AS YOU WISH CATERING	Transaction ID: SB21B.146 Date of Disbursement																				
Mailing Address 5950 W. CHARLESTON UNITE 120	<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>0</td><td>2</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	8		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	8		2	0	1	1												
City LAS VEGAS State NV Zip Code 89146	Amount of Each Disbursement this Period																				
Purpose of Disbursement CATERING FOR PAC	<table border="1"> <tr> <td>594.55</td> </tr> </table>	594.55																			
594.55																					
Candidate Name	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)

8647.68

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

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(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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

ATCHLEY AND ASSOCIATES

Mailing Address 6850 AUSTIN CENTER BLVD., STE. 180

City
AUSTIN

State
TX

Zip Code
78731

Purpose of Disbursement
ACCOUNTING SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.311

Date of Disbursement

/ /

Amount of Each Disbursement this Period

774.80

B.

Full Name (Last, First, Middle Initial)

ATCHLEY AND ASSOCIATES

Mailing Address 6850 AUSTIN CENTER BLVD., STE. 180

City
AUSTIN

State
TX

Zip Code
78731

Purpose of Disbursement
ACCOUNTING SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.741

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1181.00

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

BANK OF AMERICA

Mailing Address 730 15TH STREET NW

City
WASHINGTON

State
DC

Zip Code
20005

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.029

Date of Disbursement

/ /

Amount of Each Disbursement this Period

81.99

SUBTOTAL of Disbursements This Page (optional)

2037.79

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 565 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

BANK OF AMERICA

Mailing Address 730 15TH STREET NW

City
WASHINGTON

State
DC

Zip Code
20005

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.029A

Date of Disbursement

/ /

Amount of Each Disbursement this Period

40.82

B.

Full Name (Last, First, Middle Initial)

BANK OF AMERICA

Mailing Address 730 15TH STREET NW

City
WASHINGTON

State
DC

Zip Code
20005

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.029B

Date of Disbursement

/ /

Amount of Each Disbursement this Period

19.98

C.

Full Name (Last, First, Middle Initial)

BANK OF AMERICA

Mailing Address 730 15TH STREET NW

City
WASHINGTON

State
DC

Zip Code
20005

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.334

Date of Disbursement

/ /

Amount of Each Disbursement this Period

399.16

SUBTOTAL of Disbursements This Page (optional)

459.96

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 566 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

BANK OF AMERICA

Mailing Address 730 15TH STREET NW

City
WASHINGTON

State
DC

Zip Code
20005

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.334A

Date of Disbursement

/ /

Amount of Each Disbursement this Period

115.60

B.

Full Name (Last, First, Middle Initial)

BANK OF AMERICA

Mailing Address 730 15TH STREET NW

City
WASHINGTON

State
DC

Zip Code
20005

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.726

Date of Disbursement

/ /

Amount of Each Disbursement this Period

436.01

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

BANK OF AMERICA

Mailing Address 730 15TH STREET NW

City
WASHINGTON

State
DC

Zip Code
20005

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.877

Date of Disbursement

/ /

Amount of Each Disbursement this Period

308.95

Q1 and/or wind down expense

SUBTOTAL of Disbursements This Page (optional)

860.56

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 567 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

BANK OF AMERICA

Mailing Address 730 15TH STREET NW

City
WASHINGTON

State
DC

Zip Code
20005

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.900

Date of Disbursement

/ /

Amount of Each Disbursement this Period

37.23

B.

Full Name (Last, First, Middle Initial)

BANK OF AMERICA

Mailing Address 730 15TH STREET NW

City
WASHINGTON

State
DC

Zip Code
20005

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.901

Date of Disbursement

/ /

Amount of Each Disbursement this Period

41.06

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

BANK OF AMERICA

Mailing Address 730 15TH STREET NW

City
WASHINGTON

State
DC

Zip Code
20005

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.902

Date of Disbursement

/ /

Amount of Each Disbursement this Period

25.00

Q1 and/or wind down expense

SUBTOTAL of Disbursements This Page (optional)

103.29

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)

PAGE 568 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

BANK OF AMERICA

Mailing Address 730 15TH STREET NW

City
WASHINGTON

State
DC

Zip Code
20005

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.939

Date of Disbursement

06 / 15 / 2011

Amount of Each Disbursement this Period

106.46

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

BANK OF AMERICA

Mailing Address 730 15TH STREET NW

City
WASHINGTON

State
DC

Zip Code
20005

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.952

Date of Disbursement

06 / 15 / 2011

Amount of Each Disbursement this Period

20.14

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

BEUS GILBERT, PLCC

Mailing Address 4800 N. SCOTTSDALES ROAD
SUITE 6000

City
SCOTTSDALE

State
AZ

Zip Code
85251

Purpose of Disbursement
ROOM RENTAL FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.158

Date of Disbursement

02 / 23 / 2011

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional)

376.60

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 569 / 970

<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)
Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)
BITLY, INC.

Mailing Address 416 WEST 13TH STREET
SUITE 203

City NEW YORK State NY Zip Code 10014

Purpose of Disbursement
WEB SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.715

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2985.00

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)
BITLY, INC.

Mailing Address 416 WEST 13TH STREET
SUITE 203

City NEW YORK State NY Zip Code 10014

Purpose of Disbursement
WEB SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.718

Date of Disbursement

/ /

Amount of Each Disbursement this Period

331.00

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)
CAMBRIDGE OFFSET PRINTING

Mailing Address 56 CREIGHTON STREET

City CAMBRIDGE State MA Zip Code 02140

Purpose of Disbursement
PRINTING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.134

Date of Disbursement

/ /

Amount of Each Disbursement this Period

425.69

SUBTOTAL of Disbursements This Page (optional)

3741.69

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 570 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

CAMBRIDGE OFFSET PRINTING

Mailing Address 56 CREIGHTON STREET

City CAMBRIDGE State MA Zip Code 02140

Purpose of Disbursement
PRINTING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.335

Date of Disbursement

/ /

Amount of Each Disbursement this Period

476.56

B.

Full Name (Last, First, Middle Initial)

CAMBRIDGE OFFSET PRINTING

Mailing Address 56 CREIGHTON STREET

City CAMBRIDGE State MA Zip Code 02140

Purpose of Disbursement
PRINTING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.336

Date of Disbursement

/ /

Amount of Each Disbursement this Period

80.08

C.

Full Name (Last, First, Middle Initial)

CAMBRIDGE OFFSET PRINTING

Mailing Address 56 CREIGHTON STREET

City CAMBRIDGE State MA Zip Code 02140

Purpose of Disbursement
PRINTING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.370

Date of Disbursement

/ /

Amount of Each Disbursement this Period

65.02

SUBTOTAL of Disbursements This Page (optional)

621.66

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 571 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

CAMBRIDGE OFFSET PRINTING

Mailing Address 56 CREIGHTON STREET

City CAMBRIDGE State MA Zip Code 02140

Purpose of Disbursement
PRINTING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.388

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

167.54

B.

Full Name (Last, First, Middle Initial)

CITY EXPRESS, INC.

Mailing Address PO BOX 52317

City BOSTON State MA Zip Code 02205

Purpose of Disbursement
DELIVERY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.942

Date of Disbursement

06 / 21 / 2011

Amount of Each Disbursement this Period

26.56

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

CITY EXPRESS, INC.

Mailing Address PO BOX 52317

City BOSTON State MA Zip Code 02205

Purpose of Disbursement
DELIVERY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.943

Date of Disbursement

06 / 21 / 2011

Amount of Each Disbursement this Period

251.52

Q1 and/or wind down expense

SUBTOTAL of Disbursements This Page (optional)

445.62

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 572 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

CITY EXPRESS, INC.

Mailing Address PO BOX 52317

City
BOSTON

State
MA

Zip Code
02205

Purpose of Disbursement
DELIVERY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.944

Date of Disbursement

06 / 21 / 2011

Amount of Each Disbursement this Period

83.21

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

CITY EXPRESS, INC.

Mailing Address PO BOX 52317

City
BOSTON

State
MA

Zip Code
02205

Purpose of Disbursement
DELIVERY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.945

Date of Disbursement

06 / 21 / 2011

Amount of Each Disbursement this Period

83.21

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

CMDI

Mailing Address 7704 LEESBURG PIKE

City
FALLS CHURCH

State
VA

Zip Code
22043

Purpose of Disbursement
DATA MANAGEMENT SERVICES FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.020

Date of Disbursement

01 / 14 / 2011

Amount of Each Disbursement this Period

3702.74

SUBTOTAL of Disbursements This Page (optional)

3869.16

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 573 / 970

<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)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) CMDI	Transaction ID: SB21B.021 Date of Disbursement																				
Mailing Address 7704 LEESBURG PIKE	<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>0</td><td>1</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	4		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	4		2	0	1	1												
City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period																				
Purpose of Disbursement DATA MANAGEMENT SERVICES FOR PAC	<table border="1"> <tr> <td>3000.00</td> </tr> </table>	3000.00																			
3000.00																					
Candidate Name	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) ▼																				
B. Full Name (Last, First, Middle Initial) CMDI	Transaction ID: SB21B.124 Date of Disbursement																				
Mailing Address 7704 LEESBURG PIKE	<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>0</td><td>2</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	6		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	6		2	0	1	1												
City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period																				
Purpose of Disbursement DATA MANAGEMENT SERVICES	<table border="1"> <tr> <td>3000.00</td> </tr> </table>	3000.00																			
3000.00																					
Candidate Name	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) ▼																				
C. Full Name (Last, First, Middle Initial) CMDI	Transaction ID: SB21B.125 Date of Disbursement																				
Mailing Address 7704 LEESBURG PIKE	<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>0</td><td>2</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	6		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	6		2	0	1	1												
City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period																				
Purpose of Disbursement DATA MANAGEMENT SERVICES	<table border="1"> <tr> <td>216.87</td> </tr> </table>	216.87																			
216.87																					
Candidate Name	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)

6216.87

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)

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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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

CMDI

Mailing Address 7704 LEESBURG PIKE

City
FALLS CHURCH

State
VA

Zip Code
22043

Purpose of Disbursement
DATA MANAGEMENT SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.126

Date of Disbursement

/ /

Amount of Each Disbursement this Period

50.00

B.

Full Name (Last, First, Middle Initial)

CMDI

Mailing Address 7704 LEESBURG PIKE

City
FALLS CHURCH

State
VA

Zip Code
22043

Purpose of Disbursement
DATA MANAGEMENT SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.127

Date of Disbursement

/ /

Amount of Each Disbursement this Period

6818.10

C.

Full Name (Last, First, Middle Initial)

CMDI

Mailing Address 7704 LEESBURG PIKE

City
FALLS CHURCH

State
VA

Zip Code
22043

Purpose of Disbursement
WEB SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.312

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5809.31

SUBTOTAL of Disbursements This Page (optional)

12677.41

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 575 / 970

<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)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) CMDI Mailing Address 7704 LEESBURG PIKE	Transaction ID: SB21B.313 Date of Disbursement <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>0</td><td>3</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	9		2	0	1	1	
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		0	9		2	0	1	1													
City FALLS CHURCH State VA Zip Code 22043 Purpose of Disbursement DATA MANAGEMENT SERVICES 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) ▼	Amount of Each Disbursement this Period <table border="1"> <tr> <td>3000.00</td> </tr> </table>	3000.00																				
3000.00																						
B. Full Name (Last, First, Middle Initial) CMDI Mailing Address 7704 LEESBURG PIKE City FALLS CHURCH State VA Zip Code 22043 Purpose of Disbursement DATA MANAGEMENT SERVICES 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.314 Date of Disbursement <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>0</td><td>3</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>8959.45</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	9		2	0	1	1	8959.45
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		0	9		2	0	1	1													
8959.45																						
C. Full Name (Last, First, Middle Initial) CMDI Mailing Address 7704 LEESBURG PIKE City FALLS CHURCH State VA Zip Code 22043 Purpose of Disbursement DATA MANAGEMENT SERVICES 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.315 Date of Disbursement <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>0</td><td>3</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>191.63</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	9		2	0	1	1	191.63
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		0	9		2	0	1	1													
191.63																						

SUBTOTAL of Disbursements This Page (optional)

12151.08

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 576 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

CMDI

Mailing Address 7704 LEESBURG PIKE

City
FALLS CHURCH

State
VA

Zip Code
22043

Purpose of Disbursement
DATA MANAGEMENT SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.316

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1195.00

B.

Full Name (Last, First, Middle Initial)

CMDI

Mailing Address 7704 LEESBURG PIKE

City
FALLS CHURCH

State
VA

Zip Code
22043

Purpose of Disbursement
DATA MANAGEMENT SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.692

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1198.30

C.

Full Name (Last, First, Middle Initial)

CMDI

Mailing Address 7704 LEESBURG PIKE

City
FALLS CHURCH

State
VA

Zip Code
22043

Purpose of Disbursement
DATA MANAGEMENT SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.693

Date of Disbursement

/ /

Amount of Each Disbursement this Period

8161.25

SUBTOTAL of Disbursements This Page (optional)

10554.55

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)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) CMDI	Transaction ID: SB21B.695 Date of Disbursement																				
Mailing Address 7704 LEESBURG PIKE	<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>0</td><td>4</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	8		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	8		2	0	1	1												
City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period																				
Purpose of Disbursement DATA MANAGEMENT SERVICES	<table border="1"> <tr> <td colspan="10">3000.00</td> </tr> </table>	3000.00																			
3000.00																					
Candidate Name	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) ▼																				
B. Full Name (Last, First, Middle Initial) CMDI	Transaction ID: SB21B.719 Date of Disbursement																				
Mailing Address 7704 LEESBURG PIKE	<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>0</td><td>4</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	3		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	3		2	0	1	1												
City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period																				
Purpose of Disbursement WEB SERVICES	<table border="1"> <tr> <td colspan="10">1786.02</td> </tr> </table>	1786.02																			
1786.02																					
Candidate Name	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) ▼																				
C. Full Name (Last, First, Middle Initial) CMDI	Transaction ID: SB21B.764 Date of Disbursement																				
Mailing Address 7704 LEESBURG PIKE	<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>0</td><td>5</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	4		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	4		2	0	1	1												
City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period																				
Purpose of Disbursement DATA MANAGEMENT SERVICES	<table border="1"> <tr> <td colspan="10">25.00</td> </tr> </table>	25.00																			
25.00																					
Candidate Name	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)

4811.02

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 PageFOR LINE NUMBER:
(check only one)

PAGE 578 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

CMDI

Mailing Address 7704 LEESBURG PIKE

City
FALLS CHURCHState
VAZip Code
22043Purpose of Disbursement
DATA MANAGEMENT SERVICES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.888

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	0		2	0	1	1

Amount of Each Disbursement this Period

4564.10

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

CMDI

Mailing Address 7704 LEESBURG PIKE

City
FALLS CHURCHState
VAZip Code
22043Purpose of Disbursement
DATA MANAGEMENT SERVICES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.889

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	0		2	0	1	1

Amount of Each Disbursement this Period

500.00

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

CMDI

Mailing Address 7704 LEESBURG PIKE

City
FALLS CHURCHState
VAZip Code
22043Purpose of Disbursement
DATA MANAGEMENT SERVICES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.931

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	0		2	0	1	1

Amount of Each Disbursement this Period

500.00

Q1 and/or wind down expense

SUBTOTAL of Disbursements This Page (optional)

5564.10

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 PageFOR LINE NUMBER:
(check only one)

PAGE 579 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

CMDI

Mailing Address 7704 LEESBURG PIKE

City
FALLS CHURCHState
VAZip Code
22043Purpose of Disbursement
DATA MANAGEMENT SERVICES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.932

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	0	/	2	0	1	1

Amount of Each Disbursement this Period

1080.40

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

COMMONWEALTH OF MASSACHUSETTS

Mailing Address SECRETARY OF THE COMMONWEALTH
ONE ASHBURTON PLACECity
BOSTONState
MAZip Code
02108Purpose of Disbursement
TAXES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.305

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	7	/	2	0	1	1

Amount of Each Disbursement this Period

20.00

C.

Full Name (Last, First, Middle Initial)

COMMONWEALTH OF MASSACHUSETTS

Mailing Address SECRETARY OF THE COMMONWEALTH
ONE ASHBURTON PLACECity
BOSTONState
MAZip Code
02108Purpose of Disbursement
TAXES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.306

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	7	/	2	0	1	1

Amount of Each Disbursement this Period

3390.00

SUBTOTAL of Disbursements This Page (optional)

4490.40

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)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

CORPORATE AIR, LLC

Mailing Address 15 ALLEGHENY COUNTY AIRPORT

City
PITTSBURGH

State
PA

Zip Code
15122

Purpose of Disbursement
TRAVEL ON 3/23/11

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.384

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4455.00

B.

Full Name (Last, First, Middle Initial)

DEVINE STRATEGIES LLC

Mailing Address 43 NORTH MAIN STREET

City
CONCORD

State
NH

Zip Code
03301

Purpose of Disbursement
STRATEGY CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.132

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3000.00

C.

Full Name (Last, First, Middle Initial)

DEVINE STRATEGIES LLC

Mailing Address 43 NORTH MAIN STREET

City
CONCORD

State
NH

Zip Code
03301

Purpose of Disbursement
STRATEGY CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.319

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional)

10455.00

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 581 / 970

<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)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) DORSEE PRODUCTIONS	Transaction ID: SB21B.875 Date of Disbursement																				
Mailing Address PO BOX 455	<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>0</td><td>5</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	2		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	2		2	0	1	1												
City RANCHO SANTA FE State CA Zip Code 92067	Amount of Each Disbursement this Period																				
Purpose of Disbursement EVENT EXPENSE REIMBUREMENT	<table border="1"> <tr> <td>2</td><td>6</td><td>4</td><td>.</td><td>5</td><td>7</td> </tr> </table>	2	6	4	.	5	7														
2	6	4	.	5	7																
Candidate Name	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) ▼ Q1 and/or wind down expense																				
B. Full Name (Last, First, Middle Initial) DORSEE PRODUCTIONS	Transaction ID: SB21B.891 Date of Disbursement																				
Mailing Address PO BOX 455	<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>0</td><td>5</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	5		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		2	5		2	0	1	1												
City RANCHO SANTA FE State CA Zip Code 92067	Amount of Each Disbursement this Period																				
Purpose of Disbursement PRINTING FOR PAC	<table border="1"> <tr> <td>1</td><td>3</td><td>5</td><td>.</td><td>3</td><td>9</td> </tr> </table>	1	3	5	.	3	9														
1	3	5	.	3	9																
Candidate Name	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) ▼ Q1 and/or wind down expense																				
C. Full Name (Last, First, Middle Initial) DORSEE PRODUCTIONS	Transaction ID: SB21B.935 Date of Disbursement																				
Mailing Address PO BOX 455	<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>0</td><td>6</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	5		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	5		2	0	1	1												
City RANCHO SANTA FE State CA Zip Code 92067	Amount of Each Disbursement this Period																				
Purpose of Disbursement OFFICE SUPPLIES AND PRINTING REIMBURSEME	<table border="1"> <tr> <td>1</td><td>2</td><td>9</td><td>.</td><td>1</td><td>8</td> </tr> </table>	1	2	9	.	1	8														
1	2	9	.	1	8																
Candidate Name	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) ▼ Q1 and/or wind down expense																				

SUBTOTAL of Disbursements This Page (optional)

529.14

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 582 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

DURANGO WEST PROPERTIES

Mailing Address 7881 W. CHARLESTON BLVD., SUITE 25

City LAS VEGAS State NV Zip Code 89117

Purpose of Disbursement
ROOM RENTAL FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.147

Date of Disbursement

/ /

Amount of Each Disbursement this Period

200.00

B.

Full Name (Last, First, Middle Initial)

ECS VIDEO SYSTEMS

Mailing Address 50 HUNT STREET

City WATERTOWN State MA Zip Code 02472

Purpose of Disbursement
EQUIPMENT RENTAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.180

Date of Disbursement

/ /

Amount of Each Disbursement this Period

905.00

C.

Full Name (Last, First, Middle Initial)

ELAVON

Mailing Address ONE CONCOURSE PARKWAY
SUITE 300

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.005

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1435.93

SUBTOTAL of Disbursements This Page (optional)

2540.93

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 583 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

ELAVON

Mailing Address ONE CONCOURSE PARKWAY
SUITE 300

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.006

Date of Disbursement

/ /

Amount of Each Disbursement this Period

317.26

B.

Full Name (Last, First, Middle Initial)

ELAVON

Mailing Address ONE CONCOURSE PARKWAY
SUITE 300

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.007

Date of Disbursement

/ /

Amount of Each Disbursement this Period

75.00

C.

Full Name (Last, First, Middle Initial)

ELAVON

Mailing Address ONE CONCOURSE PARKWAY
SUITE 300

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.043

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1878.93

SUBTOTAL of Disbursements This Page (optional)

2271.19

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 584 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

ELAVON

Mailing Address ONE CONCOURSE PARKWAY
SUITE 300

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.044

Date of Disbursement

02 / 02 / 2011

Amount of Each Disbursement this Period

1090.67

B.

Full Name (Last, First, Middle Initial)

ELAVON

Mailing Address ONE CONCOURSE PARKWAY
SUITE 300

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.045

Date of Disbursement

02 / 02 / 2011

Amount of Each Disbursement this Period

367.30

C.

Full Name (Last, First, Middle Initial)

ELAVON

Mailing Address ONE CONCOURSE PARKWAY
SUITE 300

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.122

Date of Disbursement

02 / 15 / 2011

Amount of Each Disbursement this Period

473.78

SUBTOTAL of Disbursements This Page (optional)

1931.75

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 585 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

ELAVON

Mailing Address ONE CONCOURSE PARKWAY
SUITE 300

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.175

Date of Disbursement

03 / 02 / 2011

Amount of Each Disbursement this Period

10773.32

B.

Full Name (Last, First, Middle Initial)

ELAVON

Mailing Address ONE CONCOURSE PARKWAY
SUITE 300

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.176

Date of Disbursement

03 / 02 / 2011

Amount of Each Disbursement this Period

4221.28

C.

Full Name (Last, First, Middle Initial)

ELAVON

Mailing Address ONE CONCOURSE PARKWAY
SUITE 300

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.177

Date of Disbursement

03 / 02 / 2011

Amount of Each Disbursement this Period

203.55

SUBTOTAL of Disbursements This Page (optional)

15198.15

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 586 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

ELAVON

Mailing Address ONE CONCOURSE PARKWAY
SUITE 300

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.679

Date of Disbursement

04 / 04 / 2011

Amount of Each Disbursement this Period

5602.50

B.

Full Name (Last, First, Middle Initial)

ELAVON

Mailing Address ONE CONCOURSE PARKWAY
SUITE 300

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.680

Date of Disbursement

04 / 04 / 2011

Amount of Each Disbursement this Period

1618.79

C.

Full Name (Last, First, Middle Initial)

ELAVON

Mailing Address ONE CONCOURSE PARKWAY
SUITE 300

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.681

Date of Disbursement

04 / 04 / 2011

Amount of Each Disbursement this Period

75.00

SUBTOTAL of Disbursements This Page (optional)

7296.29

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)

PAGE 587 / 970

<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)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) ELAVON	Transaction ID: SB21B.759 Date of Disbursement																				
Mailing Address ONE CONCOURSE PARKWAY SUITE 300	<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>0</td><td>5</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	2		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	2		2	0	1	1												
City ATLANTA State GA Zip Code 30328	Amount of Each Disbursement this Period																				
Purpose of Disbursement BANK FEE	<table border="1"> <tr> <td colspan="10">5652.81</td> </tr> </table>	5652.81																			
5652.81																					
Candidate Name	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																			
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) ▼ Q1 and/or wind down expense																				
B. Full Name (Last, First, Middle Initial) ELAVON	Transaction ID: SB21B.760 Date of Disbursement																				
Mailing Address ONE CONCOURSE PARKWAY SUITE 300	<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>0</td><td>5</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	2		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	2		2	0	1	1												
City ATLANTA State GA Zip Code 30328	Amount of Each Disbursement this Period																				
Purpose of Disbursement BANK FEE	<table border="1"> <tr> <td colspan="10">2346.75</td> </tr> </table>	2346.75																			
2346.75																					
Candidate Name	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																			
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) ▼ Q1 and/or wind down expense																				
C. Full Name (Last, First, Middle Initial) ELAVON	Transaction ID: SB21B.761 Date of Disbursement																				
Mailing Address ONE CONCOURSE PARKWAY SUITE 300	<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>0</td><td>5</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	2		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	2		2	0	1	1												
City ATLANTA State GA Zip Code 30328	Amount of Each Disbursement this Period																				
Purpose of Disbursement BANK FEE	<table border="1"> <tr> <td colspan="10">75.00</td> </tr> </table>	75.00																			
75.00																					
Candidate Name	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																			
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) ▼ Q1 and/or wind down expense																				

SUBTOTAL of Disbursements This Page (optional)

8074.56

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 588 / 970

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

ELAVON

Mailing Address ONE CONCOURSE PARKWAY
SUITE 300

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.922

Date of Disbursement

/ /

Amount of Each Disbursement this Period

255.00

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

ELAVON

Mailing Address ONE CONCOURSE PARKWAY
SUITE 300

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.923

Date of Disbursement

/ /

Amount of Each Disbursement this Period

86.73

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

ELAVON

Mailing Address ONE CONCOURSE PARKWAY
SUITE 300

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.924

Date of Disbursement

/ /

Amount of Each Disbursement this Period

60.15

Q1 and/or wind down expense

SUBTOTAL of Disbursements This Page (optional)

401.88

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 589 / 970

<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)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) FEDEX	Transaction ID: SB21B.019 Date of Disbursement																				
Mailing Address PO BOX 371461	<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>0</td><td>1</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	4		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	4		2	0	1	1												
City PITTSBURGH State PA Zip Code 15250	Amount of Each Disbursement this Period																				
Purpose of Disbursement DELIVERY Candidate Name	<table border="1"> <tr> <td colspan="10">149.64</td> </tr> </table>	149.64																			
149.64																					
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) ▼																				
B. Full Name (Last, First, Middle Initial) FEDEX	Transaction ID: SB21B.028 Date of Disbursement																				
Mailing Address PO BOX 371461	<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>0</td><td>1</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	4		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	4		2	0	1	1												
City PITTSBURGH State PA Zip Code 15250	Amount of Each Disbursement this Period																				
Purpose of Disbursement DELIVERY Candidate Name	<table border="1"> <tr> <td colspan="10">313.36</td> </tr> </table>	313.36																			
313.36																					
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) ▼																				
C. Full Name (Last, First, Middle Initial) FEDEX	Transaction ID: SB21B.038 Date of Disbursement																				
Mailing Address PO BOX 371461	<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>0</td><td>1</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		3	1		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		3	1		2	0	1	1												
City PITTSBURGH State PA Zip Code 15250	Amount of Each Disbursement this Period																				
Purpose of Disbursement DELIVERY Candidate Name	<table border="1"> <tr> <td colspan="10">51.17</td> </tr> </table>	51.17																			
51.17																					
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)

514.17

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 590 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

FEDEX

Mailing Address PO BOX 371461

City
PITTSBURGH

State
PA

Zip Code
15250

Purpose of Disbursement
DELIVERY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.039

Date of Disbursement

/ /

Amount of Each Disbursement this Period

90.19

B.

Full Name (Last, First, Middle Initial)

FEDEX

Mailing Address PO BOX 371461

City
PITTSBURGH

State
PA

Zip Code
15250

Purpose of Disbursement
DELIVERY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.148

Date of Disbursement

/ /

Amount of Each Disbursement this Period

68.50

C.

Full Name (Last, First, Middle Initial)

FEDEX

Mailing Address PO BOX 371461

City
PITTSBURGH

State
PA

Zip Code
15250

Purpose of Disbursement
DELIVERY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.149

Date of Disbursement

/ /

Amount of Each Disbursement this Period

184.48

SUBTOTAL of Disbursements This Page (optional)

343.17

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 591 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

FEDEX

Mailing Address PO BOX 371461

City
PITTSBURGH

State
PA

Zip Code
15250

Purpose of Disbursement
DELIVERY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.150

Date of Disbursement

/ /

Amount of Each Disbursement this Period

125.06

B.

Full Name (Last, First, Middle Initial)

FEDEX

Mailing Address PO BOX 371461

City
PITTSBURGH

State
PA

Zip Code
15250

Purpose of Disbursement
DELIVERY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.162

Date of Disbursement

/ /

Amount of Each Disbursement this Period

195.76

C.

Full Name (Last, First, Middle Initial)

FEDEX

Mailing Address PO BOX 371461

City
PITTSBURGH

State
PA

Zip Code
15250

Purpose of Disbursement
DELIVERY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.163

Date of Disbursement

/ /

Amount of Each Disbursement this Period

256.79

SUBTOTAL of Disbursements This Page (optional)

577.61

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 592 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

FEDEX

Mailing Address PO BOX 371461

City
PITTSBURGH

State
PA

Zip Code
15250

Purpose of Disbursement
DELIVERY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.347

Date of Disbursement

/ /

Amount of Each Disbursement this Period

301.75

B.

Full Name (Last, First, Middle Initial)

FEDEX

Mailing Address PO BOX 371461

City
PITTSBURGH

State
PA

Zip Code
15250

Purpose of Disbursement
DELIVERY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.348

Date of Disbursement

/ /

Amount of Each Disbursement this Period

199.52

C.

Full Name (Last, First, Middle Initial)

FEDEX

Mailing Address PO BOX 371461

City
PITTSBURGH

State
PA

Zip Code
15250

Purpose of Disbursement
DELIVERY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.374

Date of Disbursement

/ /

Amount of Each Disbursement this Period

142.54

SUBTOTAL of Disbursements This Page (optional)

643.81

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 PageFOR LINE NUMBER:
(check only one)

PAGE 593 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

FEDEX

Mailing Address PO BOX 371461

City
PITTSBURGHState
PAZip Code
15250Purpose of Disbursement
DELIVERY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.385

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	0	/	2	0	1	1

Amount of Each Disbursement this Period

459.17

B.

Full Name (Last, First, Middle Initial)

FEDEX

Mailing Address PO BOX 371461

City
PITTSBURGHState
PAZip Code
15250Purpose of Disbursement
DELIVERY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.736

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	5	/	2	0	1	1

Amount of Each Disbursement this Period

168.98

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

FEDEX

Mailing Address PO BOX 371461

City
PITTSBURGHState
PAZip Code
15250Purpose of Disbursement
DELIVERY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.737

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	5	/	2	0	1	1

Amount of Each Disbursement this Period

769.18

Q1 and/or wind down expense

SUBTOTAL of Disbursements This Page (optional)

1397.33

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

FEDEX

Mailing Address PO BOX 371461

City
PITTSBURGH

State
PA

Zip Code
15250

Purpose of Disbursement
DELIVERY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.738

Date of Disbursement

04 / 25 / 2011

Amount of Each Disbursement this Period

1881.97

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

FEDEX

Mailing Address PO BOX 371461

City
PITTSBURGH

State
PA

Zip Code
15250

Purpose of Disbursement
DELIVERY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.739

Date of Disbursement

04 / 25 / 2011

Amount of Each Disbursement this Period

1766.81

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

FEDEX

Mailing Address PO BOX 371461

City
PITTSBURGH

State
PA

Zip Code
15250

Purpose of Disbursement
DELIVERY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.757

Date of Disbursement

05 / 02 / 2011

Amount of Each Disbursement this Period

1881.97

Q1 and/or wind down expense

SUBTOTAL of Disbursements This Page (optional)

5530.75

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)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) FEDEX Mailing Address PO BOX 371461	Transaction ID: SB21B.758 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 2 / 2 0 1 1</div> </div>
City PITTSBURGH State PA Zip Code 15250 Purpose of Disbursement DELIVERY 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) ▼	Amount of Each Disbursement this Period <div>242.03</div> Q1 and/or wind down expense
B. Full Name (Last, First, Middle Initial) FEDEX Mailing Address PO BOX 371461	Transaction ID: SB21B.896 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 5 / 2 0 1 1</div> </div>
City PITTSBURGH State PA Zip Code 15250 Purpose of Disbursement DELIVERY 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) ▼	Amount of Each Disbursement this Period <div>321.31</div> Q1 and/or wind down expense
C. Full Name (Last, First, Middle Initial) FEDEX Mailing Address PO BOX 371461	Transaction ID: SB21B.897 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 5 / 2 0 1 1</div> </div>
City PITTSBURGH State PA Zip Code 15250 Purpose of Disbursement DELIVERY 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) ▼	Amount of Each Disbursement this Period <div>57.17</div> Q1 and/or wind down expense

SUBTOTAL of Disbursements This Page (optional)

620.51

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 596 / 970

<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)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) FEDEX <hr/> Mailing Address PO BOX 371461	Transaction ID: SB21B.898 Date of Disbursement <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>0</td><td>5</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	5		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		2	5		2	0	1	1												
City PITTSBURGH State PA Zip Code 15250 Purpose of Disbursement DELIVERY Candidate Name <div style="border: 1px solid black; width: 50px; height: 20px; margin-left: auto;"></div> Category/ Type 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:	Amount of Each Disbursement this Period <div style="border: 1px solid black; width: 100%; text-align: center; padding: 5px;">17.44</div> Q1 and/or wind down expense																				
B. Full Name (Last, First, Middle Initial) FEDEX <hr/> Mailing Address PO BOX 371461	Transaction ID: SB21B.921 Date of Disbursement <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>0</td><td>2</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	8		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	8		2	0	1	1												
City PITTSBURGH State PA Zip Code 15250 Purpose of Disbursement DELIVERY Candidate Name <div style="border: 1px solid black; width: 50px; height: 20px; margin-left: auto;"></div> Category/ Type 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:	Amount of Each Disbursement this Period <div style="border: 1px solid black; width: 100%; text-align: center; padding: 5px;">7.43</div>																				
C. Full Name (Last, First, Middle Initial) FEDEX <hr/> Mailing Address PO BOX 371461	Transaction ID: SB21B.934 Date of Disbursement <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>0</td><td>6</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	0		2	0	1	1												
City PITTSBURGH State PA Zip Code 15250 Purpose of Disbursement DELIVERY Candidate Name <div style="border: 1px solid black; width: 50px; height: 20px; margin-left: auto;"></div> Category/ Type 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:	Amount of Each Disbursement this Period <div style="border: 1px solid black; width: 100%; text-align: center; padding: 5px;">24.54</div> Q1 and/or wind down expense																				

SUBTOTAL of Disbursements This Page (optional)

49.41

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

FLS CONNECT, LLC

Mailing Address 7300 HUDSON BLVD.
SUITE 270

City SAINT PAUL State MN Zip Code 55128

Purpose of Disbursement
DATA MANAGEMENT SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.024

Date of Disbursement

/ /

Amount of Each Disbursement this Period

10000.00

B.

Full Name (Last, First, Middle Initial)

FLS CONNECT, LLC

Mailing Address 7300 HUDSON BLVD.
SUITE 270

City SAINT PAUL State MN Zip Code 55128

Purpose of Disbursement
TELEMARKETING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.030

Date of Disbursement

/ /

Amount of Each Disbursement this Period

19122.00

C.

Full Name (Last, First, Middle Initial)

FLS CONNECT, LLC

Mailing Address 7300 HUDSON BLVD.
SUITE 270

City SAINT PAUL State MN Zip Code 55128

Purpose of Disbursement
TELEMARKETING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.317

Date of Disbursement

/ /

Amount of Each Disbursement this Period

27579.00

SUBTOTAL of Disbursements This Page (optional)

56701.00

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 598 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

FLS CONNECT, LLC

Mailing Address 7300 HUDSON BLVD.
SUITE 270

City SAINT PAUL State MN Zip Code 55128

Purpose of Disbursement
DATA MANAGEMENT SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.320

Date of Disbursement

/ /

Amount of Each Disbursement this Period

15000.00

B.

Full Name (Last, First, Middle Initial)

FLS CONNECT, LLC

Mailing Address 7300 HUDSON BLVD.
SUITE 270

City SAINT PAUL State MN Zip Code 55128

Purpose of Disbursement
PHONE SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.683

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1486.34

C.

Full Name (Last, First, Middle Initial)

FLS CONNECT, LLC

Mailing Address 7300 HUDSON BLVD.
SUITE 270

City SAINT PAUL State MN Zip Code 55128

Purpose of Disbursement
TELEMARKETING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.686

Date of Disbursement

/ /

Amount of Each Disbursement this Period

32726.75

SUBTOTAL of Disbursements This Page (optional)

49213.09

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)
Free and Strong America PAC, Inc.

A.	<p>Full Name (Last, First, Middle Initial) FLS CONNECT, LLC</p> <p>Mailing Address 7300 HUDSON BLVD. SUITE 270</p> <p>City SAINT PAUL State MN Zip Code 55128</p> <p>Purpose of Disbursement DATA MANAGEMENT SERVICES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.723 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 5 / 2 0 1 1</div> </div> </p> <p>Amount of Each Disbursement this Period <div>833.33</div> </p> <p>Q1 and/or wind down expense</p>
B.	<p>Full Name (Last, First, Middle Initial) FLS CONNECT, LLC</p> <p>Mailing Address 7300 HUDSON BLVD. SUITE 270</p> <p>City SAINT PAUL State MN Zip Code 55128</p> <p>Purpose of Disbursement STRATEGY CONSULTING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.727 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 8 / 2 0 1 1</div> </div> </p> <p>Amount of Each Disbursement this Period <div>15312.00</div> </p> <p>Q1 and/or wind down expense</p>
C.	<p>Full Name (Last, First, Middle Initial) FRANK CIOTA PRODUCTIONS</p> <p>Mailing Address 1 SEAL HARBOR ROAD, #611</p> <p>City WINTHROP State MA Zip Code 02152</p> <p>Purpose of Disbursement VIDEO SERVICES FOR PAC</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.310 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 9 / 2 0 1 1</div> </div> </p> <p>Amount of Each Disbursement this Period <div>3500.00</div> </p>

SUBTOTAL of Disbursements This Page (optional) ►

19645.33

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

FRANK CIOTA PRODUCTIONS

Mailing Address 1 SEAL HARBOR ROAD, #611

City
WINTHROP

State
MA

Zip Code
02152

Purpose of Disbursement
VIDEO SERVICES FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.341

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

FREE AND STRONG AMERICA PAC - ALABAMA

Mailing Address 80 HAYDEN AVENUE

City
LEXINGTON

State
MA

Zip Code
02421

Purpose of Disbursement
COMPUTER/PHONE/PHOTO/FURNITURE PURCH-FMV

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.379

Date of Disbursement

/ /

Amount of Each Disbursement this Period

15142.59

C.

Full Name (Last, First, Middle Initial)

FREE AND STRONG AMERICA PAC - IOWA

Mailing Address 80 HAYDEN AVENUE

City
LEXINGTON

State
MA

Zip Code
02421

Purpose of Disbursement
COMPUTER/PHONE/PHOTO/FURNITURE PURCH-FMV

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.380

Date of Disbursement

/ /

Amount of Each Disbursement this Period

14683.73

SUBTOTAL of Disbursements This Page (optional)

32326.32

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)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
FREE AND STRONG AMERICA PAC - MICHIGAN

Mailing Address 80 HAYDEN AVENUE

City LEXINGTON State MA Zip Code 02421

Purpose of Disbursement
COMPUTER/PHONE/PHOTO/FURNITURE PURCH-FMV

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.381

Date of Disbursement

/ /

Amount of Each Disbursement this Period

9177.33

B. Full Name (Last, First, Middle Initial)
FREE AND STRONG AMERICA PAC - NEW HAMPSHIRE

Mailing Address 80 HAYDEN AVENUE

City LEXINGTON State MA Zip Code 02421

Purpose of Disbursement
COMPUTER/PHONE/PHOTO/FURNITURE PURCH-FMV

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.382

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4588.67

C. Full Name (Last, First, Middle Initial)
FREE AND STRONG AMERICA PAC - SOUTH CAROLINA

Mailing Address 80 HAYDEN AVENUE

City LEXINGTON State MA Zip Code 02421

Purpose of Disbursement
COMPUTER/PHONE/PHOTO/FURNITURE PURCH-FMV

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.383

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2294.33

SUBTOTAL of Disbursements This Page (optional)

16060.33

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 602 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

FUNDLY, INC.

Mailing Address 70 BROADWAY STREET

City WESTFORD State MA Zip Code 01886

Purpose of Disbursement

WEB SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.027

Date of Disbursement

01 / 14 / 2011

Amount of Each Disbursement this Period

1865.80

B.

Full Name (Last, First, Middle Initial)

FUNDLY, INC.

Mailing Address 70 BROADWAY STREET

City WESTFORD State MA Zip Code 01886

Purpose of Disbursement

WEB SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.121

Date of Disbursement

02 / 14 / 2011

Amount of Each Disbursement this Period

4233.68

C.

Full Name (Last, First, Middle Initial)

FUNDLY, INC.

Mailing Address 70 BROADWAY STREET

City WESTFORD State MA Zip Code 01886

Purpose of Disbursement

WEB SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.352

Date of Disbursement

03 / 16 / 2011

Amount of Each Disbursement this Period

12103.00

SUBTOTAL of Disbursements This Page (optional) ►

18202.48

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 603 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

FUNDLY, INC.

Mailing Address 70 BROADWAY STREET

City
WESTFORD

State
MA

Zip Code
01886

Purpose of Disbursement
WEB SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.704

Date of Disbursement

/ /

Amount of Each Disbursement this Period

9324.50

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

FUNDLY, INC.

Mailing Address 70 BROADWAY STREET

City
WESTFORD

State
MA

Zip Code
01886

Purpose of Disbursement
WEB SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.892

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1816.40

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

GOP SHOPPE

Mailing Address 899 AIRPORT PARK RD.

City
GLEN BURNIE

State
MD

Zip Code
21061

Purpose of Disbursement
PROMOTIONAL MATERIAL FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.131

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1059.70

SUBTOTAL of Disbursements This Page (optional)

12200.60

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

GOP SHOPPE

Mailing Address 899 AIRPORT PARK RD.

City State Zip Code
GLEN BURNIE MD 21061

Purpose of Disbursement
PROMOTIONAL MATERIALS FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.690

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3200.29

B.

Full Name (Last, First, Middle Initial)

HARBOUR GROUP INDUSTRIES, INC.

Mailing Address 7701 FORSYTH BLVD., SUITE 600

City State Zip Code
ST. LOUIS MO 63105

Purpose of Disbursement
TRAVEL ON 04/04/2011

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.703

Date of Disbursement

/ /

Amount of Each Disbursement this Period

14768.00

C.

Full Name (Last, First, Middle Initial)

HUETER AND ASSOCIATES

Mailing Address 2000 POWELL ST., SUITE 1250

City State Zip Code
EMERYVILLE CA 94608

Purpose of Disbursement
TRAVEL AND MEETING EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.750

Date of Disbursement

/ /

Amount of Each Disbursement this Period

401.52

Q1 and/or wind down expen-
se

SUBTOTAL of Disbursements This Page (optional)

18369.81

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

JRM-C MANAGEMENT

Mailing Address 299 S. MAIN STREET, SUITE 2450

City
SALT LAKE CITY

State
UT

Zip Code
84111

Purpose of Disbursement
TRAVEL ON 2/23/11

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.164

Date of Disbursement

/ /

Amount of Each Disbursement this Period

632.00

B.

Full Name (Last, First, Middle Initial)

JRM-C MANAGEMENT

Mailing Address 299 S. MAIN STREET, SUITE 2450

City
SALT LAKE CITY

State
UT

Zip Code
84111

Purpose of Disbursement
TRAVEL ON 04/03/11

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.689

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1019.40

C.

Full Name (Last, First, Middle Initial)

JUNIOR MILLER COMPANY

Mailing Address 560 W. 400 N.

City
HYRUM

State
UT

Zip Code
84319

Purpose of Disbursement
TRAVEL ON 2/17/11

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.155

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1764.00

SUBTOTAL of Disbursements This Page (optional)

3415.40

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

LA VALENCIA HOTEL

Mailing Address 1132 PROSPECT STREET

City
LA JOLLA

State
CA

Zip Code
92037

Purpose of Disbursement
CATERING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.687

Date of Disbursement

/ /

Amount of Each Disbursement this Period

660.66

B.

Full Name (Last, First, Middle Initial)

LA VALENCIA HOTEL

Mailing Address 1132 PROSPECT STREET

City
LA JOLLA

State
CA

Zip Code
92037

Purpose of Disbursement
CATERING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.688

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2661.22

C.

Full Name (Last, First, Middle Initial)

LAURA BOULTON EVENTS, LLC

Mailing Address 214 WEST AVENUE

City
DARIEN

State
CT

Zip Code
06820

Purpose of Disbursement
CATERING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.120

Date of Disbursement

/ /

Amount of Each Disbursement this Period

6955.95

SUBTOTAL of Disbursements This Page (optional)

10277.83

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 607 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MAR LEXHAY LLC

Mailing Address 80 HAYDEN AVE., SUITE 100

City
LEXINGTON

State
MA

Zip Code
02421

Purpose of Disbursement
RENT/ UTILITIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.395

Date of Disbursement

/ /

Amount of Each Disbursement this Period

6999.40

B.

Full Name (Last, First, Middle Initial)

MAR LEXHAY LLC

Mailing Address 80 HAYDEN AVE., SUITE 100

City
LEXINGTON

State
MA

Zip Code
02421

Purpose of Disbursement
RENT/UTILITIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.749

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2467.74

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

MAR LEXHAY LLC

Mailing Address 80 HAYDEN AVE., SUITE 100

City
LEXINGTON

State
MA

Zip Code
02421

Purpose of Disbursement
RENT/UTILITIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.940

Date of Disbursement

/ /

Amount of Each Disbursement this Period

7132.25

Q1 and/or wind down expense

SUBTOTAL of Disbursements This Page (optional)

16599.39

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)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) MARSH USA, INC.	Transaction ID: SB21B.881 Date of Disbursement																				
Mailing Address DEPARTMENT #9728	<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>0</td><td>5</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		2	0		2	0	1	1												
City LOS ANGELES State CA Zip Code 90084	Amount of Each Disbursement this Period																				
Purpose of Disbursement INSURANCE	<table border="1"> <tr> <td>824.00</td> </tr> </table>	824.00																			
824.00																					
Candidate Name	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) ▼ Q1 and/or wind down expense																				
B. Full Name (Last, First, Middle Initial) MARSH USA, INC.	Transaction ID: SB21B.882 Date of Disbursement																				
Mailing Address DEPARTMENT #9728	<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>0</td><td>5</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		2	0		2	0	1	1												
City LOS ANGELES State CA Zip Code 90084	Amount of Each Disbursement this Period																				
Purpose of Disbursement INSURANCE	<table border="1"> <tr> <td>5187.00</td> </tr> </table>	5187.00																			
5187.00																					
Candidate Name	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) ▼ Q1 and/or wind down expense																				
C. Full Name (Last, First, Middle Initial) MARSH USA, INC.	Transaction ID: SB21B.883 Date of Disbursement																				
Mailing Address DEPARTMENT #9728	<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>0</td><td>5</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		2	0		2	0	1	1												
City LOS ANGELES State CA Zip Code 90084	Amount of Each Disbursement this Period																				
Purpose of Disbursement INSURANCE	<table border="1"> <tr> <td>27600.00</td> </tr> </table>	27600.00																			
27600.00																					
Candidate Name	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) ▼ Q1 and/or wind down expense																				

SUBTOTAL of Disbursements This Page (optional)

33611.00

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 609 / 970

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) MARSH USA, INC.	Transaction ID: SB21B.884 Date of Disbursement
Mailing Address DEPARTMENT #9728	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 0 / 2 0 1 1</div> </div>
City LOS ANGELES State CA Zip Code 90084	Amount of Each Disbursement this Period
Purpose of Disbursement INSURANCE	<div> <div></div> <div>3063.00</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
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) ▼ Q1 and/or wind down expense
B. Full Name (Last, First, Middle Initial) MINDSHIFT TECHNOLOGIES	Transaction ID: SB21B.389 Date of Disbursement
Mailing Address 3975 FAIR RIDGE DRIVE SUITE 200-S	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 0 / 2 0 1 1</div> </div>
City FAIRFAX State VA Zip Code 22033	Amount of Each Disbursement this Period
Purpose of Disbursement NETWORK SUPPORT	<div> <div></div> <div>14.99</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
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) ▼
C. Full Name (Last, First, Middle Initial) MINDSHIFT TECHNOLOGIES	Transaction ID: SB21B.697 Date of Disbursement
Mailing Address 3975 FAIR RIDGE DRIVE SUITE 200-S	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 8 / 2 0 1 1</div> </div>
City FAIRFAX State VA Zip Code 22033	Amount of Each Disbursement this Period
Purpose of Disbursement NETWORK SUPPORT	<div> <div></div> <div>14.99</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
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)

3092.98

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)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) MINDSHIFT TECHNOLOGIES	Transaction ID: SB21B.724 Date of Disbursement																				
Mailing Address 3975 FAIR RIDGE DRIVE SUITE 200-S	<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>0</td><td>4</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	5		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	5		2	0	1	1												
City FAIRFAX State VA Zip Code 22033	Amount of Each Disbursement this Period																				
Purpose of Disbursement NETWORK SUPPORT Candidate Name	<table border="1"> <tr> <td>68.82</td> </tr> </table>	68.82																			
68.82																					
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) ▼																				
B. Full Name (Last, First, Middle Initial) MINDSHIFT TECHNOLOGIES	Transaction ID: SB21B.748 Date of Disbursement																				
Mailing Address 3975 FAIR RIDGE DRIVE SUITE 200-S	<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>0</td><td>4</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	7		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	7		2	0	1	1												
City FAIRFAX State VA Zip Code 22033	Amount of Each Disbursement this Period																				
Purpose of Disbursement NETWORK SUPPORT Candidate Name	<table border="1"> <tr> <td>2203.69</td> </tr> </table>	2203.69																			
2203.69																					
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) ▼																				
C. Full Name (Last, First, Middle Initial) MINDSHIFT TECHNOLOGIES	Transaction ID: SB21B.751 Date of Disbursement																				
Mailing Address 3975 FAIR RIDGE DRIVE SUITE 200-S	<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>0</td><td>4</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	8		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	8		2	0	1	1												
City FAIRFAX State VA Zip Code 22033	Amount of Each Disbursement this Period																				
Purpose of Disbursement NETWORK SUPPORT Candidate Name	<table border="1"> <tr> <td>333.19</td> </tr> </table>	333.19																			
333.19																					
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)

2605.70

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MINDSHIFT TECHNOLOGIES

Mailing Address 3975 FAIR RIDGE DRIVE
SUITE 200-S

City FAIRFAX State VA Zip Code 22033

Purpose of Disbursement
PHONE SERVICES AND SUPPORT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.885

Date of Disbursement

05 / 20 / 2011

Amount of Each Disbursement this Period

22.30

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

MINDSHIFT TECHNOLOGIES

Mailing Address 3975 FAIR RIDGE DRIVE
SUITE 200-S

City FAIRFAX State VA Zip Code 22033

Purpose of Disbursement
EQUIPMENT PURCHASE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.887

Date of Disbursement

05 / 20 / 2011

Amount of Each Disbursement this Period

8028.12

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

MINDSHIFT TECHNOLOGIES

Mailing Address 3975 FAIR RIDGE DRIVE
SUITE 200-S

City FAIRFAX State VA Zip Code 22033

Purpose of Disbursement
PHONE SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.926

Date of Disbursement

06 / 10 / 2011

Amount of Each Disbursement this Period

871.94

Q1 and/or wind down expense

SUBTOTAL of Disbursements This Page (optional)

8922.36

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MINDSHIFT TECHNOLOGIES

Mailing Address 3975 FAIR RIDGE DRIVE
SUITE 200-S

City FAIRFAX State VA Zip Code 22033

Purpose of Disbursement
COMPUTER AND SOFTWARE PURCHASE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.927

Date of Disbursement

06 / 10 / 2011

Amount of Each Disbursement this Period

8028.12

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

MINDSHIFT TECHNOLOGIES

Mailing Address 3975 FAIR RIDGE DRIVE
SUITE 200-S

City FAIRFAX State VA Zip Code 22033

Purpose of Disbursement
COMPUTER AND SOFTWARE PURCHASE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.928

Date of Disbursement

06 / 10 / 2011

Amount of Each Disbursement this Period

8173.12

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

MINDSHIFT TECHNOLOGIES

Mailing Address 3975 FAIR RIDGE DRIVE
SUITE 200-S

City FAIRFAX State VA Zip Code 22033

Purpose of Disbursement
NETWORK SERVICE AND SUPPORT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.929

Date of Disbursement

06 / 10 / 2011

Amount of Each Disbursement this Period

5236.13

Q1 and/or wind down expense

SUBTOTAL of Disbursements This Page (optional)

21437.37

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 PageFOR 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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MINDSHIFT TECHNOLOGIES

Mailing Address 3975 FAIR RIDGE DRIVE
SUITE 200-S

City FAIRFAX State VA Zip Code 22033

Purpose of Disbursement
PHONE SERVICE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.930

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	0		2	0	1	1

Amount of Each Disbursement this Period

1198.15

Q1 and/or wind down expen-
se**B.**

Full Name (Last, First, Middle Initial)

MINDSHIFT TECHNOLOGIES

Mailing Address 3975 FAIR RIDGE DRIVE
SUITE 200-S

City FAIRFAX State VA Zip Code 22033

Purpose of Disbursement
PHONE SERVICE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.936

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	5		2	0	1	1

Amount of Each Disbursement this Period

22.20

Q1 and/or wind down expen-
se**C.**

Full Name (Last, First, Middle Initial)

MINDSHIFT TECHNOLOGIES

Mailing Address 3975 FAIR RIDGE DRIVE
SUITE 200-S

City FAIRFAX State VA Zip Code 22033

Purpose of Disbursement
PHONE SERVICE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.948

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	1	1

Amount of Each Disbursement this Period

1752.13

Q1 and/or wind down expen-
se

SUBTOTAL of Disbursements This Page (optional)

2972.48

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MINUTEMAN STRATEGY LLC

Mailing Address 40 KINGS WAY, #401A

City
WALTHAM

State
MA

Zip Code
02451

Purpose of Disbursement
TECHNOLOGY CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.684

Date of Disbursement

/ /

Amount of Each Disbursement this Period

12000.00

B.

Full Name (Last, First, Middle Initial)

N.E. COPY SPECIALISTS, INC

Mailing Address PO BOX 4024

City
WOBURN

State
MA

Zip Code
01888

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.392

Date of Disbursement

/ /

Amount of Each Disbursement this Period

8.86

C.

Full Name (Last, First, Middle Initial)

N.E. COPY SPECIALISTS, INC

Mailing Address PO BOX 4024

City
WOBURN

State
MA

Zip Code
01888

Purpose of Disbursement
OFFICE EQUIPMENT RENTAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.393

Date of Disbursement

/ /

Amount of Each Disbursement this Period

850.00

SUBTOTAL of Disbursements This Page (optional)

12858.86

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 PageFOR LINE NUMBER:
(check only one)

PAGE 615 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

N.E. COPY SPECIALISTS, INC

Mailing Address PO BOX 4024

City
WOBURNState
MAZip Code
01888Purpose of Disbursement
EQUIPMENT RENTAL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.747

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	7		2	0	1	1

Amount of Each Disbursement this Period

334.08

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

NORTHERN ILLINOIS FLIGHT CENTER, INC.

Mailing Address 8485 PYOTT RD.

City
LAKE IN THE HILLSState
ILZip Code
60156Purpose of Disbursement
TRAVEL ON 3/16/11

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.357

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	1		2	0	1	1

Amount of Each Disbursement this Period

2450.00

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

PAGE BARTEAU CATERING, INC.

Mailing Address 2332 N. ST. MARY'S ST.

City
SAN ANTONIOState
TXZip Code
78212Purpose of Disbursement
CATERING FOR PAC

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.725

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	1	1

Amount of Each Disbursement this Period

437.91

Q1 and/or wind down expense

SUBTOTAL of Disbursements This Page (optional)

3221.99

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 616 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

PATTON BOGGS LLP

Mailing Address 2550 M ST. N.W.

City
WASHINGTON

State
DC

Zip Code
20037

Purpose of Disbursement
LEGAL FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.731

Date of Disbursement

04 / 25 / 2011

Amount of Each Disbursement this Period

22027.37

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

PATTON BOGGS LLP

Mailing Address 2550 M ST. N.W.

City
WASHINGTON

State
DC

Zip Code
20037

Purpose of Disbursement
LEGAL FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.893

Date of Disbursement

05 / 25 / 2011

Amount of Each Disbursement this Period

10321.98

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

PATTON BOGGS LLP

Mailing Address 2550 M ST. N.W.

City
WASHINGTON

State
DC

Zip Code
20037

Purpose of Disbursement
LEGAL FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.947

Date of Disbursement

06 / 28 / 2011

Amount of Each Disbursement this Period

10005.63

Q1 and/or wind down expense

SUBTOTAL of Disbursements This Page (optional)

42354.98

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 617 / 970

<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)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) POSITIVE TYPE	Transaction ID: SB21B.730 Date of Disbursement																				
Mailing Address PO BOX 695	<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>0</td><td>4</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	5		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	5		2	0	1	1												
City LA MESA State CA Zip Code 91944	Amount of Each Disbursement this Period																				
Purpose of Disbursement PRINTING FOR PAC Candidate Name	<table border="1"> <tr> <td colspan="10">304.50</td> </tr> </table>	304.50																			
304.50																					
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) ▼ Q1 and/or wind down expense																				
B. Full Name (Last, First, Middle Initial) POSTMASTER	Transaction ID: SB21B.743 Date of Disbursement																				
Mailing Address 492 TRAPELO RD.	<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>0</td><td>4</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	5		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	5		2	0	1	1												
City BELMONT State MA Zip Code 02478	Amount of Each Disbursement this Period																				
Purpose of Disbursement POSTAL FEE Candidate Name	<table border="1"> <tr> <td colspan="10">100.00</td> </tr> </table>	100.00																			
100.00																					
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) ▼ Q1 and/or wind down expense																				
C. Full Name (Last, First, Middle Initial) PROFESSIONAL TOUCH	Transaction ID: SB21B.874 Date of Disbursement																				
Mailing Address 815 S. ROSE STREET	<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>0</td><td>5</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	2		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	2		2	0	1	1												
City ESCONDIDO State CA Zip Code 92027	Amount of Each Disbursement this Period																				
Purpose of Disbursement DATA MANAGEMENT SERVICES/WEB SERVICES Candidate Name	<table border="1"> <tr> <td colspan="10">300.00</td> </tr> </table>	300.00																			
300.00																					
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) ▼ Q1 and/or wind down expense																				

SUBTOTAL of Disbursements This Page (optional)

704.50

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 PageFOR LINE NUMBER:
(check only one)

PAGE 618 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

PUBLIC OPINION STRATEGIES

Mailing Address 214 NORTH FAYETTE STREET

City
ALEXANDRIAState
VAZip Code
22314Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.711

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	1	1

Amount of Each Disbursement this Period

757.40

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

QUEEN CITY CLUB

Mailing Address 331 EAST FOURTH STREET

City
CINCINNATIState
OHZip Code
45202Purpose of Disbursement
CATERING AND ROOM RENTAL FOR PAC

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.366

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	3		2	0	1	1

Amount of Each Disbursement this Period

1087.61

C.

Full Name (Last, First, Middle Initial)

RED CURVE SOLUTIONS

Mailing Address 138 CONANT STREET
FLOOR 1City
BEVERLYState
MAZip Code
01915Purpose of Disbursement
TREASURY AND COMPLIANCE CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.752

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	1	1

Amount of Each Disbursement this Period

15000.00

Q1 and/or wind down expense

SUBTOTAL of Disbursements This Page (optional)

16845.01

TOTAL This Period (last page this line number only)

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

Free and Strong America PAC, Inc.

FEC Schedule B (Form 3X) (Revised 02/2003)

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 620 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

RED WAVE COMMUNICATIONS, LLC

Mailing Address 4019 INGERSOLL AVE.

City
DES MOINES

State
IA

Zip Code
50312

Purpose of Disbursement
STRATEGY CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.337

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3000.00

B.

Full Name (Last, First, Middle Initial)

RELATED COMPANIES

Mailing Address 60 COLUMBUS CIRCLE

City
NEW YORK

State
NY

Zip Code
10023

Purpose of Disbursement
ROOM RENTAL FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.322

Date of Disbursement

/ /

Amount of Each Disbursement this Period

187.50

C.

Full Name (Last, First, Middle Initial)

RELATED COMPANIES

Mailing Address 60 COLUMBUS CIRCLE

City
NEW YORK

State
NY

Zip Code
10023

Purpose of Disbursement
ROOM RENTAL FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.329

Date of Disbursement

/ /

Amount of Each Disbursement this Period

700.00

SUBTOTAL of Disbursements This Page (optional)

3887.50

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 621 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

RELATED COMPANIES

Mailing Address 60 COLUMBUS CIRCLE

City NEW YORK State NY Zip Code 10023

Purpose of Disbursement
ROOM RENTAL FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.685

Date of Disbursement

/ /

Amount of Each Disbursement this Period

982.50

B.

Full Name (Last, First, Middle Initial)

ROCHESTER AVIATION

Mailing Address 90 AIRPORT DRIVE, SUITE 307

City ROCHESTER State NY Zip Code 14624

Purpose of Disbursement
TRAVEL ON 3/16/11

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.358

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5466.00

C.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
POSTAGE AND PRINTING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.008

Date of Disbursement

/ /

Amount of Each Disbursement this Period

30676.00

SUBTOTAL of Disbursements This Page (optional)

37124.50

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 622 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
POSTAGE AND PRINTING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.009

Date of Disbursement

01 / 04 / 2011

Amount of Each Disbursement this Period

23384.80

B.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
POSTAGE AND PRINTING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.010

Date of Disbursement

01 / 04 / 2011

Amount of Each Disbursement this Period

44485.50

C.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
PRINTING AND POSTAGE FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.015

Date of Disbursement

01 / 14 / 2011

Amount of Each Disbursement this Period

690.53

SUBTOTAL of Disbursements This Page (optional)

68560.83

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 623 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
PRINTING AND POSTAGE FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.016

Date of Disbursement

01 / 14 / 2011

Amount of Each Disbursement this Period

1374.14

B.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
PRINTING AND POSTAGE FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.017

Date of Disbursement

01 / 14 / 2011

Amount of Each Disbursement this Period

465.97

C.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
CREATIVE FEE FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.018

Date of Disbursement

01 / 14 / 2011

Amount of Each Disbursement this Period

1567.50

SUBTOTAL of Disbursements This Page (optional)

3407.61

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 624 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
POSTAGE/PRINTING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.035

Date of Disbursement

/ /

Amount of Each Disbursement this Period

39032.00

B.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
POSTAGE/PRINTING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.036

Date of Disbursement

/ /

Amount of Each Disbursement this Period

37444.00

C.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
LIST RENTAL FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.041

Date of Disbursement

/ /

Amount of Each Disbursement this Period

9825.84

SUBTOTAL of Disbursements This Page (optional)

86301.84

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 625 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
LIST RENTAL FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.042

Date of Disbursement

01 / 31 / 2011

Amount of Each Disbursement this Period

9825.84

B.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
POSTAGE AND PRINTING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.047

Date of Disbursement

02 / 03 / 2011

Amount of Each Disbursement this Period

18324.00

C.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
PRINTING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.128

Date of Disbursement

02 / 16 / 2011

Amount of Each Disbursement this Period

3355.00

SUBTOTAL of Disbursements This Page (optional)

31504.84

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 626 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
PRINTING AND POSTAGE FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.129

Date of Disbursement

02 / 16 / 2011

Amount of Each Disbursement this Period

524.32

B.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
POSTAGE AND PRINTING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.130

Date of Disbursement

02 / 16 / 2011

Amount of Each Disbursement this Period

994.02

C.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
POSTAGE AND PRINTING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.133

Date of Disbursement

02 / 16 / 2011

Amount of Each Disbursement this Period

27.87

SUBTOTAL of Disbursements This Page (optional)

1546.21

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 PageFOR LINE NUMBER:
(check only one)

PAGE 627 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Transaction ID: SB21B.135

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	6		2	0	1	1

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
POSTAGE AND PRINTING FOR PAC

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

2368.96

B.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Transaction ID: SB21B.136

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	6		2	0	1	1

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
CREATIVE FEE FOR PAC

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

5820.06

C.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Transaction ID: SB21B.137

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	6		2	0	1	1

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
CREATIVE FEE FOR PAC

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

2113.44

SUBTOTAL of Disbursements This Page (optional)

10302.46

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 628 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
POSTAGE AND PRINTING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.138

Date of Disbursement

/ /

Amount of Each Disbursement this Period

339.90

B.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
CREATIVE FEE FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.139

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1651.79

C.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
CREATIVE FEE FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.140

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2646.90

SUBTOTAL of Disbursements This Page (optional)

4638.59

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 629 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
PRINTING AND POSTAGE FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.141

Date of Disbursement

02 / 18 / 2011

Amount of Each Disbursement this Period

416.92

B.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
PRINTING AND POSTAGE FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.142

Date of Disbursement

02 / 18 / 2011

Amount of Each Disbursement this Period

2800.90

C.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
CREATIVE FEE FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.143

Date of Disbursement

02 / 18 / 2011

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

4217.82

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 630 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
POSTAGE AND PRINTING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.144

Date of Disbursement

/ /

Amount of Each Disbursement this Period

374.05

B.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
PRINTING AND POSTAGE FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.145

Date of Disbursement

/ /

Amount of Each Disbursement this Period

908.50

C.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
CREATIVE FEE FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.165

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4502.23

SUBTOTAL of Disbursements This Page (optional)

5784.78

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 631 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
CREATIVE FEE FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.166

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4722.78

B.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
PRINTING AND POSTAGE FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.167

Date of Disbursement

/ /

Amount of Each Disbursement this Period

571.75

C.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
PRINTING AND POSTAGE FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.323

Date of Disbursement

/ /

Amount of Each Disbursement this Period

12404.50

SUBTOTAL of Disbursements This Page (optional)

17699.03

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 632 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
POSTAGE AND PRINTING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.324

Date of Disbursement

03 / 09 / 2011

Amount of Each Disbursement this Period

1210.19

B.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
CREATIVE FEE FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.325

Date of Disbursement

03 / 09 / 2011

Amount of Each Disbursement this Period

1532.20

C.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
TELEMARKETING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.349

Date of Disbursement

03 / 16 / 2011

Amount of Each Disbursement this Period

8459.54

SUBTOTAL of Disbursements This Page (optional)

11201.93

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 633 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
DATA MANAGEMENT SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.350

Date of Disbursement

/ /

Amount of Each Disbursement this Period

488.22

B.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
CREATIVE FEE FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.361

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
PRINTING AND POSTAGE FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.362

Date of Disbursement

/ /

Amount of Each Disbursement this Period

603.49

SUBTOTAL of Disbursements This Page (optional)

2091.71

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 634 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
TELEMARKETING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.364

Date of Disbursement

03 / 23 / 2011

Amount of Each Disbursement this Period

15659.88

B.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
POSTAGE AND PRINTING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.368

Date of Disbursement

03 / 25 / 2011

Amount of Each Disbursement this Period

855.80

C.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
POSTAGE AND PRINTING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.369

Date of Disbursement

03 / 25 / 2011

Amount of Each Disbursement this Period

1123.88

SUBTOTAL of Disbursements This Page (optional)

17639.56

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 635 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
TELEMARKETING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.387

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

6913.92

B.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
DATA MANAGEMENT SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.396

Date of Disbursement

03 / 30 / 2011

Amount of Each Disbursement this Period

2077.41

C.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
DATA MANAGEMENT SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.701

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

226.14

SUBTOTAL of Disbursements This Page (optional)

9217.47

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 636 / 970

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
POSTAGE AND PRINTING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.722

Date of Disbursement

04 / 15 / 2011

Amount of Each Disbursement this Period

908.27

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
PRINTING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.872

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

410.00

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
POSTAGE AND PRINTING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.873

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

849.67

Q1 and/or wind down expense

SUBTOTAL of Disbursements This Page (optional)

2167.94

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 637 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
PRINTING AND POSTAGE FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.886

Date of Disbursement

05 / 20 / 2011

Amount of Each Disbursement this Period

725.50

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
PRINTING AND POSTAGE FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.895

Date of Disbursement

05 / 25 / 2011

Amount of Each Disbursement this Period

435.21

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
DATA MANAGEMET SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.941

Date of Disbursement

06 / 21 / 2011

Amount of Each Disbursement this Period

197.22

Q1 and/or wind down expense

SUBTOTAL of Disbursements This Page (optional)

1357.93

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 638 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

SCM ASSOCIATES, INC.

Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
PRINTING AND POSTAGE FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.949

Date of Disbursement

06 / 28 / 2011

Amount of Each Disbursement this Period

381.08

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

SELA PLANE, LLC

Mailing Address 600 TRAVIS ST., SUITE 6600

City HOUSTON State TX Zip Code 77002

Purpose of Disbursement
TRAVEL ON 3/7/11 AND 3/8/11

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.307

Date of Disbursement

03 / 08 / 2011

Amount of Each Disbursement this Period

3852.00

C.

Full Name (Last, First, Middle Initial)

SEVEN ONE SEVEN PARKING SERVICES, INC.

Mailing Address 1523 NORTH FRANKLIN STREET

City TAMPA State FL Zip Code 33602

Purpose of Disbursement
PARKING SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.327

Date of Disbursement

03 / 14 / 2011

Amount of Each Disbursement this Period

300.00

SUBTOTAL of Disbursements This Page (optional)

4533.08

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 639 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

SHRED-IT BOSTON

Mailing Address 2 C GILL STREET

City
WOBURN

State
MA

Zip Code
01801

Purpose of Disbursement
SHREDDING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.694

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

54.20

B.

Full Name (Last, First, Middle Initial)

SJZ LLC

Mailing Address 80 HAYDEN AVE.

City
LEXINGTON

State
MA

Zip Code
02421

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.022

Date of Disbursement

01 / 14 / 2011

Amount of Each Disbursement this Period

9800.00

C.

Full Name (Last, First, Middle Initial)

SJZ LLC

Mailing Address 80 HAYDEN AVE.

City
LEXINGTON

State
MA

Zip Code
02421

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.023

Date of Disbursement

01 / 14 / 2011

Amount of Each Disbursement this Period

16479.57

SUBTOTAL of Disbursements This Page (optional)

26333.77

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 640 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

SJZ LLC

Mailing Address 80 HAYDEN AVE.

City
LEXINGTON

State
MA

Zip Code
02421

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.037

Date of Disbursement

/ /

Amount of Each Disbursement this Period

419.70

B.

Full Name (Last, First, Middle Initial)

SJZ LLC

Mailing Address 80 HAYDEN AVE.

City
LEXINGTON

State
MA

Zip Code
02421

Purpose of Disbursement
TRAVEL/OFFICE EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.040

Date of Disbursement

/ /

Amount of Each Disbursement this Period

772.03

C.

Full Name (Last, First, Middle Initial)

SJZ LLC

Mailing Address 80 HAYDEN AVE.

City
LEXINGTON

State
MA

Zip Code
02421

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.118

Date of Disbursement

/ /

Amount of Each Disbursement this Period

80000.00

SUBTOTAL of Disbursements This Page (optional)

81191.73

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 641 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

SJZ LLC

Mailing Address 80 HAYDEN AVE.

City
LEXINGTON

State
MA

Zip Code
02421

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.119

Date of Disbursement

/ /

Amount of Each Disbursement this Period

22475.00

B.

Full Name (Last, First, Middle Initial)

SJZ LLC

Mailing Address 80 HAYDEN AVE.

City
LEXINGTON

State
MA

Zip Code
02421

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.171

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3232.90

C.

Full Name (Last, First, Middle Initial)

SJZ LLC

Mailing Address 80 HAYDEN AVE.

City
LEXINGTON

State
MA

Zip Code
02421

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.172

Date of Disbursement

/ /

Amount of Each Disbursement this Period

6187.14

SUBTOTAL of Disbursements This Page (optional)

31895.04

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 642 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

SJZ LLC

Mailing Address 80 HAYDEN AVE.

City
LEXINGTON

State
MA

Zip Code
02421

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.173

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1529.22

B.

Full Name (Last, First, Middle Initial)

SJZ LLC

Mailing Address 80 HAYDEN AVE.

City
LEXINGTON

State
MA

Zip Code
02421

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.309

Date of Disbursement

/ /

Amount of Each Disbursement this Period

93100.00

C.

Full Name (Last, First, Middle Initial)

SJZ LLC

Mailing Address 80 HAYDEN AVE.

City
LEXINGTON

State
MA

Zip Code
02421

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.328

Date of Disbursement

/ /

Amount of Each Disbursement this Period

64867.00

SUBTOTAL of Disbursements This Page (optional)

159496.22

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 643 / 970

<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)
Free and Strong America PAC, Inc.

<p>A.</p> <p>Full Name (Last, First, Middle Initial) SJZ LLC</p> <p>Mailing Address 80 HAYDEN AVE.</p> <p>City LEXINGTON State MA Zip Code 02421</p> <p>Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.333</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 5846.95</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) SJZ LLC</p> <p>Mailing Address 80 HAYDEN AVE.</p> <p>City LEXINGTON State MA Zip Code 02421</p> <p>Purpose of Disbursement FINANCE CONSULTING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.340</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 18900.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) SJZ LLC</p> <p>Mailing Address 80 HAYDEN AVE.</p> <p>City LEXINGTON State MA Zip Code 02421</p> <p>Purpose of Disbursement FINANCE CONSULTING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.705</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 99796.46</p> <p>Q1 and/or wind down expense</p>

SUBTOTAL of Disbursements This Page (optional)

124543.41

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 644 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

SJZ LLC

Mailing Address 80 HAYDEN AVE.

City
LEXINGTON

State
MA

Zip Code
02421

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.706

Date of Disbursement

04 / 13 / 2011

Amount of Each Disbursement this Period

51866.81

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

SJZ LLC

Mailing Address 80 HAYDEN AVE.

City
LEXINGTON

State
MA

Zip Code
02421

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.712

Date of Disbursement

04 / 13 / 2011

Amount of Each Disbursement this Period

2797.61

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

SJZ LLC

Mailing Address 80 HAYDEN AVE.

City
LEXINGTON

State
MA

Zip Code
02421

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.713

Date of Disbursement

04 / 13 / 2011

Amount of Each Disbursement this Period

1954.12

Q1 and/or wind down expense

SUBTOTAL of Disbursements This Page (optional)

56618.54

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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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

SJZ LLC

Mailing Address 80 HAYDEN AVE.

City
LEXINGTON

State
MA

Zip Code
02421

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.714

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4158.60

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

SJZ LLC

Mailing Address 80 HAYDEN AVE.

City
LEXINGTON

State
MA

Zip Code
02421

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.716

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2309.40

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

SJZ LLC

Mailing Address 80 HAYDEN AVE.

City
LEXINGTON

State
MA

Zip Code
02421

Purpose of Disbursement
OFFICE EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.717

Date of Disbursement

/ /

Amount of Each Disbursement this Period

193.35

Q1 and/or wind down expense

SUBTOTAL of Disbursements This Page (optional)

6661.35

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)

PAGE 646 / 970

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) SJZ LLC	Transaction ID: SB21B.734 Date of Disbursement
Mailing Address 80 HAYDEN AVE.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 5 / 2 0 1 1</div> </div>
City LEXINGTON State MA Zip Code 02421	Amount of Each Disbursement this Period
Purpose of Disbursement OFFICE EXPENSE REIMBURSEMENT	<div>1410.97</div>
Candidate Name	<div>Category/Type</div>
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) ▼ Q1 and/or wind down expense
B. Full Name (Last, First, Middle Initial) SJZ LLC	Transaction ID: SB21B.754 Date of Disbursement
Mailing Address 80 HAYDEN AVE.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 2 / 2 0 1 1</div> </div>
City LEXINGTON State MA Zip Code 02421	Amount of Each Disbursement this Period
Purpose of Disbursement FINANCE CONSULTING	<div>42500.00</div>
Candidate Name	<div>Category/Type</div>
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) ▼ Q1 and/or wind down expense
C. Full Name (Last, First, Middle Initial) SJZ LLC	Transaction ID: SB21B.756 Date of Disbursement
Mailing Address 80 HAYDEN AVE.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 2 / 2 0 1 1</div> </div>
City LEXINGTON State MA Zip Code 02421	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	<div>15038.26</div>
Candidate Name	<div>Category/Type</div>
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) ▼ Q1 and/or wind down expense

SUBTOTAL of Disbursements This Page (optional)

58949.23

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 647 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

SJZ LLC

Mailing Address 80 HAYDEN AVE.

City
LEXINGTON

State
MA

Zip Code
02421

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.762

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

37694.62

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

SJZ LLC

Mailing Address 137 NEWBURY STREET
7TH FLOOR

City
BOSTON

State
MA

Zip Code
02116

Purpose of Disbursement
RENT EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.950

Date of Disbursement

06 / 30 / 2011

Amount of Each Disbursement this Period

726.30

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

SJZ LLC

Mailing Address 137 NEWBURY STREET
7TH FLOOR

City
BOSTON

State
MA

Zip Code
02116

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.951

Date of Disbursement

06 / 30 / 2011

Amount of Each Disbursement this Period

1030.00

Q1 and/or wind down expense

SUBTOTAL of Disbursements This Page (optional)

39450.92

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 PageFOR LINE NUMBER:
(check only one)

PAGE 648 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

STANFORD PARK HOTEL

Mailing Address 100 EL CAMINO REAL

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
ROOM RENTAL AND CATERING FOR PAC

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.696

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	1	1

Amount of Each Disbursement this Period

1447.50

B.

Full Name (Last, First, Middle Initial)

STAPLES BUSINESS ADVANTAGE

Mailing Address PO BOX 415256

City
BOSTONState
MAZip Code
02241Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.373

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	1	1

Amount of Each Disbursement this Period

79.67

C.

Full Name (Last, First, Middle Initial)

STAPLES BUSINESS ADVANTAGE

Mailing Address PO BOX 415256

City
BOSTONState
MAZip Code
02241Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.390

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	0		2	0	1	1

Amount of Each Disbursement this Period

60.20

SUBTOTAL of Disbursements This Page (optional)

1587.37

TOTAL This Period (last page this line number only)

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

Free and Strong America PAC, Inc.

FEC Schedule B (Form 3X) (Revised 02/2003)

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)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) SULLIVAN ALVARADO, LLC	Transaction ID: SB21B.376																				
Mailing Address PO BOX 1047	Date of Disbursement																				
City AUSTIN State TX Zip Code 78767	<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>0</td><td>3</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	8		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	8		2	0	1	1												
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	Amount of Each Disbursement this Period																				
Candidate Name	<table border="1"> <tr> <td>649.76</td> </tr> </table>	649.76																			
649.76																					
<table border="1"> <tr> <td>Office Sought:</td> <td> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </td> <td>Disbursement For:</td> <td> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </td> </tr> <tr> <td>State:</td> <td>District:</td> <td></td> <td></td> </tr> </table>	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:			Category/ Type												
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																		
State:	District:																				
B. Full Name (Last, First, Middle Initial) SUTTER CLUB	Transaction ID: SB21B.367																				
Mailing Address 1220 NINTH STREET	Date of Disbursement																				
City SACRAMENTO State CA Zip Code 95814	<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>0</td><td>3</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	3		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	3		2	0	1	1												
Purpose of Disbursement ROOM RENTAL AND CATERING FOR PAC	Amount of Each Disbursement this Period																				
Candidate Name	<table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00																			
1000.00																					
<table border="1"> <tr> <td>Office Sought:</td> <td> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </td> <td>Disbursement For:</td> <td> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </td> </tr> <tr> <td>State:</td> <td>District:</td> <td></td> <td></td> </tr> </table>	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:			Category/ Type												
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																		
State:	District:																				
C. Full Name (Last, First, Middle Initial) SUTTER CLUB	Transaction ID: SB21B.745																				
Mailing Address 1220 NINTH STREET	Date of Disbursement																				
City SACRAMENTO State CA Zip Code 95814	<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>0</td><td>4</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	7		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	7		2	0	1	1												
Purpose of Disbursement CATERING AND ROOM RENTAL FOR PAC	Amount of Each Disbursement this Period																				
Candidate Name	<table border="1"> <tr> <td>3423.50</td> </tr> </table>	3423.50																			
3423.50																					
<table border="1"> <tr> <td>Office Sought:</td> <td> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </td> <td>Disbursement For:</td> <td> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </td> </tr> <tr> <td>State:</td> <td>District:</td> <td></td> <td></td> </tr> </table>	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:			Category/ Type												
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)

5073.26

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

TARGETED VICTORY, LLC

Mailing Address 66 CANAL CENTER PLAZA
SUITE 501

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
E-STRATEGY CONSULTING/PHONE SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.032

Date of Disbursement

01 / 31 / 2011

Amount of Each Disbursement this Period

26000.00

B.

Full Name (Last, First, Middle Initial)

TARGETED VICTORY, LLC

Mailing Address 66 CANAL CENTER PLAZA
SUITE 501

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
WEB SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.033

Date of Disbursement

01 / 31 / 2011

Amount of Each Disbursement this Period

27000.00

C.

Full Name (Last, First, Middle Initial)

TARGETED VICTORY, LLC

Mailing Address 66 CANAL CENTER PLAZA
SUITE 501

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
WEB SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.034

Date of Disbursement

01 / 31 / 2011

Amount of Each Disbursement this Period

35000.00

SUBTOTAL of Disbursements This Page (optional)

88000.00

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 652 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

TARGETED VICTORY, LLC

Mailing Address 66 CANAL CENTER PLAZA
SUITE 501

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
WEB SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.046

Date of Disbursement

02 / 03 / 2011

Amount of Each Disbursement this Period

63333.00

B.

Full Name (Last, First, Middle Initial)

TARGETED VICTORY, LLC

Mailing Address 66 CANAL CENTER PLAZA
SUITE 501

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
WEB SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.168

Date of Disbursement

02 / 28 / 2011

Amount of Each Disbursement this Period

30000.00

C.

Full Name (Last, First, Middle Initial)

TARGETED VICTORY, LLC

Mailing Address 66 CANAL CENTER PLAZA
SUITE 501

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PHONE SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.330

Date of Disbursement

03 / 14 / 2011

Amount of Each Disbursement this Period

1176.14

SUBTOTAL of Disbursements This Page (optional)

94509.14

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 653 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

TARGETED VICTORY, LLC

Mailing Address 66 CANAL CENTER PLAZA
SUITE 501

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
WEB SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.331

Date of Disbursement

03 / 14 / 2011

Amount of Each Disbursement this Period

136667.00

B.

Full Name (Last, First, Middle Initial)

TARGETED VICTORY, LLC

Mailing Address 66 CANAL CENTER PLAZA
SUITE 501

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
E-STRATEGY CONSULTING AND PHONE SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.332

Date of Disbursement

03 / 14 / 2011

Amount of Each Disbursement this Period

9500.00

C.

Full Name (Last, First, Middle Initial)

TARGETED VICTORY, LLC

Mailing Address 66 CANAL CENTER PLAZA
SUITE 501

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
WEB SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.344

Date of Disbursement

03 / 16 / 2011

Amount of Each Disbursement this Period

30000.00

SUBTOTAL of Disbursements This Page (optional)

176167.00

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 654 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

TARGETED VICTORY, LLC

Mailing Address 66 CANAL CENTER PLAZA
SUITE 501

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
E-STRATEGY CONSULTING AND PHONE SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.354

Date of Disbursement

03 / 18 / 2011

Amount of Each Disbursement this Period

26000.00

B.

Full Name (Last, First, Middle Initial)

TARGETED VICTORY, LLC

Mailing Address 66 CANAL CENTER PLAZA
SUITE 501

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
E-STRATEGY CONSULTING AND PHONE SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.355

Date of Disbursement

03 / 18 / 2011

Amount of Each Disbursement this Period

26000.00

C.

Full Name (Last, First, Middle Initial)

TARGETED VICTORY, LLC

Mailing Address 66 CANAL CENTER PLAZA
SUITE 501

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
DELIVERY EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.356

Date of Disbursement

03 / 18 / 2011

Amount of Each Disbursement this Period

47.78

SUBTOTAL of Disbursements This Page (optional)

52047.78

TOTAL This Period (last page this line number only)

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

Free and Strong America PAC, Inc.

FEC Schedule B (Form 3X) (Revised 02/2003)

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 656 / 970

<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)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) THE REGENCY CLUB	Transaction ID: SB21B.026 Date of Disbursement																				
Mailing Address 10900 WILSHIRE BLVD., SUITE 1700	<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>0</td><td>1</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	4		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	4		2	0	1	1												
City LOS ANGELES State CA Zip Code 90024	Amount of Each Disbursement this Period																				
Purpose of Disbursement CATERING FOR PAC	<table border="1"> <tr> <td colspan="10">1114.73</td> </tr> </table>	1114.73																			
1114.73																					
Candidate Name	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) ▼																				
B. Full Name (Last, First, Middle Initial) THE REGENCY CLUB	Transaction ID: SB21B.763 Date of Disbursement																				
Mailing Address 10900 WILSHIRE BLVD., SUITE 1700	<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>0</td><td>5</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	4		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	4		2	0	1	1												
City LOS ANGELES State CA Zip Code 90024	Amount of Each Disbursement this Period																				
Purpose of Disbursement CATERING AND ROOM RENTAL FOR PAC	<table border="1"> <tr> <td colspan="10">5941.31</td> </tr> </table>	5941.31																			
5941.31																					
Candidate Name	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) ▼																				
C. Full Name (Last, First, Middle Initial) THE STEVENS & SCHRIEFER GROUP	Transaction ID: SB21B.351 Date of Disbursement																				
Mailing Address 1117 EAST WEST HIGHWAY	<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>0</td><td>3</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	6		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	6		2	0	1	1												
City SILVER SPRINGS State MD Zip Code 20910	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	<table border="1"> <tr> <td colspan="10">2036.59</td> </tr> </table>	2036.59																			
2036.59																					
Candidate Name	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)

9092.63

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

THE STEVENS & SCHRIEFER GROUP

Mailing Address 1117 EAST WEST HIGHWAY

City
SILVER SPRINGS

State
MD

Zip Code
20910

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.740

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1677.62

Q1 and/or wind down expense

B.

Full Name (Last, First, Middle Initial)

THE STEVENS & SCHRIEFER GROUP

Mailing Address 1117 EAST WEST HIGHWAY

City
SILVER SPRINGS

State
MD

Zip Code
20910

Purpose of Disbursement
VIDEO SERVICES FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.742

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2670.00

Q1 and/or wind down expense

C.

Full Name (Last, First, Middle Initial)

THE STEVENS & SCHRIEFER GROUP

Mailing Address 1117 EAST WEST HIGHWAY

City
SILVER SPRINGS

State
MD

Zip Code
20910

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.890

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2841.13

Q1 and/or wind down expense

SUBTOTAL of Disbursements This Page (optional)

7188.75

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 658 / 970

<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)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
THE STEVENS & SCHRIEFER GROUP

Mailing Address 1117 EAST WEST HIGHWAY

City SILVER SPRINGS State MD Zip Code 20910

Purpose of Disbursement
STRATEGY CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.937

Date of Disbursement

/ /

Amount of Each Disbursement this Period

11666.67

Q1 and/or wind down expense

B. Full Name (Last, First, Middle Initial)
THE SWEETEST THING

Mailing Address 121 E. INNES ST.

City SALISBURY State NC Zip Code 28144

Purpose of Disbursement
CATERING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.178

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1250.00

C. Full Name (Last, First, Middle Initial)
THE UNIVERSITY CLUB

Mailing Address PO BOX 5475

City NEW YORK State NY Zip Code 10087

Purpose of Disbursement
ROOM RENTAL AND CATERING FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.031

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2210.02

SUBTOTAL of Disbursements This Page (optional)

15126.69

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 659 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

THE WHITE MOUNTAIN HOTEL & RESORT

Mailing Address PO BOX 1828

City
NORTH CONWAY

State
NH

Zip Code
03860

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.318

Date of Disbursement

/ /

Amount of Each Disbursement this Period

238.71

B.

Full Name (Last, First, Middle Initial)

TVEYES, INC.

Mailing Address 2150 POST ROAD

City
FAIRFIELD

State
CT

Zip Code
06824

Purpose of Disbursement
VIDEO SERVICE FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.682

Date of Disbursement

/ /

Amount of Each Disbursement this Period

450.00

C.

Full Name (Last, First, Middle Initial)

US POSTMASTER

Mailing Address
MANAGER OF MOWS
U.S. POSTAL SERVICE

City
WASHINGTON

State
DC

Zip Code
20066

Purpose of Disbursement
POSTAGE FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.013

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional)

2188.71

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 660 / 970

<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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

US POSTMASTER

Mailing Address MANAGER OF MOWS
U.S. POSTAL SERVICE

City WASHINGTON State DC Zip Code 20066

Purpose of Disbursement
POSTAL FEE FOR PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.014

Date of Disbursement

/ /

Amount of Each Disbursement this Period

770.00

B.

Full Name (Last, First, Middle Initial)

US TREASURY

Mailing Address

City State Zip Code

Purpose of Disbursement
TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.308

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2787.00

C.

Full Name (Last, First, Middle Initial)

VERIZON WIRELESS

Mailing Address PO BOX 660108

City DALLAS State TX Zip Code 75266

Purpose of Disbursement
PHONE SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.371

Date of Disbursement

/ /

Amount of Each Disbursement this Period

200.00

SUBTOTAL of Disbursements This Page (optional)

3757.00

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)

Free and Strong America PAC, Inc.

<p>A.</p> <p>Full Name (Last, First, Middle Initial) VERIZON WIRELESS</p> <p>Mailing Address P.O. BOX 15062</p> <p>City ALBANY State NY Zip Code 12212</p> <p>Purpose of Disbursement PHONE SERVICE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.394</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 2296.82</p> <p>Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) VERIZON WIRELESS</p> <p>Mailing Address P.O. BOX 15062</p> <p>City ALBANY State NY Zip Code 12212</p> <p>Purpose of Disbursement WIRELESS SERVICE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.698</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 8 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 4238.24</p> <p>Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) VILLAGES EQUIPMENT COMPANY</p> <p>Mailing Address 32734 ECHO DRIVE</p> <p>City LEESBURG State FL Zip Code 34788</p> <p>Purpose of Disbursement TRAVEL ON 02/09/11</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.117</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 1 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 1948.00</p> <p>Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional)

8483.06

TOTAL This Period (last page this line number only)

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

Free and Strong America PAC, Inc.

FEC Schedule B (Form 3X) (Revised 02/2003)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) WAGNER AND CO.	Transaction ID: SB21B.894 Date of Disbursement
Mailing Address 1020 COLLEGE AVENUE	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 5 / 2 0 1 1</div> </div>
City WHEATON State IL Zip Code 60187	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT	<div>19.00</div>
Candidate Name	<div>Category/Type</div>
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) ▼ Q1 and/or wind down expense
B. Full Name (Last, First, Middle Initial) WALBRIDGE	Transaction ID: SB21B.353 Date of Disbursement
Mailing Address 777 WOODWARD AVE., SUITE 300	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 7 / 2 0 1 1</div> </div>
City DETROIT State MI Zip Code 48226	Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL ON 3/14/11 AND 3/15/11	<div>16776.00</div>
Candidate Name	<div>Category/Type</div>
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) ▼
C. Full Name (Last, First, Middle Initial) WASATCH PLAZA HOLDINGS, LLC	Transaction ID: SB21B.159 Date of Disbursement
Mailing Address 595 SOUTH RIVERWOODS PARKWAY, #400	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 3 / 2 0 1 1</div> </div>
City LOGAN State UT Zip Code 84321	Amount of Each Disbursement this Period
Purpose of Disbursement ROOM RENTAL FOR PAC	<div>500.00</div>
Candidate Name	<div>Category/Type</div>
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)

17295.00

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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

WENDY WARFIELD AND ASSOCIATES

Mailing Address PO BOX 471

City
SACRAMENTO

State
CA

Zip Code
95812

Purpose of Disbursement
EMAIL/PHONE/OFFICE SUPPLIES REIMBURSEMEN

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.753

Date of Disbursement

/ /

Amount of Each Disbursement this Period

318.20

Q1 and/or wind down expense

SUBTOTAL of Disbursements This Page (optional)

318.20

TOTAL This Period (last page this line number only)

2309781.37

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

Free and Strong America PAC, Inc.

FEC Schedule B (Form 3X) (Revised 02/2003)

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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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
AUSTIN SCOTT FOR CONGRESS, INC.

Mailing Address PO BOX 27750

City MACON State GA Zip Code 31221

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
JAMES AUSTIN SCOTT

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: GA District: 08

Transaction ID: SB23.72

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

B. Full Name (Last, First, Middle Initial)
BASS VICTORY COMMITTEE

Mailing Address P.O. BOX 3451

City CONCORD State NH Zip Code 03302

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
CHARLES F BASS

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: NH District: 02

Transaction ID: SB23.54

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

C. Full Name (Last, First, Middle Initial)
BENISHEK FOR CONGRESS, INC.

Mailing Address 802 PENTOGA TRAIL

City CRYSTAL FALLS State MI Zip Code 49920

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
DANIEL J BENISHEK

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 01

Transaction ID: SB23.34

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

6000.00

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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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

BERG FOR CONGRESS

Mailing Address P.O. BOX 9394

City
FARGO

State
ND

Zip Code
58106

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
RICHARD A. BERG

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: ND District: 00

Transaction ID: SB23.134

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

B.

Full Name (Last, First, Middle Initial)

BILL FLORES FOR CONGRESS

Mailing Address P.O. BOX 6207

City
BRYAN

State
TX

Zip Code
77805

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
BILL FLORES

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: TX District: 17

Transaction ID: SB23.142

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

C.

Full Name (Last, First, Middle Initial)

BILL JOHNSON FOR CONGRESS COMMITTEE

Mailing Address 3755 HUNTERS HILL

City
POLAND

State
OH

Zip Code
44514

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
BILL JOHNSON

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 06

Transaction ID: SB23.137

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

6000.00

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 PageFOR 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)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
BILL SHUSTER FOR CONGRESS

Mailing Address P.O. BOX 27

City
HOLLIDAYSBURGState
PAZip Code
16648Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
WILLIAM FRANKLIN SHUSTERCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 09

Transaction ID: SB23.56

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	3		2	0	1	1

Amount of Each Disbursement this Period

2000.00

B. Full Name (Last, First, Middle Initial)
BILLY LONG FOR CONGRESS

Mailing Address 1675 - F E SEMINOLE

City
SPRINGFIELDState
MOZip Code
65804Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
BILLY LONGCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: MO District: 07

Transaction ID: SB23.130

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	9		2	0	1	1

Amount of Each Disbursement this Period

2000.00

C. Full Name (Last, First, Middle Initial)
BOB CORKER FOR SENATE 2012

Mailing Address PO BOX 848

City
CHATTANOOGAState
TNZip Code
37401Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
ROBERT P CORKER, JR.Category/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Transaction ID: SB23.23

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	3		2	0	1	1

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

9000.00

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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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

BOBBY SCHILLING FOR CONGRESS

Mailing Address 367 AVENUE OF THE CITIES, SUITE D

City EAST MOLINE State IL Zip Code 61244

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
ROBERT T. SCHILLING

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 17

Transaction ID: SB23.120

Date of Disbursement

/

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)

BRIAN BILBRAY FOR CONGRESS

Mailing Address 991C LOMAS SANTA FE DRIVE #192

City SOLANA BEACH State CA Zip Code 92075

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
BRIAN P BILBRAY

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 50

Transaction ID: SB23.40

Date of Disbursement

/

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

BUCK MCKEON FOR CONGRESS

Mailing Address 23942 LYONS AVE., #105

City SANTA CLARITA State CA Zip Code 91321

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
HOWARD (BUCK) P MCKEON

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 25

Transaction ID: SB23.11

Date of Disbursement

/

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

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

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

BUCSHON FOR CONGRESS

Mailing Address P.O. BOX 250

City
NEWBURGH

State
IN

Zip Code
47629

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
LARRY D. BUCSHON

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: IN District: 08

Transaction ID: SB23.122

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

B.

Full Name (Last, First, Middle Initial)

CANDICE MILLER FOR CONGRESS

Mailing Address PO BOX 182152

City
SHELBY TOWNSHIP

State
MI

Zip Code
48318

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
CANDICE S. MILLER

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 10

Transaction ID: SB23.157

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

C.

Full Name (Last, First, Middle Initial)

CHRIS GIBSON FOR CONGRESS

Mailing Address P.O. BOX 247

City
KINDERHOOK

State
NY

Zip Code
12106

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
CHRIS P. GIBSON

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 20

Transaction ID: SB23.105

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

6000.00

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

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

CHUCK FLEISCHMANN FOR CONGRESS COMMITTEE, INC.

Mailing Address PO BOX 11091

City
CHATTANOOGA

State
TN

Zip Code
37401

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
CHARLES J. FLEISCHMANN

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 03

Transaction ID: SB23.93

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

B.

Full Name (Last, First, Middle Initial)

CITIZENS FOR TOM PETRI

Mailing Address P.O. BOX 270

City
FOND DU LAC

State
WI

Zip Code
54936

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
THOMAS PETRI

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: WI District: 06

Transaction ID: SB23.60

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

C.

Full Name (Last, First, Middle Initial)

COBLE FOR CONGRESS

Mailing Address PO BOX 1177

City
GREENSBORO

State
NC

Zip Code
27402

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
JOHN HOWARD COBLE

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 06

Transaction ID: SB23.52

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

6000.00

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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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) COM. TO RE-ELECT TRENT FRANKS TO CONGRESS	Transaction ID: SB23.154 Date of Disbursement
Mailing Address PO BOX 8105	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 6 / 2 0 1 1</div> </div>
City GLENDALE State AZ Zip Code 85312	Amount of Each Disbursement this Period
Purpose of Disbursement CANDIDATE CONTRIBUTION	<div>2000.00</div>
Candidate Name TRENT FRANKS	<div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 02	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) COMM. TO REELECT CONG. DANA ROHRABACHER	Transaction ID: SB23.38 Date of Disbursement
Mailing Address PO BOX 823	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 3 / 2 0 1 1</div> </div>
City HUNTINGTON BEACH State CA Zip Code 92648	Amount of Each Disbursement this Period
Purpose of Disbursement CANDIDATE CONTRIBUTION	<div>2000.00</div>
Candidate Name DANA ROHRABACHER	<div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 46	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) CONAWAY FOR CONGRESS	Transaction ID: SB23.58 Date of Disbursement
Mailing Address PO BOX 51272	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 3 / 2 0 1 1</div> </div>
City MIDLAND State TX Zip Code 79710	Amount of Each Disbursement this Period
Purpose of Disbursement CANDIDATE CONTRIBUTION	<div>2000.00</div>
Candidate Name MICHAEL CONAWAY	<div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 11	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

6000.00

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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NAME OF COMMITTEE (In Full)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) CONSECO FOR CONGRESS	Transaction ID: SB23.143 Date of Disbursement
Mailing Address 10004 WURZBACH ROAD, #366	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 9 / 2 0 1 1</div> </div>
City SAN ANTONIO State TX Zip Code 78230	Amount of Each Disbursement this Period
Purpose of Disbursement CANDIDATE CONTRIBUTION	<div>2000.00</div>
Candidate Name FRANCISCO 'QUICO' CANSECO	<div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 23	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) CRAVAACK FOR CONGRESS CAMPAIGN COMMITTEE	Transaction ID: SB23.128 Date of Disbursement
Mailing Address P.O. BOX 951	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 9 / 2 0 1 1</div> </div>
City NORTH BRANCH State MN Zip Code 55056	Amount of Each Disbursement this Period
Purpose of Disbursement CANDIDATE CONTRIBUTION	<div>2000.00</div>
Candidate Name CHIP CRAVAACK	<div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 08	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) CRAWFORD FOR CONGRESS	Transaction ID: SB23.107 Date of Disbursement
Mailing Address PO BOX 16956	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 9 / 2 0 1 1</div> </div>
City JONESBORO State AR Zip Code 72403	Amount of Each Disbursement this Period
Purpose of Disbursement CANDIDATE CONTRIBUTION	<div>2000.00</div>
Candidate Name ERIC ALAN RICK CRAWFORD	<div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 01	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

6000.00

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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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
CRENSHAW FOR CONGRESS CAMPAIGN

Mailing Address 4963 BEACH BOULEVARD

City JACKSONVILLE State FL Zip Code 32207

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
ANDER CRENSHAW

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 04

Transaction ID: SB23.112

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

B. Full Name (Last, First, Middle Initial)
DAN COATS FOR INDIANA

Mailing Address P.O. BOX 301141

City INDIANAPOLIS State IN Zip Code 46230

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
DANIEL R COATS

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: IN District: 00

Transaction ID: SB23.27

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

C. Full Name (Last, First, Middle Initial)
DANIEL WEBSTER FOR CONGRESS

Mailing Address 3400 OLD WINTER GARDEN ROAD

City ORLANDO State FL Zip Code 32805

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
DANIEL WEBSTER

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 08

Transaction ID: SB23.113

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

6500.00

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

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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) **DAVE CAMP FOR CONGRESS**

Mailing Address 5915 EASTMAN AVENUE, SUITE 100

City MIDLAND State MI Zip Code 48640

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
DAVID LEE CAMP

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 04

Transaction ID: SB23.20

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

B. Full Name (Last, First, Middle Initial) **DENHAM FOR CONGRESS**

Mailing Address 2150 RIVER PLAZA DRIVE, #150

City SACRAMENTO State CA Zip Code 95833

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
JEFF DENHAM

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 19

Transaction ID: SB23.68

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

C. Full Name (Last, First, Middle Initial) **DIANE BLACK FOR CONGRESS**

Mailing Address PO BOX 1437

City GALLATIN State TN Zip Code 37066

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
DIANE L. BLACK

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 06

Transaction ID: SB23.14

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

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	27		28a		28b		28c		29		30b

Free and Strong America PAC, Inc.

FEC Schedule B (Form 3X) (Revised 02/2003)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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)

Free and Strong America PAC, Inc.

**A. Full Name (Last, First, Middle Initial)
FAMILIES FOR JAMES LANKFORD**

Mailing Address PO BOX 1639

City BETHANY State OK Zip Code 73008

Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
JAMES PAUL LANKFORDCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: OK District: 05

Transaction ID: SB23.141

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	9		2	0	1	1

Amount of Each Disbursement this Period

2000.00

**B. Full Name (Last, First, Middle Initial)
FITZPATRICK FOR CONGRESS**

Mailing Address P.O. BOX 185

City LANGHORNE State PA Zip Code 19047

Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
MICHAEL G. FITZPATRICKCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 08

Transaction ID: SB23.86

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	3		2	0	1	1

Amount of Each Disbursement this Period

2000.00

**C. Full Name (Last, First, Middle Initial)
FRIENDS OF RICH NUGENT**

Mailing Address P.O. BOX 15668

City BROOKSVILLE State FL Zip Code 34604

Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
RICHARD B. NUGENTCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 05

Transaction ID: SB23.101

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	1		2	0	1	1

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

6000.00

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

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

FRIENDS OF DENNIS ROSS

Mailing Address PO BOX 7310

City
LAKELAND

State
FL

Zip Code
33807

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
DENNIS ALAN ROSS

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 12

Transaction ID: SB23.102

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

B.

Full Name (Last, First, Middle Initial)

FRIENDS OF TODD YOUNG

Mailing Address P.O. BOX 1053

City
BLOOMINGTON

State
IN

Zip Code
47402

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
TODD CHRISTOPHER YOUNG

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: IN District: 09

Transaction ID: SB23.123

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

C.

Full Name (Last, First, Middle Initial)

FRIENDS OF ROY BLUNT

Mailing Address PO BOX 50100

City
SPRINGFIELD

State
MO

Zip Code
65805

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
ROY BLUNT

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: MO District: 00

Transaction ID: SB23.15

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

9000.00

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
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NAME OF COMMITTEE (In Full)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) FRIENDS OF CONNIE MACK	Transaction ID: SB23.19
Mailing Address PO BOX 519	Date of Disbursement
City NAPLES State FL Zip Code 34106	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 0 / 2 0 1 1</div> </div>
Purpose of Disbursement CANDIDATE CONTRIBUTION	Amount of Each Disbursement this Period
Candidate Name CONNIE MACK	<div> <div></div> <div>2000.00</div> </div>
<div> <div>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: FL District: 14</div> </div>	Category/ Type
B. Full Name (Last, First, Middle Initial) FRIENDS OF JOE HECK	Transaction ID: SB23.21
Mailing Address P.O. BOX 750114	Date of Disbursement
City LAS VEGAS State NV Zip Code 89136	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 0 / 2 0 1 1</div> </div>
Purpose of Disbursement CANDIDATE CONTRIBUTION	Amount of Each Disbursement this Period
Candidate Name JOE HECK	<div> <div></div> <div>2000.00</div> </div>
<div> <div>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: NV District: 03</div> </div>	Category/ Type
C. Full Name (Last, First, Middle Initial) FRIENDS OF JOHN BARRASSO	Transaction ID: SB23.24
Mailing Address PO BOX 52008	Date of Disbursement
City CASPER State WY Zip Code 82605	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 3 / 2 0 1 1</div> </div>
Purpose of Disbursement CANDIDATE CONTRIBUTION	Amount of Each Disbursement this Period
Candidate Name JOHN BARRASSO	<div> <div></div> <div>5000.00</div> </div>
<div> <div>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: WY District: 00</div> </div>	Category/ Type

SUBTOTAL of Disbursements This Page (optional)

9000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

FRIENDS OF KELLY AYOTTE

Mailing Address P.O. BOX 233

City
NASHUA

State
NH

Zip Code
03061

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
KELLY A AYOTTE

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: NH District: 00

Transaction ID: SB23.29

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

FRIENDS OF JACK KINGSTON

Mailing Address PO BOX 2133

City
SAVANNAH

State
GA

Zip Code
31402

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
JOHN HEDDENS KINGSTON

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: GA District: 01

Transaction ID: SB23.41

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

C.

Full Name (Last, First, Middle Initial)

FRIENDS OF FRANK GUINTA

Mailing Address P.O. BOX 877

City
MANCHESTER

State
NH

Zip Code
03105

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
FRANK GUINTA

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: NH District: 01

Transaction ID: SB23.53

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

6500.00

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

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NAME OF COMMITTEE (In Full)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
FRIENDS OF NAN HAYWORTH

Mailing Address 51 GLENEIDA AVENUE

City CARMEL State NY Zip Code 10512

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
NAN HAYWORTH

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 19

Transaction ID: SB23.80

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

B. Full Name (Last, First, Middle Initial)
FRIENDS OF SCOTT DESJARLAIS

Mailing Address PO BOX 311

City JASPER State TN Zip Code 37347

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
SCOTT EUGENE DESJARLAIS

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 04

Transaction ID: SB23.94

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

C. Full Name (Last, First, Middle Initial)
FRIENDS OF JASON CHAFFETZ

Mailing Address 315 WESTFIELD CIRCLE

City ALPINE State UT Zip Code 84004

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
JASON CHAFFETZ

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: UT District: 03

Transaction ID: SB23.97

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

6000.00

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 PageFOR 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)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
GARDNER FOR CONGRESS 2012

Mailing Address P.O. BOX 2408

City LOVELAND State CO Zip Code 80539

Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
CORY SCOTT GARDNERCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: CO District: 04

Transaction ID: SB23.70

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	3	/	2	0	1	1

Amount of Each Disbursement this Period

2000.00

B. Full Name (Last, First, Middle Initial)
GIBBS FOR CONGRESS

Mailing Address 6992 TR 466

City LAKEVILLE State OH Zip Code 44638

Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
ROBERT BRIAN GIBBSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 18

Transaction ID: SB23.140

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	9	/	2	0	1	1

Amount of Each Disbursement this Period

2000.00

C. Full Name (Last, First, Middle Initial)
GINGREY FOR CONGRESS

Mailing Address PO BOX U

City MARIETTA State GA Zip Code 30060

Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
PHILLIP J GINREYCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: GA District: 11

Transaction ID: SB23.44

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	3	/	2	0	1	1

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

6000.00

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
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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)
GRASSLEY COMMITTEE, INC.

Mailing Address P.O. BOX 1000

City DES MOINES State IA Zip Code 50304

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
CHARLES E GRASSLEY

Office Sought: ☐ House
☒ Senate
☐ President

State: IA District: 00

Disbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.26

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)
GRAVES FOR CONGRESS

Mailing Address P.O. BOX 701

City GAINESVILLE State GA Zip Code 30503

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
JOHN THOMAS GRAVES, JR.

Office Sought: ☒ House
☐ Senate
☐ President

State: GA District: 09

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.73

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)
HAL ROGERS FOR CONGRESS

Mailing Address P.O. BOX 1214

City SOMERSET State KY Zip Code 42502

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
HAROLD DALLAS ROGERS

Office Sought: ☒ House
☐ Senate
☐ President

State: KY District: 05

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.49

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

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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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
HATCH ELECTION COMMITTEE, INC.

Mailing Address 175 SOUTH WEST TEMPLE, SUITE 650

City State Zip Code
SALT LAKE CITY UT 84101

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
ORRIN G. HATCH

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: UT District: 00

Transaction ID: SB23.63

Date of Disbursement

M M / D D / Y Y Y Y
0 2 / 2 3 / 2 0 1 1

Amount of Each Disbursement this Period

5000.00

B. Full Name (Last, First, Middle Initial)
HELLER FOR SENATE

Mailing Address PO BOX 371907

City State Zip Code
LAS VEGAS NV 89137

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
DEAN HELLER

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: NV District: 00

Transaction ID: SB23.150

Date of Disbursement

M M / D D / Y Y Y Y
0 3 / 2 3 / 2 0 1 1

Amount of Each Disbursement this Period

5000.00

C. Full Name (Last, First, Middle Initial)
HOEVEN FOR SENATE

Mailing Address P.O. BOX 15114

City State Zip Code
ARLINGTON VA 22215

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
JOHN HOEVEN

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: ND District: 00

Transaction ID: SB23.33

Date of Disbursement

M M / D D / Y Y Y Y
0 2 / 0 3 / 2 0 1 1

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

12500.00

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

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

HOOSIERS FOR ROKITA

Mailing Address 7643 EAST U.S. HIGHWAY 36

City
AVON

State
IN

Zip Code
46123

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
THEODORE EDWARD ROKITA

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: IN District: 04

Transaction ID: SB23.121

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

B.

Full Name (Last, First, Middle Initial)

HUIZENGA FOR CONGRESS

Mailing Address 441 WILLIAM COURT

City
ZEELAND

State
MI

Zip Code
49464

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
WILLIAM P. HUIZENGA

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 02

Transaction ID: SB23.75

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

C.

Full Name (Last, First, Middle Initial)

JAIME FOR CONGRESS

Mailing Address PO BOX 1614

City
RIDGEFIELD

State
WA

Zip Code
98642

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
JAIME HERRERA BEUTLER

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: WA District: 03

Transaction ID: SB23.147

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

6000.00

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 PageFOR 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)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
JEFF DUNCAN FOR CONGRESS

Mailing Address PO BOX 732

City CLINTON State SC Zip Code 29325

Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
JEFF DUNCANCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: SC District: 03

Transaction ID: SB23.90

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	3		2	0	1	1

Amount of Each Disbursement this Period

2000.00

B. Full Name (Last, First, Middle Initial)
JEFF FLAKE FOR US SENATE, INC.

Mailing Address PO BOX 12512

City TEMPE State AZ Zip Code 85284

Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
JEFF FLAKECategory/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: AZ District: 00

Transaction ID: SB23.151

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	1	1

Amount of Each Disbursement this Period

5000.00

C. Full Name (Last, First, Middle Initial)
JIM RENACCI FOR CONGRESS

Mailing Address 150 SMOKERISE DRIVE

City WADSWORTH State OH Zip Code 44281

Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
JAMES B. RENACCICategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 16

Transaction ID: SB23.139

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	9		2	0	1	1

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

9000.00

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 PageFOR 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)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
JOE WALSH FOR CONGRESS COMMITTEE, INC.

Mailing Address 830 W. ROUTE 22 - BOX 56

City LAKE ZURICH State IL Zip Code 60047

Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
JOE WALSHCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 08

Transaction ID: SB23.116

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	9	/	2	0	1	1

Amount of Each Disbursement this Period

2000.00

B. Full Name (Last, First, Middle Initial)
JOE WILSON FOR CONGRESS COMMITTEE

Mailing Address PO BOX 2145

City WEST COLUMBIA State SC Zip Code 29171

Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
JOE WILSONCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: SC District: 02

Transaction ID: SB23.159

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	6	/	2	0	1	1

Amount of Each Disbursement this Period

2000.00

C. Full Name (Last, First, Middle Initial)
JOHN CAMPBELL FOR CONGRESS

Mailing Address 4590 MACARTHUR BLVD., SUITE 500

City NEWPORT BEACH State CA Zip Code 92660

Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
JOHN BT CAMPBELL, IIICategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 48

Transaction ID: SB23.39

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	3	/	2	0	1	1

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

6000.00

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:
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) **JOHN CARTER FOR CONGRESS**

Mailing Address 1717 NORTH IH 35, SUITE 304

City State Zip Code
 ROUND ROCK TX 78664

Purpose of Disbursement
 CANDIDATE CONTRIBUTION

Candidate Name
 JOHN R CARTER

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: TX District: 31

Transaction ID: SB23.59

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

B. Full Name (Last, First, Middle Initial) **JON RUNYAN FOR CONGRESS, INC.**

Mailing Address P.O. BOX 225

City State Zip Code
 COLONIA NJ 07067

Purpose of Disbursement
 CANDIDATE CONTRIBUTION

Candidate Name
 JON RUNYAN

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: NJ District: 03

Transaction ID: SB23.135

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

C. Full Name (Last, First, Middle Initial) **JUSTIN AMASH FOR CONGRESS**

Mailing Address 1500 E. BELTLINE AVENUE, SE
 SUITE 250

City State Zip Code
 GRAND RAPIDS MI 49506

Purpose of Disbursement
 CANDIDATE CONTRIBUTION

Candidate Name
 JUSTIN AMASH

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 03

Transaction ID: SB23.76

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

6000.00

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 PageFOR 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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

KANSANS FOR HUELSKAMP

Mailing Address P.O. BOX 3410

City
FOWLERState
KSZip Code
67844Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
TIMOTHY A. HUELSKAMPCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: KS District: 01

Transaction ID: SB23.124

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	9	/	2	0	1	1

Amount of Each Disbursement this Period

2000.00

B.

Full Name (Last, First, Middle Initial)

KAY GRANGER CAMPAIGN FUND

Mailing Address 715 JONES ST., SUITE 101

City
FORT WORTHState
TXZip Code
76102Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
KAY GRANGERCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: TX District: 12

Transaction ID: SB23.16

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	4	/	2	0	1	1

Amount of Each Disbursement this Period

2000.00

C.

Full Name (Last, First, Middle Initial)

KING FOR CONGRESS

Mailing Address 116 N. MAIN STREET
PO BOX 400City
EARLYState
IAZip Code
50535Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
STEVE KINGCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: IA District: 05

Transaction ID: SB23.46

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	3	/	2	0	1	1

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

6000.00

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

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) **KINZINGER FOR CONGRESS**

Mailing Address P.O. BOX 1050

City BOURBONNAIS State IL Zip Code 60451

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
ADAM KINZINGER

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 11

Transaction ID: SB23.118

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

B. Full Name (Last, First, Middle Initial) **KIRK FOR SENATE**

Mailing Address P.O. BOX 8

City WINNETKA State IL Zip Code 60093

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
MARK STEVEN KIRK

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 00

Transaction ID: SB23.25

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

C. Full Name (Last, First, Middle Initial) **KRISTI FOR CONGRESS**

Mailing Address P.O. BOX 852

City SIOUX FALLS State SD Zip Code 57101

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
KRISTI LYNN NOEM

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: SD District: 00

Transaction ID: SB23.92

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

6500.00

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 PageFOR 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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

LANCE FOR CONGRESS

Mailing Address PO BOX 225

City
COLONIAState
NJZip Code
07067Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
LEONARD LANCECategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: NJ District: 07

Transaction ID: SB23.55

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	3	/	2	0	1	1

Amount of Each Disbursement this Period

2000.00

B.

Full Name (Last, First, Middle Initial)

LANDRY FOR LOUISIANA

Mailing Address PO BOX 13816

City
NEW IBERIAState
LAZip Code
70562Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
JEFFREY M. LANDRYCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: LA District: 03

Transaction ID: SB23.127

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	9	/	2	0	1	1

Amount of Each Disbursement this Period

2000.00

C.

Full Name (Last, First, Middle Initial)

LATHAM FOR CONGRESS

Mailing Address PO BOX 71

City
CLARIONState
IAZip Code
50525Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
THOMAS P LATHAMCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: IA District: 04

Transaction ID: SB23.45

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	3	/	2	0	1	1

Amount of Each Disbursement this Period

2000.00

NOW RUNNING FOR IA-03

SUBTOTAL of Disbursements This Page (optional)

6000.00

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
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) LISA MURKOWSKI FOR US SENATE	Transaction ID: SB23.64 Date of Disbursement
Mailing Address PO BOX 100847	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 3 / 2 0 1 1</div> </div>
City ANCHORAGE State AK Zip Code 99510	Amount of Each Disbursement this Period
Purpose of Disbursement CANDIDATE CONTRIBUTION	<div>2500.00</div>
Candidate Name LISA MURKOWSKI	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AK District: 00	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) LOU BARLETTA FOR CONGRESS	Transaction ID: SB23.88 Date of Disbursement
Mailing Address PO BOX 128	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 3 / 2 0 1 1</div> </div>
City HAZLETON State PA Zip Code 18201	Amount of Each Disbursement this Period
Purpose of Disbursement CANDIDATE CONTRIBUTION	<div>2000.00</div>
Candidate Name LOU BARLETTA	<div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 11	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) MARCO RUBIO FOR U.S. SENATE	Transaction ID: SB23.100 Date of Disbursement
Mailing Address 2030 SOUTH DOUGLAS ROAD SUITE 105	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
City CORAL GABLES State FL Zip Code 33134	Amount of Each Disbursement this Period
Purpose of Disbursement CANDIDATE CONTRIBUTION	<div>2500.00</div>
Candidate Name MARCO RUBIO	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 00	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

7000.00

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

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MARINO FOR CONGRESS

Mailing Address P.O. BOX 653

City
WILLIAMSPORT

State
PA

Zip Code
17703

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
THOMAS ANTHONY MARINO

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 10

Transaction ID: SB23.87

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

B.

Full Name (Last, First, Middle Initial)

MARIO DIAZ-BALART FOR CONGRESS

Mailing Address 95 MERRICK WAY, SUITE 250

City
CORAL GABLES

State
FL

Zip Code
33134

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
MARIO DIAZ-BALART

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 21

Transaction ID: SB23.103

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

C.

Full Name (Last, First, Middle Initial)

MARSHA BLACKBURN FOR CONGRESS, INC.

Mailing Address PO BOX 3750

City
BRENTWOOD

State
TN

Zip Code
37024

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
MARSHA BLACKBURN

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 07

Transaction ID: SB23.57

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

6000.00

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 PageFOR 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)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
MARTHA ROBY FOR CONGRESS

Mailing Address P.O. BOX 195

City
MONTGOMERYState
ALZip Code
36101Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
MARTHA ROBYCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: AL District: 02

Transaction ID: SB23.12

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	1		2	0	1	1

Amount of Each Disbursement this Period

2000.00

B. Full Name (Last, First, Middle Initial)
MARY BONO MACK COMMITTEE

Mailing Address P.O. BOX 3370

City
PALM SPRINGSState
CAZip Code
92263Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
MARY BONO MACKCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 45

Transaction ID: SB23.13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	1		2	0	1	1

Amount of Each Disbursement this Period

2000.00

C. Full Name (Last, First, Middle Initial)
MCCOTTER CONGRESSIONAL COMMITTEE

Mailing Address PO BOX 530788

City
LIVONIAState
MIZip Code
48153Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
THADDEUS G. MCCOTTERCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 11

Transaction ID: SB23.158

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	1	1

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

6000.00

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:
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) MCKINLEY FOR CONGRESS Mailing Address 32 20TH STREET	Transaction ID: SB23.99 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 3 / 2 0 1 1</div> </div>
City WHEELING State WV Zip Code 26003 Purpose of Disbursement CANDIDATE CONTRIBUTION Candidate Name DAVID B. MCKINLEY Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: WV District: 01	Amount of Each Disbursement this Period <div>2000.00</div>
B. Full Name (Last, First, Middle Initial) MICHAEL GRIMM FOR CONGRESS Mailing Address 560 9TH STREET	Transaction ID: SB23.79 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 3 / 2 0 1 1</div> </div>
City BROOKLYN State NY Zip Code 11215 Purpose of Disbursement CANDIDATE CONTRIBUTION Candidate Name MICHAEL GRIMM Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NY District: 13	Amount of Each Disbursement this Period <div>2000.00</div>
C. Full Name (Last, First, Middle Initial) MIKE KELLY FOR CONGRESS Mailing Address PO BOX 476	Transaction ID: SB23.84 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 3 / 2 0 1 1</div> </div>
City LYNDORA State PA Zip Code 16045 Purpose of Disbursement CANDIDATE CONTRIBUTION Candidate Name GEORGE J. KELLY, JR. Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: PA District: 03	Amount of Each Disbursement this Period <div>2000.00</div>

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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<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)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
MIKE ROGERS FOR CONGRESS

Mailing Address 123 EAST 13TH STREET

City ANNISTON State AL Zip Code 36201

Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
MICHAEL ROGERSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: AL District: 03

Transaction ID: SB23.36

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	3		2	0	1	1

Amount of Each Disbursement this Period

2000.00

B. Full Name (Last, First, Middle Initial)
MOBROOKSFORCONGRESS.COM

Mailing Address 7610 FOXFIRE DRIVE

City HUNTSVILLE State AL Zip Code 35802

Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
MO BROOKSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: AL District: 05

Transaction ID: SB23.65

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	3		2	0	1	1

Amount of Each Disbursement this Period

2000.00

C. Full Name (Last, First, Middle Initial)
MONTANANS FOR REHBERG

Mailing Address PO BOX 1597

City HELENA State MT Zip Code 59624

Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
DENNIS R REHBERGCategory/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: MT District: 00

Transaction ID: SB23.106

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	9		2	0	1	1

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

9000.00

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
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) **MORGAN GRIFFITH FOR CONGRESS**

Mailing Address P.O. BOX 361

City State Zip Code
CHRISTIANBURG VA 24068

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
H. MORGAN GRIFFITH

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: VA District: 09

Transaction ID: SB23.98

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

B. Full Name (Last, First, Middle Initial) **MULVANEY FOR CONGRESS**

Mailing Address 9789 CHARLOTTE HWY, SUITE 400-255

City State Zip Code
INDIAN ISLAND SC 29707

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
JOHN MICHAEL (MICK) MULVANEY

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: SC District: 05

Transaction ID: SB23.18

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

C. Full Name (Last, First, Middle Initial) **NUNNELEE FOR CONGRESS**

Mailing Address 438 EAST MAIN ST.

City State Zip Code
TUPELO MS 38802

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
PATRICK ALAN NUNNELEE

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: MS District: 01

Transaction ID: SB23.131

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

PALAZZO FOR CONGRESS

Mailing Address 13155 HIGHWAY 67, SUITE B

City BILOXI State MS Zip Code 39532

Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
STEVEN MCCARTY PALAZZOCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: MS District: 04

Transaction ID: SB23.132

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	9		2	0	1	1

Amount of Each Disbursement this Period

2000.00

B.

Full Name (Last, First, Middle Initial)

PAT MEEHAN FOR CONGRESS

Mailing Address 50 S. PROVIDENCE RD.

City MEDIA State PA Zip Code 19063

Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
PATRICK L. MEEHANCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 07

Transaction ID: SB23.85

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	3		2	0	1	1

Amount of Each Disbursement this Period

2000.00

C.

Full Name (Last, First, Middle Initial)

PAUL GOSAR FOR CONGRESS

Mailing Address 2222 E. CEDAR AVE.

City FLAGSTAFF State AZ Zip Code 86004

Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
PAUL ANTHONY GOSARCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: AZ District: 01

Transaction ID: SB23.109

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	9		2	0	1	1

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) PEOPLE FOR PEARCE Mailing Address PO BOX 2696	Transaction ID: SB23.78 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 3 / 2 0 1 1</div> </div>
City HOBBS State NM Zip Code 88241 Purpose of Disbursement CANDIDATE CONTRIBUTION Candidate Name STEVAN E. PEARCE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NM District: 02	Amount of Each Disbursement this Period <div>2000.00</div>
B. Full Name (Last, First, Middle Initial) POMPEO FOR CONGRESS, INC. Mailing Address P.O. BOX 780146 City WICHITA State KS Zip Code 67212 Purpose of Disbursement CANDIDATE CONTRIBUTION Candidate Name MICHAEL RICHARD POMPEO Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: KS District: 04	Transaction ID: SB23.126 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 9 / 2 0 1 1</div> </div> Amount of Each Disbursement this Period <div>2000.00</div>
C. Full Name (Last, First, Middle Initial) PORTMAN FOR SENATE COMMITTEE Mailing Address 9856 ARCHER LANE City DUBLIN State OH Zip Code 43017 Purpose of Disbursement CANDIDATE CONTRIBUTION Candidate Name ROB PORTMAN Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 00	Transaction ID: SB23.30 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 3 / 2 0 1 1</div> </div> Amount of Each Disbursement this Period <div>2500.00</div>

SUBTOTAL of Disbursements This Page (optional)

6500.00

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 PageFOR 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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

PRICE FOR CONGRESS

Mailing Address PO BOX 425

City
ROSWELLState
GAZip Code
30077Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
THOMAS EDMUNDS PRICECategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: GA District: 06

Transaction ID: SB23.43

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	3		2	0	1	1

Amount of Each Disbursement this Period

2000.00

B.

Full Name (Last, First, Middle Initial)

QUAYLE FOR CONGRESS

Mailing Address 4340 INDIAN SCHOOL RD., #21
BOX 132City
PHOENIXState
AZZip Code
85018Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
BEN QUAYLECategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: AZ District: 03

Transaction ID: SB23.67

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	3		2	0	1	1

Amount of Each Disbursement this Period

2000.00

C.

Full Name (Last, First, Middle Initial)

RAND PAUL FOR U.S. SENATE

Mailing Address 1019 STATE STREET

City
BOWLING GREENState
KYZip Code
42101Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
RAND PAULCategory/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: KY District: 00

Transaction ID: SB23.28

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	3		2	0	1	1

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

6500.00

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 PageFOR 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)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
RANDY HULTGREN FOR CONGRESS

Mailing Address P.O. BOX 39

City BATAVIA State IL Zip Code 60510

Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
RANDY HULTGRENCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 14

Transaction ID: SB23.119

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	9		2	0	1	1

Amount of Each Disbursement this Period

2000.00

B. Full Name (Last, First, Middle Initial)
RAUL LABRADOR FOR IDAHO

Mailing Address P.O. BOX 1616

City BOISE State ID Zip Code 83701

Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
RAUL RAFAEL LABRADORCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: ID District: 01

Transaction ID: SB23.115

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	9		2	0	1	1

Amount of Each Disbursement this Period

2000.00

C. Full Name (Last, First, Middle Initial)
RE-ELECT TIM GRIFFIN FOR CONGRESS COMMITTEE

Mailing Address P.O. BOX 7526

City LITTLE ROCK State AR Zip Code 72217

Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
JOHN TIMOTHY GRIFFINCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: AR District: 02

Transaction ID: SB23.66

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	3		2	0	1	1

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

6000.00

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 PageFOR 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)

Free and Strong America PAC, Inc.

**A. Full Name (Last, First, Middle Initial)
RENEE ELLMERS FOR CONGRESS COMMITTEE**

Mailing Address PO BOX 904

City DUNN State NC Zip Code 28335

Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
RENEE JACISIN ELLMERSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 02

Transaction ID: SB23.133

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	9		2	0	1	1

Amount of Each Disbursement this Period

2000.00

**B. Full Name (Last, First, Middle Initial)
RIBBLE FOR CONGRESS**

Mailing Address P.O. BOX 7200

City APPLETON State WI Zip Code 54912

Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
REID RIBBLECategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: WI District: 08

Transaction ID: SB23.149

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	9		2	0	1	1

Amount of Each Disbursement this Period

2000.00

**C. Full Name (Last, First, Middle Initial)
RICHARD HANNA FOR CONGRESS COMMITTEE**

Mailing Address 2308 GENESEE STREET

City UTICA State NY Zip Code 13502

Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
RICHARD L. HANNACategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 24

Transaction ID: SB23.81

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	3		2	0	1	1

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

6000.00

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 PageFOR 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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

ROB BISHOP FOR CONGRESS

Mailing Address P.O. BOX 2010

City
BRIGHAM CITYState
UTZip Code
84302Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
ROBERT BISHOPCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: UT District: 01

Transaction ID: SB23.96

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	3		2	0	1	1

Amount of Each Disbursement this Period

2000.00

B.

Full Name (Last, First, Middle Initial)

ROB WOODALL FOR CONGRESS

Mailing Address POST OFFICE BOX 1871

City
LAWRENCEVILLEState
GAZip Code
30046Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
WILLIAM ROBERT WOODALL, IIICategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: GA District: 07

Transaction ID: SB23.71

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	3		2	0	1	1

Amount of Each Disbursement this Period

2000.00

C.

Full Name (Last, First, Middle Initial)

ROBERT ADERHOLT FOR CONGRESS

Mailing Address P.O. BOX 1158

City
HALEYVILLEState
ALZip Code
35565Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
ROBERT BROWN ADERHOLTCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: AL District: 04

Transaction ID: SB23.37

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	3		2	0	1	1

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

6000.00

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 PageFOR 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)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
ROBERT HURT FOR CONGRESS

Mailing Address P.O. BOX 2

City CHATHAM State VA Zip Code 24531

Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
ROBERT HURTCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: VA District: 05

Transaction ID: SB23.146

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	9	/	2	0	1	1

Amount of Each Disbursement this Period

2000.00

B. Full Name (Last, First, Middle Initial)
RODNEY ALEXANDER FOR CONGRESS INC.

Mailing Address 319 NANCY'S ROAD

City QUITMAN State LA Zip Code 71268

Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
RODNEY M ALEXANDERCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: LA District: 05

Transaction ID: SB23.50

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	3	/	2	0	1	1

Amount of Each Disbursement this Period

2000.00

C. Full Name (Last, First, Middle Initial)
ROGERS FOR CONGRESS

Mailing Address PO BOX 581

City BRIGHTON State MI Zip Code 48116

Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
MICHAEL J. ROGERSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 08

Transaction ID: SB23.156

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	6	/	2	0	1	1

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

6000.00

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 PageFOR LINE NUMBER:
(check only one)

PAGE 705 / 970

<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)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
RON JOHNSON FOR SENATE, INC.

Mailing Address 601 OREGON STREET, SUITE A

City OSHKOSH State WI Zip Code 54902

Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
RONALD HAROLD JOHNSONCategory/
TypeOffice Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2016 ☒ Primary ☐ General
☐ Other (specify) ▼

State: WI District: 00

Transaction ID: SB23.32

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	3	/	2	0	1	1

Amount of Each Disbursement this Period

2500.00

B. Full Name (Last, First, Middle Initial)
SANDY ADAMS FOR CONGRESS

Mailing Address P.O. BOX 1566

City ORLANDO State FL Zip Code 32802

Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
SANDY ADAMSCategory/
TypeOffice Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2012 ☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 24

Transaction ID: SB23.104

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	1	/	2	0	1	1

Amount of Each Disbursement this Period

2000.00

C. Full Name (Last, First, Middle Initial)
SCHOCK FOR CONGRESS

Mailing Address P.O. BOX 10555

City PEORIA State IL Zip Code 61612

Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
AARON JON SCHOCKCategory/
TypeOffice Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2012 ☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 18

Transaction ID: SB23.22

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	3	1	/	2	0	1	1

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

6500.00

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 PageFOR 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)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
SCHWEIKERT FOR CONGRESS

Mailing Address 8776 E. SHEA BLVD., SUITE B3A-626

City State Zip Code
SCOTTSDALE AZ 85260Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
DAVID SCHWEIKERTCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: AZ District: 05

Transaction ID: SB23.110

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	9	/	2	0	1	1

Amount of Each Disbursement this Period

2000.00

B. Full Name (Last, First, Middle Initial)
SCOTT BROWN FOR US SENATE COMMITTEE

Mailing Address PO BOX 395

City State Zip Code
WRENTHAM MA 02093Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
SCOTT P BROWNCategory/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: MA District: 00

Transaction ID: SB23.09

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	1	/	2	0	1	1

Amount of Each Disbursement this Period

5000.00

C. Full Name (Last, First, Middle Initial)
SCOTT BROWN FOR US SENATE COMMITTEE

Mailing Address PO BOX 395

City State Zip Code
WRENTHAM MA 02093Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
SCOTT P BROWNCategory/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: MA District: 00

Transaction ID: SB23.10

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	1	/	2	0	1	1

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

12000.00

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 PageFOR 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)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
SCOTT RIGELL FOR CONGRESS

Mailing Address 915 FIRST COLONIAL ROAD, SUITE 100

City State Zip Code
VIRGINIA BEACH VA 23454Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
EDWARD SCOTT RIGELLOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: VA District: 02

Transaction ID: SB23.145

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	9		2	0	1	1

Amount of Each Disbursement this Period

2000.00

B. Full Name (Last, First, Middle Initial)
SIMPSON FOR CONGRESS

Mailing Address 1487 PARKWAY DRIVE

City State Zip Code
BLACKFOOT ID 83221Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
MICHAEL K SIMPSONOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: ID District: 02

Transaction ID: SB23.47

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	3		2	0	1	1

Amount of Each Disbursement this Period

2000.00

C. Full Name (Last, First, Middle Initial)
SNOWE FOR SENATE

Mailing Address PO BOX 2012

City State Zip Code
PORTLAND ME 04104Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
OLYMPIA J. SNOWEOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: ME District: 00

Transaction ID: SB23.61

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	3		2	0	1	1

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

9000.00

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 PageFOR 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)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
SOUTHERLAND FOR CONGRESS

Mailing Address P.O. BOX 1692

City
LYNN HAVENState
FLZip Code
32444Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
WILLIAM STEVE SOUTHERLAND, IICategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 02

Transaction ID: SB23.111

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	9		2	0	1	1

Amount of Each Disbursement this Period

2000.00

B. Full Name (Last, First, Middle Initial)
STEVE CHABOT FOR CONGRESS

Mailing Address 3030 HARRISON AVE.

City
CINCINNATIState
OHZip Code
45211Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
STEVE CHABOTCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 01

Transaction ID: SB23.136

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	9		2	0	1	1

Amount of Each Disbursement this Period

2000.00

C. Full Name (Last, First, Middle Initial)
STEVE FINCHER FOR CONGRESS

Mailing Address P.O. BOX 11153

City
JACKSONState
TNZip Code
38308Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
STEVE FINCHERCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 08

Transaction ID: SB23.95

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	3		2	0	1	1

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

6000.00

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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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) STIVERS FOR CONGRESS	Transaction ID: SB23.138 Date of Disbursement
Mailing Address 4679 WINTERSET DRIVE	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 9 / 2 0 1 1</div> </div>
City COLUMBUS State OH Zip Code 43220	Amount of Each Disbursement this Period
Purpose of Disbursement CANDIDATE CONTRIBUTION	<div>2000.00</div>
Candidate Name STEVE STIVERS	<div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 15	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) TEAM DEMINT	Transaction ID: SB23.153 Date of Disbursement
Mailing Address 228 S. WASHINGTON ST., SUITE 115	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 6 / 2 0 1 1</div> </div>
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period
Purpose of Disbursement CANDIDATE CONTRIBUTION	<div>2500.00</div>
Candidate Name JAMES W. DEMINT	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 00	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) TEAM GRAHAM, INC.	Transaction ID: SB23.152 Date of Disbursement
Mailing Address PO BOX 1801	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 6 / 2 0 1 1</div> </div>
City COLUMBIA State SC Zip Code 29202	Amount of Each Disbursement this Period
Purpose of Disbursement CANDIDATE CONTRIBUTION	<div>2500.00</div>
Candidate Name LINDSEY OLIN GRAHAM	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 00	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

Free and Strong America PAC, Inc.

FEC Schedule B (Form 3X) (Revised 02/2003)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
TOOMEY FOR SENATE COMMITTEE

Mailing Address 2720 JORDAN ROAD

City OREFIELD State PA Zip Code 18069

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
PATRICK JOSEPH TOOMEY

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 00

Transaction ID: SB23.31

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

B. Full Name (Last, First, Middle Initial)
TREY GOWDY FOR CONGRESS

Mailing Address P.O. BOX 3324

City SPARTANBURG State SC Zip Code 29304

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
TREY GOWDY

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: SC District: 04

Transaction ID: SB23.91

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

C. Full Name (Last, First, Middle Initial)
UPTON FOR ALL OF US

Mailing Address PO BOX 490

City ST. JOSEPH State MI Zip Code 49085

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name
FREDERICK STEPHEN UPTON

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 06

Transaction ID: SB23.155

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

6500.00

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 PageFOR LINE NUMBER:
(check only one)

PAGE 712 / 970

<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)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
VICKY HARTZLER FOR CONGRESS

Mailing Address P.O. BOX 531

City
HARRISONVILLEState
MOZip Code
64701Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
VICKY JO HARTZLERCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: MO District: 04

Transaction ID: SB23.129

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	9		2	0	1	1

Amount of Each Disbursement this Period

2000.00

B. Full Name (Last, First, Middle Initial)
VIRGINIA FOXX FOR CONGRESS

Mailing Address PO BOX 1100

City
CLEMMONSState
NCZip Code
27012Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
VIRGINIA FOXXCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 05

Transaction ID: SB23.51

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	3		2	0	1	1

Amount of Each Disbursement this Period

2000.00

C. Full Name (Last, First, Middle Initial)
VOTETIPTON.COM

Mailing Address P.O. BOX 140358

City
DENVERState
COZip Code
80214Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
SCOTT R. TIPTONCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: CO District: 03

Transaction ID: SB23.69

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	3		2	0	1	1

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

6000.00

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 PageFOR 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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

WALBERG FOR CONGRESS

Mailing Address 6769 TEACHOUT ROAD

City
TIPTONState
MIZip Code
49287Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
TIMOTHY L. WALBERGCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 07

Transaction ID: SB23.77

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	3	/	2	0	1	1

Amount of Each Disbursement this Period

2000.00

B.

Full Name (Last, First, Middle Initial)

WALLY HERGER FOR CONGRESS COMMITTEE

Mailing Address PO BOX 1007

City
WILLOWSState
CAZip Code
95988Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
WALLY HERGERCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 02

Transaction ID: SB23.35

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	3	/	2	0	1	1

Amount of Each Disbursement this Period

2000.00

C.

Full Name (Last, First, Middle Initial)

WESTMORELAND FOR CONGRESS

Mailing Address PO BOX 458

City
SHARPSBURGState
GAZip Code
30277Purpose of Disbursement
CANDIDATE CONTRIBUTIONCandidate Name
LYNN A WESTERMORELANDCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: GA District: 03

Transaction ID: SB23.42

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	3	/	2	0	1	1

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

6000.00

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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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
WHITFIELD FOR CONGRESS COMMITTEE

Mailing Address PO BOX 391

City HOPKINSVILLE State KY Zip Code 42241

Purpose of Disbursement
 CANDIDATE CONTRIBUTION

Candidate Name
 WAYNE EDWARD WHITFIELD

Category/
 Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: KY District: 01

Transaction ID: SB23.48

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

B. Full Name (Last, First, Middle Initial)
WICKER FOR SENATE

Mailing Address PO BOX 64

City JACKSON State MS Zip Code 39205

Purpose of Disbursement
 CANDIDATE CONTRIBUTION

Candidate Name
 ROGER F. WICKER

Category/
 Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: MS District: 00

Transaction ID: SB23.62

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

C. Full Name (Last, First, Middle Initial)
WOMACK FOR CONGRESS COMMITTEE

Mailing Address PO BOX 508

City ROGERS State AR Zip Code 72757

Purpose of Disbursement
 CANDIDATE CONTRIBUTION

Candidate Name
 STEVE WOMACK

Category/
 Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: AR District: 03

Transaction ID: SB23.108

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

9000.00

TOTAL This Period (last page this line number only)

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

Free and Strong America PAC, Inc.

FEC Schedule B (Form 3X) (Revised 02/2003)

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 716 / 970

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

NATIONAL REPUBLICAN CONGRESSIONAL COMM.

Mailing Address 320 FIRST STREET, SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
COMMITTEE CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District: 00

Transaction ID: SB23.08

Date of Disbursement

/ /

Amount of Each Disbursement this Period

15000.00

B.

Full Name (Last, First, Middle Initial)

NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE - FEDERAL ACCO-
UNT

Mailing Address 10 WATER ST.

City
CONCORD

State
NH

Zip Code
03301

Purpose of Disbursement
COMMITTEE CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District: 00

Transaction ID: SB23.01

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

REPUBLICAN NATIONAL COMMITTEE

Mailing Address 310 FIRST STREET, SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
COMMITTEE CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District: 00

Transaction ID: SB23.02

Date of Disbursement

/ /

Amount of Each Disbursement this Period

15000.00

SUBTOTAL of Disbursements This Page (optional)

35000.00

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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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

REPUBLICAN PARTY OF WISCONSIN - FEDERAL ACCOUNT

Mailing Address 148 E. JOHNSON STREET

City
MADISON

State
WI

Zip Code
53703

Purpose of Disbursement
COMMITTEE CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District: 00

Transaction ID: SB23.03

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

REPUBLICAN PARTY OF LOUISIANA - FEDERAL ACCOUNT

Mailing Address 530 LAKELAND DRIVE, SUITE 215

City
BATON ROUGE

State
LA

Zip Code
70802

Purpose of Disbursement
COMMITTEE CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District: 00

Transaction ID: SB23.04

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

TENNESSEE REPUBLICAN PARTY - FEDERAL ACCOUNT

Mailing Address 2424 21ST AVENUE, SUITE 200

City
NASHVILLE

State
TN

Zip Code
37212

Purpose of Disbursement
COMMITTEE CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District: 00

Transaction ID: SB23.06

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

12500.00

TOTAL This Period (last page this line number only)

412000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☒ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. LEO R BEUS

Mailing Address 4800 N. SCOTTSDALE ROAD, STE. 6000

City State Zip Code
SCOTTSDALE AZ 85251

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A.008

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1131.92

B.

Full Name (Last, First, Middle Initial)

MS. SARAH BOREN

Mailing Address 3191 S. DAVIS BLVD.

City State Zip Code
BOUNTIFUL UT 84010

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A.017

Date of Disbursement

/ /

Amount of Each Disbursement this Period

169.56

C.

Full Name (Last, First, Middle Initial)

MR. RICHARD DRESDALE

Mailing Address 29 PRESCOTT AVENUE

City State Zip Code
BRONXVILLE NY 10708

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A.014

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

6301.48

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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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☒ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. STEVEN DUNCKER

Mailing Address 100-00 ROCKAWAY BLVD.

City State Zip Code
 NEW YORK NY 11417

Purpose of Disbursement
 CONTRIBUTION REFUND

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A.006

Date of Disbursement

M M / D D / Y Y Y Y
 03 04 2011

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

MR. JOHN J FAUTH

Mailing Address 1599 GALLEON DR.

City State Zip Code
 NAPLES FL 34102

Purpose of Disbursement
 CONTRIBUTION REFUND

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A.020

Date of Disbursement

M M / D D / Y Y Y Y
 05 25 2011

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

MR. TYRONE FEHNER

Mailing Address 2437 SIDERIDAN RD.

City State Zip Code
 EVANSTON IL 60201

Purpose of Disbursement
 CONTRIBUTION REFUND

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A.001

Date of Disbursement

M M / D D / Y Y Y Y
 01 19 2011

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

15000.00

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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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☒ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

AMB. ERIC M JAVITZ

Mailing Address 150 BRADLEY PLACE, #107

City PALM BEACH State FL Zip Code 33480

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A.011

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)

MR. JACOB KASTAN

Mailing Address 167 COLLEGE AVENUE

City SOMERVILLE State MA Zip Code 02144

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A.019

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

MS. SARAH LENTI

Mailing Address 217 14TH ST., NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A.015

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

1593.83

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 721 / 970

<input 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 checked="" 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)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. KEVIN P MOORE

Mailing Address 8976 CROOKED STICK COURT

City
NAPLES

State
FL

Zip Code
34113

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A.018

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2093.14

B.

Full Name (Last, First, Middle Initial)

MR. ERIK NILSSON

Mailing Address 6 DEPOT STREET

City
WESTFORD

State
MA

Zip Code
01886

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A.013

Date of Disbursement

/ /

Amount of Each Disbursement this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MS. MEREDITH O'ROURKE

Mailing Address 2118 E. RANDOLPH CIRCLE

City
TALLAHASSEE

State
FL

Zip Code
32308

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A.010

Date of Disbursement

/ /

Amount of Each Disbursement this Period

908.35

SUBTOTAL of Disbursements This Page (optional)

3021.49

TOTAL This Period (last page this line number only)

	21b		22		23		24		25		26
	27	X	28a		28b		28c		29		30b

Free and Strong America PAC, Inc.

FEC Schedule B (Form 3X) (Revised 02/2003)

	21b		22		23		24		25		26
	27	X	28a		28b		28c		29		30b

Free and Strong America PAC, Inc.

FEC Schedule B (Form 3X) (Revised 02/2003)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☒ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MS. ANNE WEBEN

Mailing Address 123 N. 4080 E.

City
RIGBY

State
ID

Zip Code
83442

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB28A.002

Date of Disbursement

/ /

Amount of Each Disbursement this Period

75.00

B.

Full Name (Last, First, Middle Initial)

MS. JEANETTE F WOODS

Mailing Address 3208 CHEVY CHASE DRIVE

City
HOUSTON

State
TX

Zip Code
77019

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB28A.004

Date of Disbursement

/ /

Amount of Each Disbursement this Period

250.00

C.

Full Name (Last, First, Middle Initial)

MS. JULIE WRIGLEY

Mailing Address PO BOX 135

City
KETCHUM

State
ID

Zip Code
83340

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB28A.007

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

5325.00

TOTAL This Period (last page this line number only)

38261.37

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
FRIENDS OF BARBARA COMSTOCK

Mailing Address PO BOX 6171

City State Zip Code
MCLEAN VA 22106

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.05

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
FUND FOR NEVADA'S FUTURE PAC

Mailing Address PO BOX 370672

City State Zip Code
LAS VEGAS NV 89137

Purpose of Disbursement
COMMITTEE CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.01

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
KC CROSBIE FOR STATE TREASURER

Mailing Address 3604 BURNING TREE LANE

City State Zip Code
LEXINGTON KY 40509

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.04

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

4500.00

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 726 / 970

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

TODD P'POOL FOR ATTORNEY GENERAL

Mailing Address PO BOX 24826

City
LEXINGTON

State
KY

Zip Code
40524

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.03

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

WILLIAMS-FARMER 2011

Mailing Address PO BOX 4167

City
FRANKFORT

State
KY

Zip Code
40604

Purpose of Disbursement
CANDIDATE CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.02

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

AMERICANS FOR PROSPERITY FOUNDATION - NH

Mailing Address PO BOX 464

City
WINDHAM

State
NH

Zip Code
03087

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.09

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional)

3500.00

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 727 / 970

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

WISCONSIN CLUB FOR GROWTH, INC.

Mailing Address 1223 W. MAIN STREET, #304

City
SUN PRAIRIE

State
WI

Zip Code
53590

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.08

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

NEW JERSEY REPUBLICAN STATE COMMITTEE-NON-FEDERAL

Mailing Address 150 WEST STATE STREET, SUITE 230

City
TRENTON

State
NJ

Zip Code
08608

Purpose of Disbursement
COMMITTEE CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.06

Date of Disbursement

/ /

Amount of Each Disbursement this Period

25000.00

C.

Full Name (Last, First, Middle Initial)

REPUBLICAN PARTY OF LOUISIANA-NON-FEDERAL

Mailing Address 530 LAKELAND DRIVE, SUITE 215

City
BATON ROUGE

State
LA

Zip Code
70802

Purpose of Disbursement
COMMITTEE CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.07

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

32500.00

TOTAL This Period (last page this line number only)

40500.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 728 / 970

FOR LINE NUMBER:
(check only one)☒ 9
☐ 10

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
GEORGIANS FOR ISAKSONNature of Debt (Purpose):
OWES REIMB TO PAC; PRO-RA-
TED HOTEL EXP.

Mailing Address P.O. BOX 250116

City State ZIP Code
ATLANTA GA 30325

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD9.002

Amount Incurred This Period

228.85

Payment This Period

228.85

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
NIKKI HALEY FOR GOVERNORNature of Debt (Purpose):
OWES REIMB TO PAC; PRO-RA-
TED HOTEL EXP.

Mailing Address 340 GOVERNORS GRANT BLVD.

City State ZIP Code
LEXINGTON SC 29072

Outstanding Balance Beginning This Period

98.33

Transaction ID: SD9.001

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

98.33

1) **SUBTOTALS** This Period This Page (optional).....

98.33

2) **TOTALS** This Period (last page this line number only).....

98.33

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

98.33

A.

Form/Schedule : **SD9**

Transaction ID : **SD9.002**

FAIR MARKET VALUE

B.

Form/Schedule : **SD9**

Transaction ID : **SD9.001**

FAIR MARKET VALUE

METHOD OF ALLOCATION FOR:

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Seperate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

USE ONLY ONE SECTION, A or B**A. State and Local Party Committees****Fixed Percentage (select one)**

- _____ Presidential-Only Election Year (28% Federal)
- _____ Presidential and Senate Election Year (36% Federal)
- _____ Senate-Only Election Year (21% Federal)
- _____ Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees**Flat Minimum Federal Percentage**If the committee will allocate using the flat minimum percentage of 50% federal funds, check ☒**or**

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... %Nonfederal..... %

This ratio applies to (check all that apply):

Administrative ☒ Generic Voter Drive ☐ Public Communications Referencing Party Only ☐

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 731 / 970
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT
 FREE AND STRONG AM-
 ERICA PAC - ALABAMA

DATE OF RECEIPT

M M / D D / Y Y Y Y
 0 1 / 1 4 / 2 0 1 1

TOTAL AMOUNT TRANSFERRED

6210.11

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

6210.11

Transaction ID: H3.006

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT
 FREE AND STRONG AM-
 ERICA PAC - ALABAMA

DATE OF RECEIPT

M M / D D / Y Y Y Y
 0 1 / 1 4 / 2 0 1 1

TOTAL AMOUNT TRANSFERRED

9440.69

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

9440.69

Transaction ID: H3.001

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 733 / 970

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT
 FREE AND STRONG AM-
 ERICA PAC - IOWA

DATE OF RECEIPT

M M / D D / Y Y Y Y
 0 1 / 1 4 / 2 0 1 1

TOTAL AMOUNT TRANSFERRED

9154.62

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

9154.62

Transaction ID: H3.002

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT
 FREE AND STRONG AM-
 ERICA PAC - IOWA

DATE OF RECEIPT

M M / D D / Y Y Y Y
 0 1 / 1 4 / 2 0 1 1

TOTAL AMOUNT TRANSFERRED

6021.94

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

6021.94

Transaction ID: H3.007

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - MICHIG-
AN

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	4		2	0	1	1

TOTAL AMOUNT TRANSFERRED

3763.70

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

3763.70

Transaction ID: H3.008

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - MICHIG-
AN

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	4		2	0	1	1

TOTAL AMOUNT TRANSFERRED

5721.63

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

5721.63

Transaction ID: H3.003

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - NEW HA-
MPSHIRE

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	4		2	0	1	1

TOTAL AMOUNT TRANSFERRED

2860.80

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

2860.80

Transaction ID: H3.004

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - NEW HA-
MPSHIRE

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	4		2	0	1	1

TOTAL AMOUNT TRANSFERRED

1881.85

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

1881.85

Transaction ID: H3.009

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - SOUTH
CAROLINA

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	4		2	0	1	1

TOTAL AMOUNT TRANSFERRED

940.94

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

940.94

Transaction ID: H3.010

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - SOUTH
CAROLINA

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	4		2	0	1	1

TOTAL AMOUNT TRANSFERRED

1430.40

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

1430.40

Transaction ID: H3.005

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT
 FREE AND STRONG AM-
 ERICA PAC - ALABAMA

DATE OF RECEIPT

M M / D D / Y Y Y Y
 0 1 / 1 8 / 2 0 1 1

TOTAL AMOUNT TRANSFERRED

1348.79

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

1348.79

Transaction ID: H3.011

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT
 FREE AND STRONG AM-
 ERICA PAC - IOWA

DATE OF RECEIPT

M M / D D / Y Y Y Y
 0 1 / 1 8 / 2 0 1 1

TOTAL AMOUNT TRANSFERRED

1307.92

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

1307.92

Transaction ID: H3.012

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - MICHIG-
AN

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	8		2	0	1	1

TOTAL AMOUNT TRANSFERRED

817.45

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

817.45

Transaction ID: H3.013

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - NEW HA-
MPSHIRE

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	8		2	0	1	1

TOTAL AMOUNT TRANSFERRED

408.73

BREAKDOWN OF TRANSFER RECEIVED

i) **Total Administrative**

408.73

Transaction ID: H3.014

ii) **Generic Voter Drive**

Transaction ID:

iii) **Exempt Activities**

Transaction ID:

iv) **Direct Fundraising** (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) **Direct Candidate Support** (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) **Public Communications Referring Only to Party** (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT
 FREE AND STRONG AM-
 ERICA PAC - SOUTH
 CAROLINA

DATE OF RECEIPT

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 0 1 / 1 8 / 2 0 1 1

TOTAL AMOUNT TRANSFERRED

204.35

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

204.35

Transaction ID: H3.015

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - ALABAMA

DATE OF RECEIPT

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0 1D D
3 1Y Y Y Y
2 0 1 1

TOTAL AMOUNT TRANSFERRED

7589.77

BREAKDOWN OF TRANSFER RECEIVED

i) **Total Administrative**

7589.77

Transaction ID: H3.016

ii) **Generic Voter Drive**

Transaction ID:

iii) **Exempt Activities**

Transaction ID:

iv) **Direct Fundraising** (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) **Direct Candidate Support** (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) **Public Communications Referring Only to Party** (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 747 / 970

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - ALABAMA

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	1	1

TOTAL AMOUNT TRANSFERRED

10828.08

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

10828.08

Transaction ID: H3.021

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT
 FREE AND STRONG AM-
 ERICA PAC - IOWA

DATE OF RECEIPT

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TOTAL AMOUNT TRANSFERRED

10499.96

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

10499.96

Transaction ID: H3.022

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT
 FREE AND STRONG AM-
 ERICA PAC - IOWA

DATE OF RECEIPT

M M / D D / Y Y Y Y
 0 1 / 3 1 / 2 0 1 1

TOTAL AMOUNT TRANSFERRED

7359.79

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

7359.79

Transaction ID: H3.017

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - MICHIG-
AN

DATE OF RECEIPT

M M
0 1D D
3 1Y Y Y Y
2 0 1 1

TOTAL AMOUNT TRANSFERRED

4599.87

BREAKDOWN OF TRANSFER RECEIVED

i) **Total Administrative**

4599.87

Transaction ID: H3.018

ii) **Generic Voter Drive**

Transaction ID:

iii) **Exempt Activities**

Transaction ID:

iv) **Direct Fundraising** (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) **Direct Candidate Support** (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) **Public Communications Referring Only to Party** (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - MICHIG-
AN

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	1	1

TOTAL AMOUNT TRANSFERRED

6562.47

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

6562.47

Transaction ID: H3.023

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - NEW HA-
MPSHIRE

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	1	1

TOTAL AMOUNT TRANSFERRED

3281.25

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

3281.25

Transaction ID: H3.024

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 753 / 970

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - NEW HA-
MPSHIRE

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	1	1

TOTAL AMOUNT TRANSFERRED

2299.92

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

2299.92

Transaction ID: H3.019

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - SOUTH
CAROLINA

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	1	1

TOTAL AMOUNT TRANSFERRED

1149.97

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

1149.97

Transaction ID: H3.020

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 755 / 970
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT
 FREE AND STRONG AM-
 ERICA PAC - SOUTH
 CAROLINA

DATE OF RECEIPT

M M / D D / Y Y Y Y
 0 1 / 3 1 / 2 0 1 1

TOTAL AMOUNT TRANSFERRED

1640.60

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

1640.60

Transaction ID: H3.025

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - ALABAMA

DATE OF RECEIPT

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0	2		0	7		2	0	1	1

TOTAL AMOUNT TRANSFERRED

2103.49

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

2103.49

Transaction ID: H3.026

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT
 FREE AND STRONG AM-
 ERICA PAC - IOWA

DATE OF RECEIPT

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 0 2 / 0 7 / 2 0 1 1

TOTAL AMOUNT TRANSFERRED

2039.77

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

2039.77

Transaction ID: H3.027

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AMERICA PAC - MICHIGAN

DATE OF RECEIPT

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0 2 / 0 7 / 2 0 1 1

TOTAL AMOUNT TRANSFERRED

1274.82

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

1274.82

Transaction ID: H3.028

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - NEW HA-
MPSHIRE

DATE OF RECEIPT

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2 0 1 1

TOTAL AMOUNT TRANSFERRED

637.45

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

637.45

Transaction ID: H3.029

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 760 / 970

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - SOUTH
CAROLINA

DATE OF RECEIPT

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TOTAL AMOUNT TRANSFERRED

318.76

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

318.76

Transaction ID: H3.030

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 761 / 970
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT
 FREE AND STRONG AM-
 ERICA PAC - ALABAMA

DATE OF RECEIPT

M M / D D / Y Y Y Y
 0 2 / 1 4 / 2 0 1 1

TOTAL AMOUNT TRANSFERRED

7280.16

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

7280.16

Transaction ID: H3.031

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 762 / 970
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT
 FREE AND STRONG AM-
 ERICA PAC - IOWA

DATE OF RECEIPT

M M / D D / Y Y Y Y
 0 2 / 1 4 / 2 0 1 1

TOTAL AMOUNT TRANSFERRED

7059.56

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

7059.56

Transaction ID: H3.032

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AMERICA PAC - MICHIGAN

DATE OF RECEIPT

M M / D D / Y Y Y Y
0 2 / 1 4 / 2 0 1 1

TOTAL AMOUNT TRANSFERRED

4412.24

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

4412.24

Transaction ID: H3.033

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - NEW HA-
MPSHIRE

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	4		2	0	1	1

TOTAL AMOUNT TRANSFERRED

2206.10

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

2206.10

Transaction ID: H3.034

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - SOUTH
CAROLINA

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	4		2	0	1	1

TOTAL AMOUNT TRANSFERRED

1103.06

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

1103.06

Transaction ID: H3.035

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT
 FREE AND STRONG AM-
 ERICA PAC - ALABAMA

DATE OF RECEIPT

M M / D D / Y Y Y Y
 0 2 / 1 6 / 2 0 1 1

TOTAL AMOUNT TRANSFERRED

2453.66

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

2453.66

Transaction ID: H3.036

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT
 FREE AND STRONG AM-
 ERICA PAC - IOWA

DATE OF RECEIPT

M M / D D / Y Y Y Y
 0 2 / 1 6 / 2 0 1 1

TOTAL AMOUNT TRANSFERRED

2379.29

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

2379.29

Transaction ID: H3.037

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - MICHIG-
AN

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	6		2	0	1	1

TOTAL AMOUNT TRANSFERRED

1487.08

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

1487.08

Transaction ID: H3.038

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - NEW HA-
MPSHIRE

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	6		2	0	1	1

TOTAL AMOUNT TRANSFERRED

743.54

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

743.54

Transaction ID: H3.039

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - SOUTH
CAROLINA

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	6		2	0	1	1

TOTAL AMOUNT TRANSFERRED

371.73

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

371.73

Transaction ID: H3.040

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - ALABAMA

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	1	1

TOTAL AMOUNT TRANSFERRED

7021.11

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

7021.11

Transaction ID: H3.041

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - ALABAMA

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	1	1

TOTAL AMOUNT TRANSFERRED

12235.85

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

12235.85

Transaction ID: H3.046

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT
 FREE AND STRONG AM-
 ERICA PAC - IOWA

DATE OF RECEIPT

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TOTAL AMOUNT TRANSFERRED

11865.04

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

11865.04

Transaction ID: H3.047

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT
 FREE AND STRONG AM-
 ERICA PAC - IOWA

DATE OF RECEIPT

M M / D D / Y Y Y Y
 0 2 / 2 8 / 2 0 1 1

TOTAL AMOUNT TRANSFERRED

6808.36

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

6808.36

Transaction ID: H3.042

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AMERICA PAC - MICHIGAN

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	1	1

TOTAL AMOUNT TRANSFERRED

4255.24

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

4255.24

Transaction ID: H3.043

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT
 FREE AND STRONG AM-
 ERICA PAC - MICHIG-
 AN

DATE OF RECEIPT

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TOTAL AMOUNT TRANSFERRED

7415.67

BREAKDOWN OF TRANSFER RECEIVED

i) **Total Administrative**

7415.67

Transaction ID: H3.048

ii) **Generic Voter Drive**

Transaction ID:

iii) **Exempt Activities**

Transaction ID:

iv) **Direct Fundraising** (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) **Direct Candidate Support** (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) **Public Communications Referring Only to Party** (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - NEW HA-
MPSHIRE

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	1	1

TOTAL AMOUNT TRANSFERRED

3707.84

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

3707.84

Transaction ID: H3.049

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - NEW HA-
MPSHIRE

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	1	1

TOTAL AMOUNT TRANSFERRED

2127.61

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

2127.61

Transaction ID: H3.044

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT
 FREE AND STRONG AM-
 ERICA PAC - SOUTH
 CAROLINA

DATE OF RECEIPT

M M / D D / Y Y Y Y
 0 2 / 2 8 / 2 0 1 1

TOTAL AMOUNT TRANSFERRED

1063.81

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

1063.81

Transaction ID: H3.045

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - SOUTH
CAROLINA

DATE OF RECEIPT

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0	2		2	8		2	0	1	1

TOTAL AMOUNT TRANSFERRED

1853.91

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

1853.91

Transaction ID: H3.050

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT
 FREE AND STRONG AM-
 ERICA PAC - ALABAMA

DATE OF RECEIPT

M M / D D / Y Y Y Y
 0 3 / 0 2 / 2 0 1 1

TOTAL AMOUNT TRANSFERRED

148.49

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

148.49

Transaction ID: H3.051

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT
 FREE AND STRONG AM-
 ERICA PAC - IOWA

DATE OF RECEIPT

M M / D D / Y Y Y Y
 0 3 / 0 2 / 2 0 1 1

TOTAL AMOUNT TRANSFERRED

143.97

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

143.97

Transaction ID: H3.052

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT
 FREE AND STRONG AM-
 ERICA PAC - MICHIG-
 AN

DATE OF RECEIPT

M M / D D / Y Y Y Y
 0 3 / 0 2 / 2 0 1 1

TOTAL AMOUNT TRANSFERRED

89.98

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

89.98

Transaction ID: H3.053

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - NEW HA-
MPSHIRE

DATE OF RECEIPT

M M
0 3D D
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2 0 1 1

TOTAL AMOUNT TRANSFERRED

45.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

45.00

Transaction ID: H3.054

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - SOUTH
CAROLINA

DATE OF RECEIPT

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0 2Y Y Y Y
2 0 1 1

TOTAL AMOUNT TRANSFERRED

22.50

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

22.50

Transaction ID: H3.055

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - ALABAMA

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	7		2	0	1	1

TOTAL AMOUNT TRANSFERRED

3193.40

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

3193.40

Transaction ID: H3.056

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT
 FREE AND STRONG AM-
 ERICA PAC - IOWA

DATE OF RECEIPT

M M / D D / Y Y Y Y
 0 3 / 0 7 / 2 0 1 1

TOTAL AMOUNT TRANSFERRED

3096.38

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

3096.38

Transaction ID: H3.057

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - MICHIG-
AN

DATE OF RECEIPT

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TOTAL AMOUNT TRANSFERRED

1935.32

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

1935.32

Transaction ID: H3.058

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - NEW HA-
MPSHIRE

DATE OF RECEIPT

M M
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TOTAL AMOUNT TRANSFERRED

967.56

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

967.56

Transaction ID: H3.059

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - SOUTH
CAROLINA

DATE OF RECEIPT

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0	3		0	7		2	0	1	1

TOTAL AMOUNT TRANSFERRED

483.70

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

483.70

Transaction ID: H3.060

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - ALABAMA

DATE OF RECEIPT

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0 3D D
0 9Y Y Y Y
2 0 1 1

TOTAL AMOUNT TRANSFERRED

18331.65

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

18331.65

Transaction ID: H3.061

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT
 FREE AND STRONG AM-
 ERICA PAC - IOWA

DATE OF RECEIPT

M M / D D / Y Y Y Y
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TOTAL AMOUNT TRANSFERRED

17776.14

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

17776.14

Transaction ID: H3.062

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AMERICA PAC - MICHIGAN

DATE OF RECEIPT

M M / D D / Y Y Y Y
0 3 / 0 9 / 2 0 1 1

TOTAL AMOUNT TRANSFERRED

11110.09

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

11110.09

Transaction ID: H3.063

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - NEW HA-
MPSHIRE

DATE OF RECEIPT

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2 0 1 1

TOTAL AMOUNT TRANSFERRED

5555.05

BREAKDOWN OF TRANSFER RECEIVED

i) **Total Administrative**

5555.05

Transaction ID: H3.064

ii) **Generic Voter Drive**

Transaction ID:

iii) **Exempt Activities**

Transaction ID:

iv) **Direct Fundraising** (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) **Direct Candidate Support** (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) **Public Communications Referring Only to Party** (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - SOUTH
CAROLINA

DATE OF RECEIPT

M M
0 3D D
0 9Y Y Y Y
2 0 1 1

TOTAL AMOUNT TRANSFERRED

2777.52

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

2777.52

Transaction ID: H3.065

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - ALABAMA

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	1	1

TOTAL AMOUNT TRANSFERRED

6717.80

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

6717.80

Transaction ID: H3.066

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT
 FREE AND STRONG AM-
 ERICA PAC - ALABAMA

DATE OF RECEIPT

M M / D D / Y Y Y Y
 0 3 / 1 4 / 2 0 1 1

TOTAL AMOUNT TRANSFERRED

3982.15

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

3982.15

Transaction ID: H3.071

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 798 / 970

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT
 FREE AND STRONG AM-
 ERICA PAC - ALABAMA

DATE OF RECEIPT

M M / D D / Y Y Y Y
 0 3 / 1 4 / 2 0 1 1

TOTAL AMOUNT TRANSFERRED

378.98

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

378.98

Transaction ID: H3.076

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 799 / 970

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT
 FREE AND STRONG AM-
 ERICA PAC - IOWA

DATE OF RECEIPT

M M / D D / Y Y Y Y
 0 3 / 1 4 / 2 0 1 1

TOTAL AMOUNT TRANSFERRED

367.49

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

367.49

Transaction ID: H3.077

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 800 / 970

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT
 FREE AND STRONG AM-
 ERICA PAC - IOWA

DATE OF RECEIPT

M M / D D / Y Y Y Y
 0 3 / 1 4 / 2 0 1 1

TOTAL AMOUNT TRANSFERRED

3861.48

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

3861.48

Transaction ID: H3.072

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 801 / 970

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT
 FREE AND STRONG AM-
 ERICA PAC - IOWA

DATE OF RECEIPT

M M / D D / Y Y Y Y
 0 3 / 1 4 / 2 0 1 1

TOTAL AMOUNT TRANSFERRED

6514.24

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

6514.24

Transaction ID: H3.067

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT
 FREE AND STRONG AM-
 ERICA PAC - MICHIG-
 AN

DATE OF RECEIPT

M M / D D / Y Y Y Y
 0 3 / 1 4 / 2 0 1 1

TOTAL AMOUNT TRANSFERRED

4071.41

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

4071.41

Transaction ID: H3.068

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 803 / 970

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AMERICA PAC - MICHIGAN

DATE OF RECEIPT

M M / D D / Y Y Y Y
0 3 / 1 4 / 2 0 1 1

TOTAL AMOUNT TRANSFERRED

2413.43

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

2413.43

Transaction ID: H3.073

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 804 / 970

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - MICHIG-
AN

DATE OF RECEIPT

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TOTAL AMOUNT TRANSFERRED

229.68

BREAKDOWN OF TRANSFER RECEIVED

i) **Total Administrative**

229.68

Transaction ID: H3.078

ii) **Generic Voter Drive**

Transaction ID:

iii) **Exempt Activities**

Transaction ID:

iv) **Direct Fundraising** (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) **Direct Candidate Support** (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) **Public Communications Referring Only to Party** (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 805 / 970
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AMERICA PAC - NEW HAMPSHIRE

DATE OF RECEIPT

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TOTAL AMOUNT TRANSFERRED

114.84

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

114.84

Transaction ID: H3.079

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 806 / 970

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - NEW HA-
MPSHIRE

DATE OF RECEIPT

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1 4Y Y Y Y
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TOTAL AMOUNT TRANSFERRED

1206.71

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

1206.71

Transaction ID: H3.074

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 807 / 970

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - NEW HA-
MPSHIRE

DATE OF RECEIPT

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0	3		1	4		2	0	1	1

TOTAL AMOUNT TRANSFERRED

2035.69

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

2035.69

Transaction ID: H3.069

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 808 / 970
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT
 FREE AND STRONG AM-
 ERICA PAC - SOUTH
 CAROLINA

DATE OF RECEIPT

M M / D D / Y Y Y Y
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TOTAL AMOUNT TRANSFERRED

1017.85

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

1017.85

Transaction ID: H3.070

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 809 / 970

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - SOUTH
CAROLINA

DATE OF RECEIPT

M M
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2 0 1 1

TOTAL AMOUNT TRANSFERRED

603.36

BREAKDOWN OF TRANSFER RECEIVED

i) **Total Administrative**

603.36

Transaction ID: H3.075

ii) **Generic Voter Drive**

Transaction ID:

iii) **Exempt Activities**

Transaction ID:

iv) **Direct Fundraising** (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) **Direct Candidate Support** (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) **Public Communications Referring Only to Party** (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 810 / 970
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - SOUTH
CAROLINA

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	1	1

TOTAL AMOUNT TRANSFERRED

57.42

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

57.42

Transaction ID: H3.080

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 811 / 970

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - ALABAMA

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	6		2	0	1	1

TOTAL AMOUNT TRANSFERRED

6267.31

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

6267.31

Transaction ID: H3.081

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 812 / 970

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT
 FREE AND STRONG AM-
 ERICA PAC - ALABAMA

DATE OF RECEIPT

M M / D D / Y Y Y Y
 0 3 / 1 6 / 2 0 1 1

TOTAL AMOUNT TRANSFERRED

174.23

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

174.23

Transaction ID: H3.086

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 813 / 970

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT
 FREE AND STRONG AM-
 ERICA PAC - IOWA

DATE OF RECEIPT

M M / D D / Y Y Y Y
 0 3 / 1 6 / 2 0 1 1

TOTAL AMOUNT TRANSFERRED

168.95

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

168.95

Transaction ID: H3.087

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 814 / 970

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT
 FREE AND STRONG AM-
 ERICA PAC - IOWA

DATE OF RECEIPT

M M / D D / Y Y Y Y
 0 3 / 1 6 / 2 0 1 1

TOTAL AMOUNT TRANSFERRED

6077.41

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

6077.41

Transaction ID: H3.082

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 815 / 970

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - MICHIG-
AN

DATE OF RECEIPT

M M
0 3D D
1 6Y Y Y Y
2 0 1 1

TOTAL AMOUNT TRANSFERRED

3798.38

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

3798.38

Transaction ID: H3.083

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 816 / 970
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AMERICA PAC - MICHIGAN

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	6		2	0	1	1

TOTAL AMOUNT TRANSFERRED

105.59

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

105.59

Transaction ID: H3.088

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 817 / 970

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - NEW HA-
MPSHIRE

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	6		2	0	1	1

TOTAL AMOUNT TRANSFERRED

52.80

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

52.80

Transaction ID: H3.089

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - NEW HA-
MPSHIRE

DATE OF RECEIPT

M M
0 3D D
1 6Y Y Y Y
2 0 1 1

TOTAL AMOUNT TRANSFERRED

1899.21

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

1899.21

Transaction ID: H3.084

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - SOUTH
CAROLINA

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	6		2	0	1	1

TOTAL AMOUNT TRANSFERRED

949.59

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

949.59

Transaction ID: H3.085

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 820 / 970

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - SOUTH
CAROLINA

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	6		2	0	1	1

TOTAL AMOUNT TRANSFERRED

26.38

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

26.38

Transaction ID: H3.090

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 821 / 970
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT
 FREE AND STRONG AM-
 ERICA PAC - ALABAMA

DATE OF RECEIPT

M M / D D / Y Y Y Y
 0 3 / 2 8 / 2 0 1 1

TOTAL AMOUNT TRANSFERRED

7678.22

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

7678.22

Transaction ID: H3.091

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 822 / 970

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT
 FREE AND STRONG AM-
 ERICA PAC - IOWA

DATE OF RECEIPT

M M / D D / Y Y Y Y
 0 3 / 2 8 / 2 0 1 1

TOTAL AMOUNT TRANSFERRED

7445.53

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

7445.53

Transaction ID: H3.092

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 823 / 970
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT
 FREE AND STRONG AM-
 ERICA PAC - MICHIG-
 AN

DATE OF RECEIPT

M M / D D / Y Y Y Y
 0 3 / 2 8 / 2 0 1 1

TOTAL AMOUNT TRANSFERRED

4653.47

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

4653.47

Transaction ID: H3.093

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - NEW HA-
MPSHIRE

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	1	1

TOTAL AMOUNT TRANSFERRED

2326.75

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

2326.75

Transaction ID: H3.094

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - SOUTH
CAROLINA

DATE OF RECEIPT

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2 8Y Y Y Y
2 0 1 1

TOTAL AMOUNT TRANSFERRED

1163.31

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

1163.31

Transaction ID: H3.095

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - ALABAMA

DATE OF RECEIPT

M M
0 3D D
3 1Y Y Y Y
2 0 1 1

TOTAL AMOUNT TRANSFERRED

7042.38

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

7042.38

Transaction ID: H3.096

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 827 / 970

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT
 FREE AND STRONG AM-
 ERICA PAC - IOWA

DATE OF RECEIPT

M M / D D / Y Y Y Y
 0 3 / 3 1 / 2 0 1 1

TOTAL AMOUNT TRANSFERRED

6828.98

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

6828.98

Transaction ID: H3.097

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 828 / 970

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - MICHIG-
AN

DATE OF RECEIPT

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3 1Y Y Y Y
2 0 1 1

TOTAL AMOUNT TRANSFERRED

4268.58

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

4268.58

Transaction ID: H3.098

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 829 / 970
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - NEW HA-
MPSHIRE

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	1

TOTAL AMOUNT TRANSFERRED

2134.05

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

2134.05

Transaction ID: H3.099

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 830 / 970

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

NAME OF ACCOUNT

FREE AND STRONG AM-
ERICA PAC - SOUTH
CAROLINA

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	1	1

TOTAL AMOUNT TRANSFERRED

1060.24

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

1060.24

Transaction ID: H3.100

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

364921.39

TOTAL This Period (Generic Voter Drive)

0.00

TOTAL This Period (Exempt Activities)

0.00

TOTAL This Period (Direct Fundraising)

0.00

TOTAL This Period (Direct Candidate Support)

0.00

TOTAL This Period (Public Communications Referring Only to Party)

0.00

TOTAL This Period (Total Amount Transferred)

364921.39

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 831 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
MATTHEW RHOADES

Mailing Address

90-92 REVERE STREET

 City State Zip Code
BOSTON MA 02114

000

 Purpose of Disbursement:
TRAVEL EXPENSE REIMBURSEMENT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

15.00

Date 01 / 14 / 2011

Transaction ID: H4.001

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.50		7.50		15.00

B. Full Name (Last, First, Middle Initial)
MATTHEW RHOADES

Mailing Address

90-92 REVERE STREET

 City State Zip Code
BOSTON MA 02114

000

 Purpose of Disbursement:
TRAVEL EXPENSE REIMBURSEMENT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

137.29

Date 01 / 14 / 2011

Transaction ID: H4.002

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
61.15		61.14		122.29

C. Full Name (Last, First, Middle Initial)
ANDREA SAUL

Mailing Address

28 EXETER ST., APT. 707

 City State Zip Code
BOSTON MA 02116

000

 Purpose of Disbursement:
TRAVEL EXPENSE REIMBURSEMENT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

639.63

Date 01 / 14 / 2011

Transaction ID: H4.003

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
251.17		251.17		502.34

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
319.82		319.81		639.63

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 832 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
MINDSHIFT TECHNOLOGIES

Mailing Address

3975 FAIR RIDGE DRIVE SUITE 200-S

 City State Zip Code
FAIRFAX VA 22033

000

 Purpose of Disbursement:
NETWORK SUPPORT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

654.62

 Date M M / D D / Y Y Y Y
 0 1 / 1 4 / 2 0 1 1

Transaction ID: H4.004

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

7.50

7.49

14.99

B. Full Name (Last, First, Middle Initial)
VERIZON WIRELESS

Mailing Address

P.O. BOX 15062

 City State Zip Code
ALBANY NY 12212

000

 Purpose of Disbursement:
PHONE SERVICE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2737.98

 Date M M / D D / Y Y Y Y
 0 1 / 1 4 / 2 0 1 1

Transaction ID: H4.005

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1041.68

1041.68

2083.36

C. Full Name (Last, First, Middle Initial)
BRUCE NILSON

Mailing Address

40 KINGS WAY, #401A

 City State Zip Code
WALTHAM MA 02451

000

 Purpose of Disbursement:
TRAVEL EXPENSE REIMBURSEMENT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2745.23

 Date M M / D D / Y Y Y Y
 0 1 / 1 4 / 2 0 1 1

Transaction ID: H4.006

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3.63

3.62

7.25

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1052.81

1052.79

2105.60

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 833 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
BRUCE NILSON

Mailing Address

40 KINGS WAY, #401A

 City State Zip Code
WALTHAM MA 02451

000

 Purpose of Disbursement:
TRAVEL EXPENSE REIMBURSEMENT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2765.48

Date 01 / 14 / 2011

Transaction ID: H4.007

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

10.13

10.12

20.25

B. Full Name (Last, First, Middle Initial)
MAR LEXHAY LLC

Mailing Address

80 HAYDEN AVE., SUITE 100

 City State Zip Code
LEXINGTON MA 02421

000

 Purpose of Disbursement:
RENT/ UTILITIES
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

9755.08

Date 01 / 14 / 2011

Transaction ID: H4.008

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

3494.80

3494.80

6989.60

C. Full Name (Last, First, Middle Initial)
MATTHEW RHOADES

Mailing Address

90-92 REVERE STREET

 City State Zip Code
BOSTON MA 02114

000

 Purpose of Disbursement:
TRAVEL EXPENSE REIMBURSEMENT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

9783.08

Date 01 / 14 / 2011

Transaction ID: H4.009

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

14.00

14.00

28.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

3518.93

3518.92

7037.85

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 834 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
STAPLES BUSINESS ADVANTAGE

Mailing Address

DEPT. BOS PO BOX 415256

 City State Zip Code
BOSTON MA 02241

000

 Purpose of Disbursement:
OFFICE SUPPLIES
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

9842.90

 Date M M / D D / Y Y Y Y
 0 1 / 1 4 / 2 0 1 1

Transaction ID: H4.010

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

29.91

29.91

59.82

B. Full Name (Last, First, Middle Initial)
FLS CONNECT, LLC

Mailing Address

7300 HUDSON BLVD. SUITE 270

 City State Zip Code
SAINT PAUL MN 55128

000

 Purpose of Disbursement:
CONFERENCE CALL SERVICE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

10409.14

 Date M M / D D / Y Y Y Y
 0 1 / 1 4 / 2 0 1 1

Transaction ID: H4.011

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

283.12

283.12

566.24

C. Full Name (Last, First, Middle Initial)
SHRED-IT BOSTON

Mailing Address

2 C GILL STREET

 City State Zip Code
WOBBURN MA 01801

000

 Purpose of Disbursement:
SHREDDING SERVICES
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

10461.14

 Date M M / D D / Y Y Y Y
 0 1 / 1 4 / 2 0 1 1

Transaction ID: H4.012

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

26.00

26.00

52.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

339.03

339.03

678.06

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 835 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
FLS CONNECT, LLC

Mailing Address

7300 HUDSON BLVD. SUITE 270

City State Zip Code
SAINT PAUL MN 55128

000

Purpose of Disbursement:
STRATEGY CONSULTING

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

25461.14

Date M M / D D / Y Y Y Y
0 1 / 1 4 / 2 0 1 1

Transaction ID: H4.013

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

7500.00

7500.00

15000.00

B. Full Name (Last, First, Middle Initial)
SJZ LLC

Mailing Address

80 HAYDEN AVE.

City State Zip Code
LEXINGTON MA 02421

000

Purpose of Disbursement:
OFFICE EXPENSE REIMBURSEMENT

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

25652.08

Date M M / D D / Y Y Y Y
0 1 / 1 4 / 2 0 1 1

Transaction ID: H4.014

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

95.47

95.47

190.94

C. Full Name (Last, First, Middle Initial)
FEDEX

Mailing Address

PO BOX 371461

City State Zip Code
PITTSBURGH PA 15250

000

Purpose of Disbursement:
DELIVERY

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

25747.56

Date M M / D D / Y Y Y Y
0 1 / 1 4 / 2 0 1 1

Transaction ID: H4.015

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

47.74

47.74

95.48

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

7643.21

7643.21

15286.42

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE	836 / 970
FOR LINE 21a OF FORM 3X	

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
 THE STEVENS & SCHRIEFER GROUP

Mailing Address

1117 EAST WEST HIGHWAY

City	State	Zip Code
SILVER SPRINGS	MD	20910

000

 Purpose of Disbursement:
 TRAVEL EXPENSE REIMBURSEMENT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

28724.41

Date

M	M
0	1

 /

D	D
1	4

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.016

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1488.43

1488.42

2976.85

B. Full Name (Last, First, Middle Initial)
 FEDEX

Mailing Address

PO BOX 371461

City	State	Zip Code
PITTSBURGH	PA	15250

000

 Purpose of Disbursement:
 DELIVERY
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

28798.25

Date

M	M
0	1

 /

D	D
1	4

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.017

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

36.92

36.92

73.84

C. Full Name (Last, First, Middle Initial)
 MATTHEW RHOADES

Mailing Address

90-92 REVERE STREET

City	State	Zip Code
BOSTON	MA	02114

000

 Purpose of Disbursement:
 TRAVEL EXPENSE REIMBURSEMENT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

28846.25

Date

M	M
0	1

 /

D	D
1	4

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.018

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

24.00

24.00

48.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1549.35

1549.34

3098.69

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 837 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
CAMBRIDGE OFFSET PRINTING

Mailing Address

56 CREIGHTON STREET

 City State Zip Code
CAMBRIDGE MA 02140

000

 Purpose of Disbursement:
PRINTING FOR PAC
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

29119.97

 Date M M / D D / Y Y Y Y
0 1 / 1 4 / 2 0 1 1

Transaction ID: H4.019

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

136.86

136.86

273.72

B. Full Name (Last, First, Middle Initial)
FLS CONNECT, LLC

Mailing Address

7300 HUDSON BLVD. SUITE 270

 City State Zip Code
SAINT PAUL MN 55128

000

 Purpose of Disbursement:
STRATEGY CONSULTING
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

47119.97

 Date M M / D D / Y Y Y Y
0 1 / 1 4 / 2 0 1 1

Transaction ID: H4.020

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

9000.00

9000.00

18000.00

C. Full Name (Last, First, Middle Initial)
SHRED-IT BOSTON

Mailing Address

2 C GILL STREET

 City State Zip Code
WOBBURN MA 01801

000

 Purpose of Disbursement:
SHREDDING SERVICES
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

47172.17

 Date M M / D D / Y Y Y Y
0 1 / 1 4 / 2 0 1 1

Transaction ID: H4.021

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

26.10

26.10

52.20

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

9162.96

9162.96

18325.92

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 838 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
MINDSHIFT TECHNOLOGIES

Mailing Address

3975 FAIR RIDGE DRIVE SUITE 200-S

 City State Zip Code
FAIRFAX VA 22033

000

 Purpose of Disbursement:
NETWORK SUPPORT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

47216.34

Date 01 / 14 / 2011

Transaction ID: H4.022

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

22.09

22.08

44.17

B. Full Name (Last, First, Middle Initial)
GABRIEL SCHOENFELD

Mailing Address

2830 W. 17TH ST.

 City State Zip Code
BROOKLYN NY 11224

000

 Purpose of Disbursement:
COMMUNICATIONS CONSULTING FOR PAC
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

57216.34

Date 01 / 14 / 2011

Transaction ID: H4.023

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

5000.00

5000.00

10000.00

C. Full Name (Last, First, Middle Initial)
ADMINISTAFF COMPANIES

Mailing Address

19001 CRESCENT SPRINGS DRIVE

 City State Zip Code
KINGWOOD TX 77339

000

 Purpose of Disbursement:
PAYROLL TAXES/INSURANCE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

65092.22

Date 01 / 14 / 2011

Transaction ID: H4.024

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

3937.94

3937.94

7875.88

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

8960.03

8960.02

17920.05

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 839 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
ADMINISTAFF COMPANIES

Mailing Address

19001 CRESCENT SPRINGS DRIVE

 City State Zip Code
KINGWOOD TX 77339

000

 Purpose of Disbursement:
PAYROLL SERVICES
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

74674.33

 Date M M / D D / Y Y Y Y
 0 1 / 1 4 / 2 0 1 1

Transaction ID: H4.025

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

4791.06

4791.05

9582.11

B. Full Name (Last, First, Middle Initial)
ERIC FEHRNSTROM

Mailing Address

83 RISLEY ROAD

 City State Zip Code
CHESTNUT HILL MA 02467

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

79252.77

 Date M M / D D / Y Y Y Y
 0 1 / 1 4 / 2 0 1 1

Transaction ID: H4.026

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2289.22

2289.22

4578.44

C. Full Name (Last, First, Middle Initial)
KELLI HARRISON

Mailing Address

21 CENTURY STREET APT. 1

 City State Zip Code
MEDFORD MA 02155

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

80575.63

 Date M M / D D / Y Y Y Y
 0 1 / 1 4 / 2 0 1 1

Transaction ID: H4.027

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

661.43

661.43

1322.86

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

7741.71

7741.70

15483.41

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 840 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
GARRETT JACKSON

Mailing Address

1 LEIGHTON STREET APT. 301

 City State Zip Code
CAMBRIDGE MA 02141

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

82040.75

 Date MM / DD / YYYY
01 / 14 / 2011

Transaction ID: H4.028

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

732.56

732.56

1465.12

B. Full Name (Last, First, Middle Initial)
BRUCE NILSON

Mailing Address

40 KINGS WAY, #401A APT. 1

 City State Zip Code
WALTHAM MA 02451

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

83231.38

 Date MM / DD / YYYY
01 / 14 / 2011

Transaction ID: H4.029

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

595.32

595.31

1190.63

C. Full Name (Last, First, Middle Initial)
MATTHEW RHOADES

Mailing Address

90-92 REVERE STREET

 City State Zip Code
BOSTON MA 02114

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

87356.18

 Date MM / DD / YYYY
01 / 14 / 2011

Transaction ID: H4.030

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2062.40

2062.40

4124.80

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

3390.28

3390.27

6780.55

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 841 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
WILL RITTER

Mailing Address

11 CHAMPNEY PLACE

 City State Zip Code
BOSTON MA 02114

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

88880.12

 Date M M / D D / Y Y Y Y
 0 1 / 1 4 / 2 0 1 1

Transaction ID: H4.031

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

761.97

761.97

1523.94

B. Full Name (Last, First, Middle Initial)
JACQUELINE ROONEY

Mailing Address

9 COMMONWEALTH AVE. APT. 1A

 City State Zip Code
BOSTON MA 02116

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

89917.76

 Date M M / D D / Y Y Y Y
 0 1 / 1 4 / 2 0 1 1

Transaction ID: H4.032

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

518.82

518.82

1037.64

C. Full Name (Last, First, Middle Initial)
HEPZIBAH SHADRACH

Mailing Address

45 CLEVELAND STREET

 City State Zip Code
ARLINGTON MA 02474

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

91345.61

 Date M M / D D / Y Y Y Y
 0 1 / 1 4 / 2 0 1 1

Transaction ID: H4.033

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

713.93

713.92

1427.85

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1994.72

1994.71

3989.43

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 842 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
LOUIS TAVARES

Mailing Address

42 HAZEN STREET

 City State Zip Code
CHELMSFORD MA 01824

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

94853.45

 Date M M / D D / Y Y Y Y
0 1 / 1 4 / 2 0 1 1

Transaction ID: H4.034

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1753.92

1753.92

3507.84

B. Full Name (Last, First, Middle Initial)
ADMINISTAFF COMPANIES

Mailing Address

19001 CRESCENT SPRINGS DRIVE

 City State Zip Code
KINGWOOD TX 77339

000

 Purpose of Disbursement:
PAYROLL TAXES/INSURANCE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

96607.18

 Date M M / D D / Y Y Y Y
0 1 / 1 8 / 2 0 1 1

Transaction ID: H4.035

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

876.87

876.86

1753.73

C. Full Name (Last, First, Middle Initial)
ADMINISTAFF COMPANIES

Mailing Address

19001 CRESCENT SPRINGS DRIVE

 City State Zip Code
KINGWOOD TX 77339

000

 Purpose of Disbursement:
PAYROLL SERVICES
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

98531.69

 Date M M / D D / Y Y Y Y
0 1 / 1 8 / 2 0 1 1

Transaction ID: H4.036

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

962.26

962.25

1924.51

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

3593.05

3593.03

7186.08

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 843 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
LANHEE CHEN

Mailing Address

30 CAMBRIDGE PARK DR. #6132

 City State Zip Code
CAMBRIDGE MA 02140

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

103027.96

 Date M M / D D / Y Y Y Y
 0 1 / 1 8 / 2 0 1 1

Transaction ID: H4.037

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

2248.14

2248.13

4496.27

B. Full Name (Last, First, Middle Initial)
ADMINISTAFF COMPANIES

Mailing Address

19001 CRESCENT SPRINGS DRIVE

 City State Zip Code
KINGWOOD TX 77339

000

 Purpose of Disbursement:
PAYROLL TAXES/INSURANCE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

112594.53

 Date M M / D D / Y Y Y Y
 0 1 / 3 1 / 2 0 1 1

Transaction ID: H4.038

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

4783.29

4783.28

9566.57

C. Full Name (Last, First, Middle Initial)
ADMINISTAFF COMPANIES

Mailing Address

19001 CRESCENT SPRINGS DRIVE

 City State Zip Code
KINGWOOD TX 77339

000

 Purpose of Disbursement:
PAYROLL SERVICES
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

124288.21

 Date M M / D D / Y Y Y Y
 0 1 / 3 1 / 2 0 1 1

Transaction ID: H4.039

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

5846.84

5846.84

11693.68

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

12878.27

12878.25

25756.52

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 844 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
LANHEE CHEN

Mailing Address

30 CAMBRIDGE PARK DR. #6132

 City State Zip Code
CAMBRIDGE MA 02140

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

128784.48

 Date M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 1 1

Transaction ID: H4.040

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2248.14

2248.13

4496.27

B. Full Name (Last, First, Middle Initial)
ERIC FEHRNSTROM

Mailing Address

83 RISLEY ROAD

 City State Zip Code
CHESTNUT HILL MA 02467

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

133362.92

 Date M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 1 1

Transaction ID: H4.041

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2289.22

2289.22

4578.44

C. Full Name (Last, First, Middle Initial)
KELLI HARRISON

Mailing Address

21 CENTURY STREET APT. 1

 City State Zip Code
MEDFORD MA 02155

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

134685.78

 Date M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 1 1

Transaction ID: H4.042

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

661.43

661.43

1322.86

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

5198.79

5198.78

10397.57

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 845 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
GARRETT JACKSON

Mailing Address

1 LEIGHTON STREET APT. 301

 City State Zip Code
CAMBRIDGE MA 02141

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

136150.90

 Date M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 1 1

Transaction ID: H4.043

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

732.56

732.56

1465.12

B. Full Name (Last, First, Middle Initial)
BRUCE NILSON

Mailing Address

40 KINGS WAY, #401A APT. 1

 City State Zip Code
WALTHAM MA 02451

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

137404.57

 Date M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 1 1

Transaction ID: H4.044

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

626.84

626.83

1253.67

C. Full Name (Last, First, Middle Initial)
MATTHEW RHOADES

Mailing Address

90-92 REVERE STREET

 City State Zip Code
BOSTON MA 02114

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

141529.37

 Date M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 1 1

Transaction ID: H4.045

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2062.40

2062.40

4124.80

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

3421.80

3421.79

6843.59

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 846 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
WILL RITTER

Mailing Address

11 CHAMPNEY PLACE

 City State Zip Code
BOSTON MA 02114

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

143053.31

 Date M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 1 1

Transaction ID: H4.046

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

761.97

761.97

1523.94

B. Full Name (Last, First, Middle Initial)
JACQUELINE ROONEY

Mailing Address

9 COMMONWEALTH AVE. APT. 1A

 City State Zip Code
BOSTON MA 02116

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

144090.95

 Date M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 1 1

Transaction ID: H4.047

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

518.82

518.82

1037.64

C. Full Name (Last, First, Middle Initial)
HEPZIBAH SHADRACH

Mailing Address

45 CLEVELAND STREET

 City State Zip Code
ARLINGTON MA 02474

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

145518.80

 Date M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 1 1

Transaction ID: H4.048

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

713.93

713.92

1427.85

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1994.72

1994.71

3989.43

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 847 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
LOUIS TAVARES

Mailing Address

42 HAZEN STREET

 City State Zip Code
CHELMSFORD MA 01824

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

149026.64

 Date M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 1 1

Transaction ID: H4.049

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1753.92

1753.92

3507.84

B. Full Name (Last, First, Middle Initial)
MATTHEW RHOADES

Mailing Address

90-92 REVERE STREET

 City State Zip Code
BOSTON MA 02114

000

 Purpose of Disbursement:
TRAVEL EXPENSE REIMBURSEMENT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

149303.68

 Date M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 1 1

Transaction ID: H4.050

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

138.52

138.52

277.04

C. Full Name (Last, First, Middle Initial)
GARRETT JACKSON

Mailing Address

1 LEIGHTON STREET APT. 301

 City State Zip Code
CAMBRIDGE MA 02141

000

 Purpose of Disbursement:
TRAVEL EXPENSE REIMBURSEMENT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

149326.00

 Date M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 1 1

Transaction ID: H4.051

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

11.16

11.16

22.32

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1903.60

1903.60

3807.20

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 848 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
SHRED-IT BOSTON

Mailing Address

2 C GILL STREET

 City State Zip Code
WOBURN MA 01801

000

 Purpose of Disbursement:
SHREDDING SERVICES
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

149430.00

 Date M M / D D / Y Y Y Y
 0 1 / 3 1 / 2 0 1 1

Transaction ID: H4.052

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

52.00

52.00

104.00

B. Full Name (Last, First, Middle Initial)
MATTHEW RHOADES

Mailing Address

90-92 REVERE STREET

 City State Zip Code
BOSTON MA 02114

000

 Purpose of Disbursement:
TRAVEL EXPENSE REIMBURSEMENT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

149450.00

 Date M M / D D / Y Y Y Y
 0 1 / 3 1 / 2 0 1 1

Transaction ID: H4.053

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

10.00

10.00

20.00

C. Full Name (Last, First, Middle Initial)
KELLI HARRISON

Mailing Address

21 CENTURY STREET, APT. 1

 City State Zip Code
MEDFORD MA 02155

000

 Purpose of Disbursement:
TRAVEL EXPENSE REIMBURSEMENT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

149464.00

 Date M M / D D / Y Y Y Y
 0 1 / 3 1 / 2 0 1 1

Transaction ID: H4.054

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

7.00

7.00

14.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

69.00

69.00

138.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 849 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
N.E. COPY SPECIALISTS, INC

 Mailing Address
PO BOX 4024

 City State Zip Code
WOBURN MA 01888

000

 Purpose of Disbursement:
EQUIPMENT RENTAL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

150314.00

Date 01 / 31 / 2011

Transaction ID: H4.055

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

425.00

425.00

850.00

B. Full Name (Last, First, Middle Initial)
CAMBRIDGE OFFSET PRINTING

 Mailing Address
56 CREIGHTON STREET

 City State Zip Code
CAMBRIDGE MA 02140

000

 Purpose of Disbursement:
PRINTING FOR PAC
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

150560.19

Date 01 / 31 / 2011

Transaction ID: H4.056

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

123.10

123.09

246.19

C. Full Name (Last, First, Middle Initial)
TOWN OF LEXINGTON

 Mailing Address
COLLECTOR OF TAXES

 City State Zip Code
LEXINGTON MA 02420

000

 Purpose of Disbursement:
TAX PAYMENT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

151007.13

Date 01 / 31 / 2011

Transaction ID: H4.057

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

223.47

223.47

446.94

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

771.57

771.56

1543.13

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 850 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
MAR LEXHAY LLC

Mailing Address

C/O MARWICK LLC

 City State Zip Code
LEXINGTON MA 02421

000

 Purpose of Disbursement:
RENT/UTILITIES
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

157996.73

 Date M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 1 1

Transaction ID: H4.058

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

3494.80

3494.80

6989.60

B. Full Name (Last, First, Middle Initial)
PATTON BOGGS LLP

Mailing Address

2550 M ST. N.W.

 City State Zip Code
WASHINGTON DC 20037

000

 Purpose of Disbursement:
LEGAL FEES
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

168001.23

 Date M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 1 1

Transaction ID: H4.059

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

5002.25

5002.25

10004.50

C. Full Name (Last, First, Middle Initial)
PATTON BOGGS LLP

Mailing Address

2550 M ST. N.W.

 City State Zip Code
WASHINGTON DC 20037

000

 Purpose of Disbursement:
LEGAL FEES
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

178076.38

 Date M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 1 1

Transaction ID: H4.060

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

5037.58

5037.57

10075.15

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

13534.63

13534.62

27069.25

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 851 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
BETH MYERS

Mailing Address

201 BUCKMINSTER RD.

 City State Zip Code
BROOKLINE MA 02455

000

 Purpose of Disbursement:
STRATEGY CONSULTING
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

188076.38

Date M M / D D / Y Y Y Y

Transaction ID: H4.061

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

5000.00

5000.00

10000.00

B. Full Name (Last, First, Middle Initial)
IN THE FIELD CONSULTING

Mailing Address

1520 MYRON STREET

 City State Zip Code
NISKAYUNA NY 12309

000

 Purpose of Disbursement:
STRATEGY CONSULTING
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

193076.38

Date M M / D D / Y Y Y Y

Transaction ID: H4.062

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2500.00

2500.00

5000.00

C. Full Name (Last, First, Middle Initial)
PETER FLAHERTY

Mailing Address

8 ROCKMONT ROAD

 City State Zip Code
BELMONT MA 02478

000

 Purpose of Disbursement:
STRATEGY CONSULTING
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

198076.38

Date M M / D D / Y Y Y Y

Transaction ID: H4.063

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2500.00

2500.00

5000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

10000.00

10000.00

20000.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 852 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
RED CURVE SOLUTIONS

Mailing Address

138 CONANT STREET

 City State Zip Code
BEVERLY MA 01915

000

 Purpose of Disbursement:
TREASURY AND COMPLIANCE CONSULTING
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

213076.38

 Date M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 1 1

Transaction ID: H4.064

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7500.00		7500.00		15000.00

B. Full Name (Last, First, Middle Initial)
GABRIEL SCHOENFELD

Mailing Address

2830 W. 17TH ST.

 City State Zip Code
BROOKLYN NY 11224

000

 Purpose of Disbursement:
COMMUNICATIONS CONSULTING FOR PAC
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

214651.38

 Date M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 1 1

Transaction ID: H4.065

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
787.50		787.50		1575.00

C. Full Name (Last, First, Middle Initial)
AMERICAN EXPRESS

Mailing Address

PO BOX 2855

 City State Zip Code
NEW YORK NY 10116

000

 Purpose of Disbursement:
CREDIT CARD PAYMENT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

227400.09

 Date M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 1 1

Transaction ID: H4.066

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6374.42		6374.29		12748.71

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14661.92		14661.79		29323.71

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 853 / 970
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
 AMERICAN EXPRESS

Mailing Address
 PO BOX 2855

City State Zip Code
 NEW YORK NY 10116

000

Purpose of Disbursement:
 CREDIT CARD FEE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
 0 2 / 0 7 / 2 0 1 1

Transaction ID: H4.067

[MEMO ITEM]

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

39.17

39.17

78.34

B. Full Name (Last, First, Middle Initial)
 SOFITEL HOTEL

Mailing Address
 806 15TH ST NW

City State Zip Code
 WASHINGTON DC 20005

000

Purpose of Disbursement:
 TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
 0 2 / 0 7 / 2 0 1 1

Transaction ID: H4.068

[MEMO ITEM]

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

328.05

328.05

656.10

C. Full Name (Last, First, Middle Initial)
 HOTEL VERITAS

Mailing Address
 ONE REMINGTON ST

City State Zip Code
 CAMBRIDGE MA 02138

000

Purpose of Disbursement:
 TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
 0 2 / 0 7 / 2 0 1 1

Transaction ID: H4.069

[MEMO ITEM]

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

125.33

125.32

250.65

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 854 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
WESTIN

Mailing Address

1400 M ST NW

City State Zip Code

WASHINGTON DC 20005

000

Purpose of Disbursement:
TRAVEL EXPENSECategory/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date 02 / 07 / 2011

Transaction ID: H4.070

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.00		5.00		10.00

B. Full Name (Last, First, Middle Initial)
AMTRAK

Mailing Address

60 MASSACHUSETTS AVE NE

City State Zip Code

WASHINGTON DC 20002

000

Purpose of Disbursement:
TRAVELCategory/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date 02 / 07 / 2011

Transaction ID: H4.071

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
116.00		116.00		232.00

C. Full Name (Last, First, Middle Initial)
CONTINENTAL AIRLINES

Mailing Address

600 JEFFERSON ST

City State Zip Code

HOUSTON TX 77002

000

Purpose of Disbursement:
TRAVELCategory/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date 02 / 07 / 2011

Transaction ID: H4.072

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
147.70		147.70		295.40

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 855 / 970
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
 CROWNE PLAZA HOTEL

Mailing Address

1001 14TH ST NW

City	State	Zip Code
WASHINGTON	DC	20005

000

Purpose of Disbursement:
 TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	2

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.073

[MEMO ITEM]

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

284.88

284.88

569.76

B. Full Name (Last, First, Middle Initial)
 HERTZ

Mailing Address

14501 HERTZ QUAIL SPGS PK

City	State	Zip Code
OKLAHOMA CITY	OK	73134

000

Purpose of Disbursement:
 TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	2

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.074

[MEMO ITEM]

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

128.53

128.53

257.06

C. Full Name (Last, First, Middle Initial)
 US AIRWAYS

Mailing Address

4000 E SKY HARBOR BLVD

City	State	Zip Code
PHOENIX	AZ	85034

000

Purpose of Disbursement:
 TRAVEL

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	2

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.075

[MEMO ITEM]

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

168.85

168.85

337.70

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 856 / 970
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
 JETBLUE

Mailing Address

6322 S 3000 E STE G10

City State Zip Code
 SALT LAKE CITY UT 84121

000

Purpose of Disbursement:
 TRAVEL

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
 0 2 / 0 7 / 2 0 1 1

Transaction ID: H4.076

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 129.35		<input type="text"/> 129.35		<input type="text"/> 258.70

B. Full Name (Last, First, Middle Initial)
 US AIRWAYS

Mailing Address

4000 E SKY HARBOR BLVD

City State Zip Code
 PHOENIX AZ 85034

000

Purpose of Disbursement:
 TRAVEL

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
 0 2 / 0 7 / 2 0 1 1

Transaction ID: H4.077

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 75.00		<input type="text"/> 75.00		<input type="text"/> 150.00

C. Full Name (Last, First, Middle Initial)
 US AIRWAYS

Mailing Address

4000 E SKY HARBOR BLVD

City State Zip Code
 PHOENIX AZ 85034

000

Purpose of Disbursement:
 TRAVEL

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
 0 2 / 0 7 / 2 0 1 1

Transaction ID: H4.078

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 82.50		<input type="text"/> 82.50		<input type="text"/> 165.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 0.00		<input type="text"/> 0.00		<input type="text"/> 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<input type="text"/>		<input type="text"/>		<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 857 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
DELTA

Mailing Address

ATLANTA AIRPORT

City	State	Zip Code
ATLANTA	GA	30344

000

Purpose of Disbursement:
TRAVEL

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	2

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.079

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
156.85		156.85		313.70

B. Full Name (Last, First, Middle Initial)
AMTRAK

Mailing Address

60 MASSACHUSETTS AVE NE

City	State	Zip Code
WASHINGTON	DC	20002

000

Purpose of Disbursement:
TRAVEL

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	2

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.080

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
173.00		173.00		346.00

C. Full Name (Last, First, Middle Initial)
DELTA

Mailing Address

ATLANTA AIRPORT

City	State	Zip Code
ATLANTA	GA	30344

000

Purpose of Disbursement:
TRAVEL

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	2

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.081

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
118.85		118.85		237.70

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 858 / 970
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
 WESTIN

Mailing Address
 1400 M ST NW

City State Zip Code
 WASHINGTON DC 20005

000

Purpose of Disbursement:
 TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
 0 2 / 0 7 / 2 0 1 1

Transaction ID: H4.082

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 296.56		<input type="text"/> 296.56		<input type="text"/> 593.12

B. Full Name (Last, First, Middle Initial)
 JETBLUE

Mailing Address
 6322 S 3000 E STE G10

City State Zip Code
 SALT LAKE CITY UT 84121

000

Purpose of Disbursement:
 TRAVEL

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
 0 2 / 0 7 / 2 0 1 1

Transaction ID: H4.083

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 95.85		<input type="text"/> 95.85		<input type="text"/> 191.70

C. Full Name (Last, First, Middle Initial)
 TELEFLORA

Mailing Address
 3737 NW 34TH STREET

City State Zip Code
 OKLAHOMA CITY OK 73112

000

Purpose of Disbursement:
 FLORAL ARRANGEMENT

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
 0 2 / 0 7 / 2 0 1 1

Transaction ID: H4.084

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 90.94		<input type="text"/> 90.94		<input type="text"/> 181.88

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 0.00		<input type="text"/> 0.00		<input type="text"/> 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 859 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
UNITED AIRLINES

Mailing Address

1200 E ALGONQUIN RD

 City State Zip Code
ELK GROVE VILLAGE IL 60007

000

 Purpose of Disbursement:
TRAVEL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

 Date MM / DD / YYYY
02 / 07 / 2011

Transaction ID: H4.085

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
142.70		142.70		285.40

B. Full Name (Last, First, Middle Initial)
US AIRWAYS

Mailing Address

4000 E SKY HARBOR BLVD

 City State Zip Code
PHOENIX AZ 85034

000

 Purpose of Disbursement:
TRAVEL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

 Date MM / DD / YYYY
02 / 07 / 2011

Transaction ID: H4.086

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
129.35		129.35		258.70

C. Full Name (Last, First, Middle Initial)
US AIRWAYS

Mailing Address

4000 E SKY HARBOR BLVD

 City State Zip Code
PHOENIX AZ 85034

000

 Purpose of Disbursement:
TRAVEL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

 Date MM / DD / YYYY
02 / 07 / 2011

Transaction ID: H4.087

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
86.35		86.35		172.70

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 860 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
WESTIN

Mailing Address
1400 M ST NW

City State Zip Code
WASHINGTON DC 20005

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	7	/	2	0	1	1

Transaction ID: H4.088

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
256.59		256.59		513.18

B. Full Name (Last, First, Middle Initial)
AMTRAK

Mailing Address
60 MASSACHUSETTS AVE NE

City State Zip Code
WASHINGTON DC 20002

000

Purpose of Disbursement:
TRAVEL

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	7	/	2	0	1	1

Transaction ID: H4.089

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
150.50		150.50		301.00

C. Full Name (Last, First, Middle Initial)
TELEFLORA

Mailing Address
3737 NW 34TH STREET

City State Zip Code
OKLAHOMA CITY OK 73112

000

Purpose of Disbursement:
FLORAL ARRANGEMENT

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	7	/	2	0	1	1

Transaction ID: H4.090

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
93.75		93.75		187.50

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 861 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
US AIRWAYS

Mailing Address

4000 E SKY HARBOR BLVD

City State Zip Code
PHOENIX AZ 85034

000

Purpose of Disbursement:
TRAVEL

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date 02 / 07 / 2011

Transaction ID: H4.091

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
201.70		201.70		403.40

B. Full Name (Last, First, Middle Initial)
JETBLUE

Mailing Address

6322 S 3000 E STE G10

City State Zip Code
SALT LAKE CITY UT 84121

000

Purpose of Disbursement:
TRAVEL

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date 02 / 07 / 2011

Transaction ID: H4.092

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.00		10.00		20.00

C. Full Name (Last, First, Middle Initial)
JETBLUE

Mailing Address

6322 S 3000 E STE G10

City State Zip Code
SALT LAKE CITY UT 84121

000

Purpose of Disbursement:
TRAVEL

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date 02 / 07 / 2011

Transaction ID: H4.093

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
110.70		110.70		221.40

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 862 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
JETBLUE

Mailing Address

6322 S 3000 E STE G10

 City State Zip Code
SALT LAKE CITY UT 84121

000

 Purpose of Disbursement:
TRAVEL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

 Date MM / DD / YYYY
02 / 07 / 2011

Transaction ID: H4.094

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
68.20		68.20		136.40

B. Full Name (Last, First, Middle Initial)
US AIRWAYS

Mailing Address

4000 E SKY HARBOR BLVD

 City State Zip Code
PHOENIX AZ 85034

000

 Purpose of Disbursement:
TRAVEL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

 Date MM / DD / YYYY
02 / 07 / 2011

Transaction ID: H4.095

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
632.05		632.05		1264.10

C. Full Name (Last, First, Middle Initial)
HOTEL VERITAS

Mailing Address

ONE REMINGTON ST

 City State Zip Code
CAMBRIDGE MA 02138

000

 Purpose of Disbursement:
TRAVEL EXPENSE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

 Date MM / DD / YYYY
02 / 07 / 2011

Transaction ID: H4.096

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
136.77		136.77		273.54

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 863 / 970
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
 HERTZ

Mailing Address

14501 HERTZ QUAIL SPGS PK

City State Zip Code
 OKLAHOMA CITY OK 73134

000

Purpose of Disbursement:
 TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
 0 2 / 0 7 / 2 0 1 1

Transaction ID: H4.097

[MEMO ITEM]

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

27.84

27.83

55.67

B. Full Name (Last, First, Middle Initial)
 JETBLUE

Mailing Address

6322 S 3000 E STE G10

City State Zip Code
 SALT LAKE CITY UT 84121

000

Purpose of Disbursement:
 TRAVEL

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
 0 2 / 0 7 / 2 0 1 1

Transaction ID: H4.098

[MEMO ITEM]

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

124.70

124.70

249.40

C. Full Name (Last, First, Middle Initial)
 DROPBOX

Mailing Address

153 KEARNY ST

City State Zip Code
 SAN FRANCISCO CA 94108

000

Purpose of Disbursement:
 SOFTWARE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
 0 2 / 0 7 / 2 0 1 1

Transaction ID: H4.099

[MEMO ITEM]

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

10.00

9.99

19.99

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 864 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
VIRGIN AMERICA AIRLINES

Mailing Address

555 AIRPORT BLVD FL 2ND

City State Zip Code
BURLINGAME CA 94010

000

Purpose of Disbursement:
TRAVEL

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	7	/	2	0	1	1

Transaction ID: H4.100

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
333.70		333.69		667.39

B. Full Name (Last, First, Middle Initial)
AMERICAN EXPRESS

Mailing Address

PO BOX 2855

City State Zip Code
NEW YORK NY 10116

000

Purpose of Disbursement:
CREDIT CARD FEE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	7	/	2	0	1	1

Transaction ID: H4.101

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.83		5.83		11.66

C. Full Name (Last, First, Middle Initial)
FEDEX

Mailing Address

133111-10 E

City State Zip Code
HOUSTON TX 77015

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	7	/	2	0	1	1

Transaction ID: H4.102

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
35.35		35.35		70.70

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 865 / 970
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
 AT&T

Mailing Address

12525 CINGULAR WAY

City State Zip Code
 ALPHARETTA GA 30004

000

Purpose of Disbursement:
 DATA SERVICES

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
 0 2 / 0 7 / 2 0 1 1

Transaction ID: H4.103

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.50		12.50		25.00

B. Full Name (Last, First, Middle Initial)
 LEXIS-NEXIS

Mailing Address

9393 SPRINGBORO PIKE

City State Zip Code
 MIAMISBURG OH 45342

000

Purpose of Disbursement:
 SUBSCRIPTION FEE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
 0 2 / 0 7 / 2 0 1 1

Transaction ID: H4.104

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
300.00		300.00		600.00

C. Full Name (Last, First, Middle Initial)
 MA MAGOO'S

Mailing Address

6 CONCORD LANE

City State Zip Code
 CAMBRIDGE MA 02138

000

Purpose of Disbursement:
 MEETING EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
 0 2 / 0 7 / 2 0 1 1

Transaction ID: H4.105

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
29.24		29.24		58.48

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 866 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
DIRECTV INC

Mailing Address

2230 E IMPERIAL HWY

City State Zip Code
EL SEGUNDO CA 90245

000

Purpose of Disbursement:
SATELLITE TV SERVICE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 1 1

Transaction ID: H4.106

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 41.99		<input type="text"/> 41.99		<input type="text"/> 83.98

B. Full Name (Last, First, Middle Initial)
DUNKIN DONUTS

Mailing Address

876A LEXINGTON ST

City State Zip Code
WALTHAM MA 02452

000

Purpose of Disbursement:
MEETING EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 1 1

Transaction ID: H4.107

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 15.11		<input type="text"/> 15.11		<input type="text"/> 30.22

C. Full Name (Last, First, Middle Initial)
AT&T

Mailing Address

12525 CINGULAR WAY

City State Zip Code
ALPHARETTA GA 30004

000

Purpose of Disbursement:
DATA SERVICES

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 1 1

Transaction ID: H4.108

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 30.00		<input type="text"/> 29.99		<input type="text"/> 59.99

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 0.00		<input type="text"/> 0.00		<input type="text"/> 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 867 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
NEILLIOS

Mailing Address

53 BEDFORD ST

City	State	Zip Code
LEXINGTON	MA	02420

000

 Purpose of Disbursement:
MEETING EXPENSE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

 Date

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	7	/	2	0	1	1

Transaction ID: H4.109

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
28.14		28.14		56.28

B. Full Name (Last, First, Middle Initial)
GOTOWEBINAR

Mailing Address

7414 HOLLISTER AVENUE

City	State	Zip Code
GOLETA	CA	93117

000

 Purpose of Disbursement:
PHONE EXPENSE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

 Date

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	7	/	2	0	1	1

Transaction ID: H4.110

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
49.50		49.50		99.00

C. Full Name (Last, First, Middle Initial)
USPS

Mailing Address

25 DORCHESTER AVE

City	State	Zip Code
BOSTON	MA	02205

000

 Purpose of Disbursement:
POSTAGE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

 Date

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	7	/	2	0	1	1

Transaction ID: H4.111

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.02		3.02		6.04

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 868 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
SONIC SOLUTIONS SOFTWARE

Mailing Address

9625 W 76TH ST

City	State	Zip Code
EDEN PRAIRIE	MN	55344

000

Purpose of Disbursement:
SOFTWARE PURCHASE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	2

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.112

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.97		7.96		15.93

B. Full Name (Last, First, Middle Initial)
AMERICAN EXPRESS

Mailing Address

PO BOX 2855

City	State	Zip Code
NEW YORK	NY	10116

000

Purpose of Disbursement:
CREDIT CARD FEE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	2

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.113

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.83		5.83		11.66

C. Full Name (Last, First, Middle Initial)
AMERICAN EXPRESS

Mailing Address

PO BOX 2855

City	State	Zip Code
NEW YORK	NY	10116

000

Purpose of Disbursement:
CREDIT CARD FEE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	2

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.114

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.58		14.58		29.16

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 869 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
STAPLES

Mailing Address

186 ALEWIFE BROOK PKWY

City State Zip Code
CAMBRIDGE MA 02138

000

Purpose of Disbursement:
OFFICE SUPPLIES

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date 02 / 07 / 2011

Transaction ID: H4.115

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
61.34		61.32		122.66

B. Full Name (Last, First, Middle Initial)
USPS

Mailing Address

25 DORCHESTER AVE

City State Zip Code
BOSTON MA 02205

000

Purpose of Disbursement:
POSTAGE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date 02 / 07 / 2011

Transaction ID: H4.116

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
440.00		440.00		880.00

C. Full Name (Last, First, Middle Initial)
AMERICAN EXPRESS

Mailing Address

PO BOX 2855

City State Zip Code
NEW YORK NY 10116

000

Purpose of Disbursement:
CREDIT CARD FEE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date 02 / 07 / 2011

Transaction ID: H4.117

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.29		7.29		14.58

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 870 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
ARMY AND NAVY CLUB

Mailing Address

901 17TH ST NW

City State Zip Code
WASHINGTON DC 20006

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	7	/	2	0	1	1

Transaction ID: H4.118

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.40		8.40		16.80

B. Full Name (Last, First, Middle Initial)
FEDEX

Mailing Address

1919 CONNECTICUT AVENUE

City State Zip Code
WASHINGTON DC 20009

000

Purpose of Disbursement:
DELIVERY

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	7	/	2	0	1	1

Transaction ID: H4.119

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.84		0.83		1.67

C. Full Name (Last, First, Middle Initial)
JETBLUE

Mailing Address

6322 S 3000 E STE G10

City State Zip Code
SALT LAKE CITY UT 84121

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	7	/	2	0	1	1

Transaction ID: H4.120

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.00		1.00		2.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 871 / 970
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
 RANCH 1

Mailing Address

1 AVIATION CIRCLE

City State Zip Code
 WASHINGTON DC 20001

000

Purpose of Disbursement:
 TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
 0 2 / 0 7 / 2 0 1 1

Transaction ID: H4.121

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 4.35		<input type="text"/> 4.35		<input type="text"/> 8.70

B. Full Name (Last, First, Middle Initial)
 THE OLD EBBITT GRILL

Mailing Address

675 15TH ST NW

City State Zip Code
 WASHINGTON DC 20005

000

Purpose of Disbursement:
 TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
 0 2 / 0 7 / 2 0 1 1

Transaction ID: H4.122

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 27.57		<input type="text"/> 27.57		<input type="text"/> 55.14

C. Full Name (Last, First, Middle Initial)
 ARMY AND NAVY CLUB

Mailing Address

901 17TH ST NW

City State Zip Code
 WASHINGTON DC 20006

000

Purpose of Disbursement:
 TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
 0 2 / 0 7 / 2 0 1 1

Transaction ID: H4.123

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 8.40		<input type="text"/> 8.40		<input type="text"/> 16.80

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 0.00		<input type="text"/> 0.00		<input type="text"/> 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 872 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
FEDEX

Mailing Address

1919 CONNECTICUT AVENUE

City State Zip Code
WASHINGTON DC 20009

000

Purpose of Disbursement:
DELIVERY

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 1 1

Transaction ID: H4.124

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.34		3.34		6.68

B. Full Name (Last, First, Middle Initial)
MARRIOTT

Mailing Address

1331 PENNSYLVANIA AVE NW

City State Zip Code
WASHINGTON DC 20004

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 1 1

Transaction ID: H4.125

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.30		5.30		10.60

C. Full Name (Last, First, Middle Initial)
SHELLY'S BACK ROOM

Mailing Address

1331 F ST NW

City State Zip Code
WASHINGTON DC 20004

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 1 1

Transaction ID: H4.126

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.18		10.18		20.36

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 873 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
BOSTON TAXI

Mailing Address
3703 21ST ST

City State Zip Code
LONG ISLAND CITY NY 11101

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y

Transaction ID: H4.127

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 14.82		<input type="text"/> 14.81		<input type="text"/> 29.63

B. Full Name (Last, First, Middle Initial)
FEDEX

Mailing Address
1919 CONNECTICUT AVENUE

City State Zip Code
WASHINGTON DC 20009

000

Purpose of Disbursement:
DELIVERY

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y

Transaction ID: H4.128

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 25.03		<input type="text"/> 25.02		<input type="text"/> 50.05

C. Full Name (Last, First, Middle Initial)
JOHNNY ROCKETS

Mailing Address
BOSTON INTL AIRPORT

City State Zip Code
EAST BOSTON MA 02128

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y

Transaction ID: H4.129

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 5.45		<input type="text"/> 5.45		<input type="text"/> 10.90

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 0.00		<input type="text"/> 0.00		<input type="text"/> 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 874 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
MARRIOTT

Mailing Address

1331 PENNSYLVANIA AVE NW

City State Zip Code
WASHINGTON DC 20004

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	7	/	2	0	1	1

Transaction ID: H4.130

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.54		2.54		5.08

B. Full Name (Last, First, Middle Initial)
WAGON WHEEL NURSERY

Mailing Address

927 WALTHAM ST

City State Zip Code
LEXINGTON MA 02421

000

Purpose of Disbursement:
MEETING EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	7	/	2	0	1	1

Transaction ID: H4.131

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.47		23.47		46.94

C. Full Name (Last, First, Middle Initial)
BROWN BAG DELI LLC

Mailing Address

1 EAGLE SQ

City State Zip Code
CONCORD NH 03301

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	7	/	2	0	1	1

Transaction ID: H4.132

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.91		3.90		7.81

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 875 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
EXXONMOBIL

Mailing Address

City State Zip Code
KANSAS CITY MO 64141

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 1 1

Transaction ID: H4.133

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 10.99		<input type="text"/> 10.99		<input type="text"/> 21.98

B. Full Name (Last, First, Middle Initial)
GULF OIL

Mailing Address

100 CROSSING BLVD

City State Zip Code
FRAMINGHAM MA 01702

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 1 1

Transaction ID: H4.134

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 10.00		<input type="text"/> 10.00		<input type="text"/> 20.00

C. Full Name (Last, First, Middle Initial)
CITGO OIL CO

Mailing Address

6100 S YALE AVE

City State Zip Code
TULSA OK 74136

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 1 1

Transaction ID: H4.135

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 21.20		<input type="text"/> 21.20		<input type="text"/> 42.40

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 0.00		<input type="text"/> 0.00		<input type="text"/> 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 876 / 970
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
 JOE KELLY'S

Mailing Address

866 ELM STREET

City State Zip Code
 MANCHESTER NH 03101

000

Purpose of Disbursement:
 TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
 0 2 / 0 7 / 2 0 1 1

Transaction ID: H4.136

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 9.50		<input type="text"/> 9.50		<input type="text"/> 19.00

B. Full Name (Last, First, Middle Initial)
 AMERICAN EXPRESS

Mailing Address

PO BOX 2855

City State Zip Code
 NEW YORK NY 10116

000

Purpose of Disbursement:
 CREDIT CARD FEE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
 0 2 / 0 7 / 2 0 1 1

Transaction ID: H4.137

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 13.13		<input type="text"/> 13.12		<input type="text"/> 26.25

C. Full Name (Last, First, Middle Initial)
 ADMINISTAFF COMPANIES

Mailing Address

19001 CRESCENT SPRINGS DRIVE

City State Zip Code
 KINGWOOD TX 77339

000

Purpose of Disbursement:
 PAYROLL TAXES/INSURANCE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
 0 2 / 1 5 / 2 0 1 1

Transaction ID: H4.138

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 4783.29		<input type="text"/> 4783.28		<input type="text"/> 9566.57

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 4783.29		<input type="text"/> 4783.28		<input type="text"/> 9566.57

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 877 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
ADMINISTAFF COMPANIES

Mailing Address

19001 CRESCENT SPRINGS DRIVE

 City State Zip Code
KINGWOOD TX 77339

000

 Purpose of Disbursement:
PAYROLL SERVICES
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

246783.94

Date 02 / 15 / 2011

Transaction ID: H4.139

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

4908.64

4908.64

9817.28

B. Full Name (Last, First, Middle Initial)
LANHEE CHEN

Mailing Address

30 CAMBRIDGE PARK DR. #6132

 City State Zip Code
CAMBRIDGE MA 02140

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

251280.21

Date 02 / 15 / 2011

Transaction ID: H4.140

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2248.14

2248.13

4496.27

C. Full Name (Last, First, Middle Initial)
ERIC FEHRNSTROM

Mailing Address

83 RISLEY ROAD

 City State Zip Code
CHESTNUT HILL MA 02467

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

255858.65

Date 02 / 15 / 2011

Transaction ID: H4.141

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2289.22

2289.22

4578.44

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

9446.00

9445.99

18891.99

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 878 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
KELLI HARRISON

Mailing Address

21 CENTURY STREET APT. 1

 City State Zip Code
MEDFORD MA 02155

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

257181.51

Date 02 / 15 / 2011

Transaction ID: H4.142

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

661.43

661.43

1322.86

B. Full Name (Last, First, Middle Initial)
GARRETT JACKSON

Mailing Address

1 LEIGHTON STREET APT. 301

 City State Zip Code
CAMBRIDGE MA 02141

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

258646.63

Date 02 / 15 / 2011

Transaction ID: H4.143

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

732.56

732.56

1465.12

C. Full Name (Last, First, Middle Initial)
BRUCE NILSON

Mailing Address

40 KINGS WAY, #401A APT.1

 City State Zip Code
WALTHAM MA 02451

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

259900.30

Date 02 / 15 / 2011

Transaction ID: H4.144

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

626.84

626.83

1253.67

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2020.83

2020.82

4041.65

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 879 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)

MATTHEW RHOADES

Mailing Address

90-92 REVERE STREET

City	State	Zip Code
BOSTON	MA	02114

000

Purpose of Disbursement:
PAYROLLCategory/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

264025.10

Date 02 / 15 / 2011

Transaction ID: H4.145

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

2062.40

2062.40

4124.80

B. Full Name (Last, First, Middle Initial)

WILL RITTER

Mailing Address

11 CHAMPNEY PLACE

City	State	Zip Code
BOSTON	MA	02114

000

Purpose of Disbursement:
PAYROLLCategory/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

265549.04

Date 02 / 15 / 2011

Transaction ID: H4.146

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

761.97

761.97

1523.94

C. Full Name (Last, First, Middle Initial)

JACQUELINE ROONEY

Mailing Address

9 COMMONWEALTH AVE. APT. 1A

City	State	Zip Code
BOSTON	MA	02116

000

Purpose of Disbursement:
PAYROLLCategory/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

266586.68

Date 02 / 15 / 2011

Transaction ID: H4.147

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

518.82

518.82

1037.64

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3343.19

3343.19

6686.38

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 880 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
HEPZIBAH SHADRACH

Mailing Address

45 CLEVELAND STREET

 City State Zip Code
ARLINGTON MA 02474

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

268014.53

 Date M M / D D / Y Y Y Y
0 2 / 1 5 / 2 0 1 1

Transaction ID: H4.148

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
713.93		713.92		1427.85

B. Full Name (Last, First, Middle Initial)
LOUIS TAVARES

Mailing Address

42 HAZEN STREET

 City State Zip Code
CHELMSFORD MA 01824

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

271522.37

 Date M M / D D / Y Y Y Y
0 2 / 1 5 / 2 0 1 1

Transaction ID: H4.149

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1753.92		1753.92		3507.84

C. Full Name (Last, First, Middle Initial)
JACQUELINE ROONEY

Mailing Address

9 COMMONWEALTH AVE., #1A

 City State Zip Code
BOSTON MA 02116

000

 Purpose of Disbursement:
TRAVEL EXPENSE REIMBURSEMENT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

271539.57

 Date M M / D D / Y Y Y Y
0 2 / 1 6 / 2 0 1 1

Transaction ID: H4.150

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.60		8.60		17.20

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2476.45		2476.44		4952.89

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 881 / 970
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
 KELLI HARRISON

Mailing Address

21 CENTURY STREET, APT. 1

 City State Zip Code
 MEDFORD MA 02155

000

 Purpose of Disbursement:
 TRAVEL EXPENSE REIMBURSEMENT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

271594.59

Date 02 / 16 / 2011

Transaction ID: H4.151

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

27.51

27.51

55.02

B. Full Name (Last, First, Middle Initial)
 MINDSHIFT TECHNOLOGIES

Mailing Address

3975 FAIR RIDGE DRIVE SUITE 200-S

 City State Zip Code
 FAIRFAX VA 22033

000

 Purpose of Disbursement:
 NETWORK SUPPORT/PHONE SERVICE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

277706.66

Date 02 / 16 / 2011

Transaction ID: H4.152

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

3056.04

3056.03

6112.07

C. Full Name (Last, First, Middle Initial)
 VERIZON WIRELESS

Mailing Address

P.O. BOX 15062

 City State Zip Code
 ALBANY NY 12212

000

 Purpose of Disbursement:
 PHONE SERVICE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

280823.99

Date 02 / 16 / 2011

Transaction ID: H4.153

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1558.67

1558.66

3117.33

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

4642.22

4642.20

9284.42

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 882 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
MINDSHIFT TECHNOLOGIES

Mailing Address

3975 FAIR RIDGE DRIVE SUITE 200-S

 City State Zip Code
FAIRFAX VA 22033

000

 Purpose of Disbursement:
NETWORK SUPPORT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

280838.98

 Date M M / D D / Y Y Y Y
0 2 / 1 6 / 2 0 1 1

Transaction ID: H4.154

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

7.50

7.49

14.99

B. Full Name (Last, First, Middle Initial)
MINDSHIFT TECHNOLOGIES

Mailing Address

3975 FAIR RIDGE DRIVE SUITE 200-S

 City State Zip Code
FAIRFAX VA 22033

000

 Purpose of Disbursement:
PHONE SERVICE/SUPPORT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

280938.64

 Date M M / D D / Y Y Y Y
0 2 / 1 6 / 2 0 1 1

Transaction ID: H4.155

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

49.83

49.83

99.66

C. Full Name (Last, First, Middle Initial)
THE UNION CLUB OF BOSTON

Mailing Address

EIGHT PARK STREET

 City State Zip Code
BOSTON MA 02108

000

 Purpose of Disbursement:
ROOM RENTAL AND CATERING FOR PAC
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

282582.16

 Date M M / D D / Y Y Y Y
0 2 / 1 6 / 2 0 1 1

Transaction ID: H4.156

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

821.76

821.76

1643.52

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

879.09

879.08

1758.17

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 883 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
MATTHEW RHOADES

Mailing Address

90-92 REVERE STREET

 City State Zip Code
BOSTON MA 02114

000

 Purpose of Disbursement:
TRAVEL EXPENSE REIMBURSEMENT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

282639.16

 Date M M / D D / Y Y Y Y
0 2 / 1 6 / 2 0 1 1

Transaction ID: H4.157

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
28.50		28.50		57.00

B. Full Name (Last, First, Middle Initial)
MATTHEW RHOADES

Mailing Address

90-92 REVERE STREET

 City State Zip Code
BOSTON MA 02114

000

 Purpose of Disbursement:
TRAVEL EXPENSE REIMBURSEMENT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

282699.16

 Date M M / D D / Y Y Y Y
0 2 / 1 6 / 2 0 1 1

Transaction ID: H4.158

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.00		30.00		60.00

C. Full Name (Last, First, Middle Initial)
FLS CONNECT, LLC

Mailing Address

7300 HUDSON BLVD. SUITE 270

 City State Zip Code
SAINT PAUL MN 55128

000

 Purpose of Disbursement:
CONFERENCE CALL SERVICE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

283752.75

 Date M M / D D / Y Y Y Y
0 2 / 1 6 / 2 0 1 1

Transaction ID: H4.159

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
526.80		526.79		1053.59

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
585.30		585.29		1170.59

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 884 / 970
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
 LANHEE CHEN

Mailing Address

30 CAMBRIDGE PARK DR. #6132

 City State Zip Code
 CAMBRIDGE MA 02140

000

 Purpose of Disbursement:
 TRAVEL EXPENSE REIMBURSEMENT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

284108.98

Date 02 / 16 / 2011

Transaction ID: H4.160

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

178.12

178.11

356.23

B. Full Name (Last, First, Middle Initial)
 PUBLIC OPINION STRATEGIES

Mailing Address

214 NORTH FAYETTE STREET

 City State Zip Code
 ALEXANDRIA VA 22314

000

 Purpose of Disbursement:
 TRAVEL EXPENSE REIMBURSEMENT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

284437.38

Date 02 / 16 / 2011

Transaction ID: H4.161

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

164.20

164.20

328.40

C. Full Name (Last, First, Middle Initial)
 MATTHEW RHOADES

Mailing Address

90-92 REVERE STREET

 City State Zip Code
 BOSTON MA 02114

000

 Purpose of Disbursement:
 TRAVEL EXPENSE REIMBURSEMENT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

284478.38

Date 02 / 16 / 2011

Transaction ID: H4.162

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

20.50

20.50

41.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

362.82

362.81

725.63

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 885 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
JACQUELINE ROONEY

Mailing Address

9 COMMONWEALTH AVE., #1A

 City State Zip Code
BOSTON MA 02116

000

 Purpose of Disbursement:
TRAVEL EXPENSE REIMBURSEMENT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

284518.98

Date 02 / 16 / 2011

Transaction ID: H4.163

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

20.30

20.30

40.60

B. Full Name (Last, First, Middle Initial)
N.E. COPY SPECIALISTS, INC

Mailing Address

PO BOX 4024

 City State Zip Code
WOBBURN MA 01888

000

 Purpose of Disbursement:
OFFICE EQUIPMENT RENTAL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

285318.98

Date 02 / 16 / 2011

Transaction ID: H4.164

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

400.00

400.00

800.00

C. Full Name (Last, First, Middle Initial)
STAPLES BUSINESS ADVANTAGE

Mailing Address

DEPT. BOS PO BOX 415256

 City State Zip Code
BOSTON MA 02241

000

 Purpose of Disbursement:
OFFICE SUPPLIES
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

285468.74

Date 02 / 16 / 2011

Transaction ID: H4.165

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

74.88

74.88

149.76

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

495.18

495.18

990.36

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 886 / 970
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
 ERIC FEHRNSTROM

Mailing Address

83 RISLEY ROAD

City	State	Zip Code
CHESTNUT HILL	MA	02467

000

Purpose of Disbursement:
 TRAVEL EXPENSE REIMBURSEMENT

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

285593.32

Date

M	M
0	2

 /

D	D
1	6

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.166

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

62.29

62.29

124.58

B. Full Name (Last, First, Middle Initial)
 ERIC FEHRNSTROM

Mailing Address

83 RISLEY ROAD

City	State	Zip Code
CHESTNUT HILL	MA	02467

000

Purpose of Disbursement:
 TRAVEL EXPENSE REIMBURSEMENT

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

285816.19

Date

M	M
0	2

 /

D	D
1	6

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.167

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

111.44

111.43

222.87

C. Full Name (Last, First, Middle Initial)
 LOUIS TAVARES

Mailing Address

42 HAZEN ST.

City	State	Zip Code
CHELMSFORD	MA	01824

000

Purpose of Disbursement:
 TRAVEL EXPENSE REIMBURSEMENT

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

285868.34

Date

M	M
0	2

 /

D	D
1	6

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.168

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

26.08

26.07

52.15

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

199.81

199.79

399.60

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 887 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
BRIAN BARTLETT

Mailing Address

1701 N KENT ST., APT. 1206

City	State	Zip Code
ARLINGTON	VA	22209

000

Purpose of Disbursement:
TRANSPORTATION SERVICES FOR PAC

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

286318.34

Date

M	M
0	2

 /

D	D
1	6

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.169

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

225.00

225.00

450.00

B. Full Name (Last, First, Middle Initial)
BRIAN BARTLETT

Mailing Address

1701 N KENT ST., APT. 1206

City	State	Zip Code
ARLINGTON	VA	22209

000

Purpose of Disbursement:
TRAVEL EXPENSE REIMBURSEMENT

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

286393.05

Date

M	M
0	2

 /

D	D
1	6

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.170

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

37.36

37.35

74.71

C. Full Name (Last, First, Middle Initial)
ADMINISTAFF COMPANIES

Mailing Address

19001 CRESCENT SPRINGS DRIVE

City	State	Zip Code
KINGWOOD	TX	77339

000

Purpose of Disbursement:
PAYROLL TAXES/INSURANCE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

295959.62

Date

M	M
0	2

 /

D	D
2	8

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.171

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

4783.29

4783.28

9566.57

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

5045.65

5045.63

10091.28

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 888 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
ADMINISTAFF COMPANIES

Mailing Address

19001 CRESCENT SPRINGS DRIVE

 City State Zip Code
KINGWOOD TX 77339

000

 Purpose of Disbursement:
PAYROLL SERVICES
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304206.92

 Date M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 1 1

Transaction ID: H4.172

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

4123.65

4123.65

8247.30

B. Full Name (Last, First, Middle Initial)
LANHEE CHEN

Mailing Address

30 CAMBRIDGE PARK DR. #6132

 City State Zip Code
CAMBRIDGE MA 02140

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

308703.19

 Date M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 1 1

Transaction ID: H4.173

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2248.14

2248.13

4496.27

C. Full Name (Last, First, Middle Initial)
ERIC FEHRNSTROM

Mailing Address

83 RISLEY ROAD

 City State Zip Code
CHESTNUT HILL MA 02467

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

313281.63

 Date M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 1 1

Transaction ID: H4.174

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2289.22

2289.22

4578.44

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

8661.01

8661.00

17322.01

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 889 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
KELLI HARRISON

Mailing Address

21 CENTURY STREET APT. 1

 City State Zip Code
MEDFORD MA 02155

 Purpose of Disbursement:
PAYROLL

 Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

314604.49

 Date M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 1 1

Transaction ID: H4.175

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

661.43

661.43

1322.86

B. Full Name (Last, First, Middle Initial)
GARRETT JACKSON

Mailing Address

1 LEIGHTON STREET APT. 301

 City State Zip Code
CAMBRIDGE MA 02141

 Purpose of Disbursement:
PAYROLL

 Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

316069.61

 Date M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 1 1

Transaction ID: H4.176

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

732.56

732.56

1465.12

C. Full Name (Last, First, Middle Initial)
BRUCE NILSON

Mailing Address

40 KINGS WAY, #401A APT.1

 City State Zip Code
WALTHAM MA 02451

 Purpose of Disbursement:
PAYROLL

 Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

317323.28

 Date M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 1 1

Transaction ID: H4.177

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

626.84

626.83

1253.67

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2020.83

2020.82

4041.65

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 890 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
MATTHEW RHOADES

Mailing Address

90-92 REVERE STREET

 City State Zip Code
BOSTON MA 02114

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

321448.08

 Date M M / D D / Y Y Y Y
 0 2 / 2 8 / 2 0 1 1

Transaction ID: H4.178

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2062.40

2062.40

4124.80

B. Full Name (Last, First, Middle Initial)
WILL RITTER

Mailing Address

11 CHAMPNEY PLACE

 City State Zip Code
BOSTON MA 02114

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

322972.02

 Date M M / D D / Y Y Y Y
 0 2 / 2 8 / 2 0 1 1

Transaction ID: H4.179

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

761.97

761.97

1523.94

C. Full Name (Last, First, Middle Initial)
JACQUELINE ROONEY

Mailing Address

9 COMMONWEALTH AVE. APT. 1A

 City State Zip Code
BOSTON MA 02116

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

324009.66

 Date M M / D D / Y Y Y Y
 0 2 / 2 8 / 2 0 1 1

Transaction ID: H4.180

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

518.82

518.82

1037.64

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

3343.19

3343.19

6686.38

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 891 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
HEPZIBAH SHADRACH

Mailing Address

45 CLEVELAND STREET

 City State Zip Code
ARLINGTON MA 02474

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

325437.51

 Date MM / DD / YYYY
02 / 28 / 2011

Transaction ID: H4.181

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

713.93

713.92

1427.85

B. Full Name (Last, First, Middle Initial)
LOUIS TAVARES

Mailing Address

42 HAZEN STREET

 City State Zip Code
CHELMSFORD MA 01824

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

328945.35

 Date MM / DD / YYYY
02 / 28 / 2011

Transaction ID: H4.182

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1753.92

1753.92

3507.84

C. Full Name (Last, First, Middle Initial)
STAPLES

Mailing Address

800 LEXINGTON ST.

 City State Zip Code
WALTHAM MA 02451

000

 Purpose of Disbursement:
OFFICE SUPPLIES
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

329015.35

 Date MM / DD / YYYY
02 / 28 / 2011

Transaction ID: H4.183

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

35.00

35.00

70.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2502.85

2502.84

5005.69

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 892 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
PATTON BOGGS LLP

Mailing Address

2550 M ST. N.W.

 City State Zip Code
WASHINGTON DC 20037

000

 Purpose of Disbursement:
LEGAL FEES
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

339019.08

 Date M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 1 1

Transaction ID: H4.184

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

5001.87

5001.86

10003.73

B. Full Name (Last, First, Middle Initial)
SHRED-IT BOSTON

Mailing Address

2 C GILL STREET

 City State Zip Code
WOBBURN MA 01801

000

 Purpose of Disbursement:
SHREDDING SERVICES
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

339071.88

 Date M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 1 1

Transaction ID: H4.185

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

26.40

26.40

52.80

C. Full Name (Last, First, Middle Initial)
SHRED-IT BOSTON

Mailing Address

2 C GILL STREET

 City State Zip Code
WOBBURN MA 01801

000

 Purpose of Disbursement:
SHREDDING SERVICES
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

339124.68

 Date M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 1 1

Transaction ID: H4.186

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

26.40

26.40

52.80

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

5054.67

5054.66

10109.33

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 893 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
STAPLES BUSINESS ADVANTAGE

 Mailing Address
DEPT. BOS

 City State Zip Code
BOSTON MA 02241

000

 Purpose of Disbursement:
OFFICE SUPPLIES
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

339202.22

 Date M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 1 1

Transaction ID: H4.187

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

38.77

38.77

77.54

B. Full Name (Last, First, Middle Initial)
MINDSHIFT TECHNOLOGIES

 Mailing Address
3975 FAIR RIDGE DRIVE

 City State Zip Code
FAIRFAX VA 22033

000

 Purpose of Disbursement:
NETWORK SUPPORT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

345306.79

 Date M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 1 1

Transaction ID: H4.188

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

3052.29

3052.28

6104.57

C. Full Name (Last, First, Middle Initial)
MINDSHIFT TECHNOLOGIES

 Mailing Address
3975 FAIR RIDGE DRIVE

 City State Zip Code
FAIRFAX VA 22033

000

 Purpose of Disbursement:
SOFTWARE PURCH./NETWORK SUPPORT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

346356.79

 Date M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 1 1

Transaction ID: H4.189

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

525.00

525.00

1050.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

3616.06

3616.05

7232.11

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 894 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
DOUG GAMBLE

Mailing Address
PO BOX 4517

City State Zip Code
CARMEL BY THE SEA CA 93921

000

Purpose of Disbursement:
COMMUNICATIONS CONSULTING FOR PAC

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

346856.79

Date M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 1 1

Transaction ID: H4.190

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

250.00

250.00

500.00

B. Full Name (Last, First, Middle Initial)
GABRIEL SCHOENFELD

Mailing Address
2830 W. 17TH ST.

City State Zip Code
BROOKLYN NY 11224

000

Purpose of Disbursement:
COMMUNICATIONS CONSULTING FOR PAC

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

348956.79

Date M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 1 1

Transaction ID: H4.191

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1050.00

1050.00

2100.00

C. Full Name (Last, First, Middle Initial)
FLS CONNECT, LLC

Mailing Address
7300 HUDSON BLVD.

City State Zip Code
SAINT PAUL MN 55128

000

Purpose of Disbursement:
STRATEGY CONSULTING

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

363956.79

Date M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 1 1

Transaction ID: H4.192

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

7500.00

7500.00

15000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

8800.00

8800.00

17600.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 895 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
BETH MYERS

Mailing Address

201 BUCKMINSTER RD.

City State Zip Code
BROOKLINE MA 02455

000

Purpose of Disbursement:
STRATEGY CONSULTING

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

373956.79

Date M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 1 1

Transaction ID: H4.193

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

5000.00

5000.00

10000.00

B. Full Name (Last, First, Middle Initial)
PETER FLAHERTY

Mailing Address

8 ROCKMONT ROAD

City State Zip Code
BELMONT MA 02478

000

Purpose of Disbursement:
STRATEGY CONSULTING

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

378956.79

Date M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 1 1

Transaction ID: H4.194

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2500.00

2500.00

5000.00

C. Full Name (Last, First, Middle Initial)
MAR LEXHAY LLC

Mailing Address

C/O MARWICK LLC

City State Zip Code
LEXINGTON MA 02421

000

Purpose of Disbursement:
RENT/UTILITIES

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

385897.39

Date M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 1 1

Transaction ID: H4.195

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

3470.30

3470.30

6940.60

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

10970.30

10970.30

21940.60

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 896 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
SJZ LLC

Mailing Address

80 HAYDEN AVE.

 City State Zip Code
LEXINGTON MA 02421

000

 Purpose of Disbursement:
TRAVEL EXPENSE REIMBURSEMENT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

387824.46

Date 02 / 28 / 2011

Transaction ID: H4.196

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

963.54

963.53

1927.07

B. Full Name (Last, First, Middle Initial)
RED CURVE SOLUTIONS

Mailing Address

138 CONANT STREET

 City State Zip Code
BEVERLY MA 01915

000

 Purpose of Disbursement:
TREASURY AND COMPLIANCE CONSULTING
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402824.46

Date 02 / 28 / 2011

Transaction ID: H4.197

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

7500.00

7500.00

15000.00

C. Full Name (Last, First, Middle Initial)
BETH MYERS

Mailing Address

201 BUCKMINSTER RD.

 City State Zip Code
BROOKLINE MA 02455

000

 Purpose of Disbursement:
TRAVEL EXPENSE REIMBURSEMENT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

403102.01

Date 02 / 28 / 2011

Transaction ID: H4.198

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

138.78

138.77

277.55

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

8602.32

8602.30

17204.62

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 897 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
ADMINISTAFF COMPANIES

Mailing Address

19001 CRESCENT SPRINGS DRIVE

 City State Zip Code
KINGWOOD TX 77339

000

 Purpose of Disbursement:
PAYROLL TAXES/INSURANCE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

403167.56

 Date M M / D D / Y Y Y Y
0 3 / 0 4 / 2 0 1 1

Transaction ID: H4.199

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

32.78

32.77

65.55

B. Full Name (Last, First, Middle Initial)
ADMINISTAFF COMPANIES

Mailing Address

19001 CRESCENT SPRINGS DRIVE

 City State Zip Code
KINGWOOD TX 77339

000

 Purpose of Disbursement:
PAYROLL SERVICES
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

403415.30

 Date M M / D D / Y Y Y Y
0 3 / 0 4 / 2 0 1 1

Transaction ID: H4.200

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

123.87

123.87

247.74

C. Full Name (Last, First, Middle Initial)
HEPZIBAH SHADRACH

Mailing Address

45 CLEVELAND STREET

 City State Zip Code
ARLINGTON MA 02474

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

404001.91

 Date M M / D D / Y Y Y Y
0 3 / 0 4 / 2 0 1 1

Transaction ID: H4.201

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

293.31

293.30

586.61

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

449.96

449.94

899.90

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 898 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
AMERICAN EXPRESS

Mailing Address

PO BOX 2855

 City State Zip Code
NEW YORK NY 10116

000

 Purpose of Disbursement:
CREDIT CARD PAYMENT
Category/
Type

Activity or Event Identifier:

SEE CHARGES BELOW

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

423355.14

 Date MM / DD / YYYY
03 / 07 / 2011

Transaction ID: H4.202

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

9676.87

9676.36

19353.23

B. Full Name (Last, First, Middle Initial)
CPS

Mailing Address

2 ATLANTIC AVE

 City State Zip Code
BOSTON MA 02110

000

 Purpose of Disbursement:
TRAVEL EXPENSE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

 Date MM / DD / YYYY
03 / 07 / 2011

Transaction ID: H4.203

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

8.00

8.00

16.00

C. Full Name (Last, First, Middle Initial)
7-ELEVEN

Mailing Address

2711 NORTH HASKELL AVE

 City State Zip Code
DALLAS TX 75204

000

 Purpose of Disbursement:
TRAVEL EXPENSE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

 Date MM / DD / YYYY
03 / 07 / 2011

Transaction ID: H4.204

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

36.07

36.06

72.13

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

9676.87

9676.36

19353.23

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 899 / 970
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
 7-ELEVEN

Mailing Address

2711 NORTH HASKELL AVE

City	State	Zip Code
DALLAS	TX	75204

000

Purpose of Disbursement:
 TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

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D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.205

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.97		17.97		35.94

B. Full Name (Last, First, Middle Initial)
 ALL TAXI MANAGEMENT INC

Mailing Address

4125 36TH ST

City	State	Zip Code
LONG ISLAND CITY	NY	11101

000

Purpose of Disbursement:
 TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.206

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.10		6.10		12.20

C. Full Name (Last, First, Middle Initial)
 AMERICAN AIRLINES

Mailing Address

AMERICAN AIRLINES

City	State	Zip Code
TULSA	OK	74133

000

Purpose of Disbursement:
 TRAVEL

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

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D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.207

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
109.35		109.35		218.70

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 900 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
AMERICAN AIRLINES

Mailing Address

AMERICAN AIRLINES

 City State Zip Code
TULSA OK 74133

000

Purpose of Disbursement:
TRAVELCategory/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date 03 / 07 / 2011

Transaction ID: H4.208

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
496.25		496.25		992.50

B. Full Name (Last, First, Middle Initial)
AMERICAN AIRLINES

Mailing Address

AMERICAN AIRLINES

 City State Zip Code
TULSA OK 74133

000

Purpose of Disbursement:
TRAVELCategory/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date 03 / 07 / 2011

Transaction ID: H4.209

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
91.60		91.60		183.20

C. Full Name (Last, First, Middle Initial)
AMERICAN AIRLINES

Mailing Address

AMERICAN AIRLINES

 City State Zip Code
TULSA OK 74133

000

Purpose of Disbursement:
TRAVELCategory/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date 03 / 07 / 2011

Transaction ID: H4.210

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.00		5.00		10.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 901 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
AMTRAK

Mailing Address

60 MASSACHUSETTS AVE NE

City	State	Zip Code
WASHINGTON	DC	20002

000

Purpose of Disbursement:
TRAVEL

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.211

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
50.50		50.50		101.00

B. Full Name (Last, First, Middle Initial)
AMTRAK

Mailing Address

60 MASSACHUSETTS AVE NE

City	State	Zip Code
WASHINGTON	DC	20002

000

Purpose of Disbursement:
TRAVEL

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.212

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
82.00		82.00		164.00

C. Full Name (Last, First, Middle Initial)
AMTRAK

Mailing Address

60 MASSACHUSETTS AVE NE

City	State	Zip Code
WASHINGTON	DC	20002

000

Purpose of Disbursement:
TRAVEL

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.213

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
47.50		47.50		95.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 902 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
AMTRAK

Mailing Address

60 MASSACHUSETTS AVE NE

City State Zip Code
WASHINGTON DC 20002

000

Purpose of Disbursement:
TRAVEL

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date 03 / 07 / 2011

Transaction ID: H4.214

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
116.00		116.00		232.00

B. Full Name (Last, First, Middle Initial)
AMTRAK

Mailing Address

60 MASSACHUSETTS AVE NE

City State Zip Code
WASHINGTON DC 20002

000

Purpose of Disbursement:
TRAVEL

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date 03 / 07 / 2011

Transaction ID: H4.215

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.00		3.00		6.00

C. Full Name (Last, First, Middle Initial)
AT&T

Mailing Address

12525 CINGULAR WAY

City State Zip Code
ALPHARETTA GA 30004

000

Purpose of Disbursement:
DATA SERVICES

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date 03 / 07 / 2011

Transaction ID: H4.216

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.50		12.50		25.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 903 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
BEYOND CYBERWORLD

Mailing Address

13610 SW 76TH ST

City	State	Zip Code
MIAMI	FL	33183

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.217

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.18		3.17		6.35

B. Full Name (Last, First, Middle Initial)
THE BILTMORE HOTEL

Mailing Address

1200 ANASTASIA AVE

City	State	Zip Code
CORAL GABLES	FL	33134

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.218

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
202.84		202.83		405.67

C. Full Name (Last, First, Middle Initial)
BLUE RIBBON OF ARLINGTON

Mailing Address

908 MASSACHUSETTS AVE

City	State	Zip Code
ARLINGTON	MA	02476

000

Purpose of Disbursement:
MEETING EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.219

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
67.92		67.92		135.84

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 904 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
CMT BOSTON

 Mailing Address
4250 24TH ST

 City State Zip Code
LONG ISLAND CITY NY 11101

000

 Purpose of Disbursement:
TRAVEL EXPENSE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

 Date MM / DD / YYYY
03 / 07 / 2011

Transaction ID: H4.220

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.70		12.70		25.40

B. Full Name (Last, First, Middle Initial)
BOSTON HARBOR HOTEL

 Mailing Address
70 ROWES WHARF

 City State Zip Code
BOSTON MA 02110

000

 Purpose of Disbursement:
TRAVEL EXPENSE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

 Date MM / DD / YYYY
03 / 07 / 2011

Transaction ID: H4.221

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.19		3.19		6.38

C. Full Name (Last, First, Middle Initial)
CAFE RIO PARK CITY

 Mailing Address
1476 NEWPARK BLVD UNIT 1L

 City State Zip Code
SALT LAKE CITY UT 84098

000

 Purpose of Disbursement:
TRAVEL EXPENSE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

 Date MM / DD / YYYY
03 / 07 / 2011

Transaction ID: H4.222

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.50		5.50		11.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 905 / 970
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
 CELLINI RESTAURANT

Mailing Address
 65 E 54TH ST

City State Zip Code
 NEW YORK NY 10022

000

Purpose of Disbursement:
 TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date MM / DD / YYYY 03 / 07 / 2011

Transaction ID: H4.223

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
66.53		66.52		133.05

B. Full Name (Last, First, Middle Initial)
 CHECKERED CAB

Mailing Address
 103 FULKERSON ST

City State Zip Code
 WALTHAM MA 02141

000

Purpose of Disbursement:
 TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date MM / DD / YYYY 03 / 07 / 2011

Transaction ID: H4.224

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.88		7.87		15.75

C. Full Name (Last, First, Middle Initial)
 CHECKERED CAB

Mailing Address
 103 FULKERSON ST

City State Zip Code
 CAMBRIDGE MA 02141

000

Purpose of Disbursement:
 TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date MM / DD / YYYY 03 / 07 / 2011

Transaction ID: H4.225

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.50		13.50		27.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 906 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
CHEVRON

Mailing Address

2003 DIAMOND BLVD

City	State	Zip Code
CONCORD	CA	94520

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.226

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.85		15.85		31.70

B. Full Name (Last, First, Middle Initial)
THE COFFEE BEAN & TEA LEAF

Mailing Address

3377 LAS VEGAS BLVD S

City	State	Zip Code
LAS VEGAS	NV	89109

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.227

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.95		2.94		5.89

C. Full Name (Last, First, Middle Initial)
CONTINENTAL AIRLINES

Mailing Address

600 JEFFERSON ST

City	State	Zip Code
HOUSTON	TX	77002

000

Purpose of Disbursement:
TRAVEL

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.228

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
172.20		172.20		344.40

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 907 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
COSI

Mailing Address

2 SOUTH STA STE 10

City State Zip Code
BOSTON MA 02110

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
03 / 07 / 2011

Transaction ID: H4.229

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 5.55		<input type="text"/> 5.55		<input type="text"/> 11.10

B. Full Name (Last, First, Middle Initial)
COURTYARD BY MARRIOTT

Mailing Address

4843 W DOUGLAS CORRGAN WY

City State Zip Code
SALT LAKE CITY UT 84116

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
03 / 07 / 2011

Transaction ID: H4.230

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 74.95		<input type="text"/> 74.95		<input type="text"/> 149.90

C. Full Name (Last, First, Middle Initial)
COURTYARD BY MARRIOTT

Mailing Address

1901 N RAINBOW BLVD

City State Zip Code
LAS VEGAS NV 89108

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
03 / 07 / 2011

Transaction ID: H4.231

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 43.50		<input type="text"/> 43.50		<input type="text"/> 87.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 0.00		<input type="text"/> 0.00		<input type="text"/> 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 908 / 970
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
 COURTYARD BY MARRIOTT

Mailing Address

1901 N RAINBOW BLVD

City	State	Zip Code
LAS VEGAS	NV	89108

000

Purpose of Disbursement:
 TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date 03 / 07 / 2011

Transaction ID: H4.232

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
134.35		134.35		268.70

B. Full Name (Last, First, Middle Initial)
 CROWN BURGER

Mailing Address

377 E 200 S

City	State	Zip Code
SALT LAKE CITY	UT	84111

000

Purpose of Disbursement:
 TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date 03 / 07 / 2011

Transaction ID: H4.233

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.58		7.57		15.15

C. Full Name (Last, First, Middle Initial)
 DELTA AIR LINES

Mailing Address

ATLANTA AIRPORT

City	State	Zip Code
ATLANTA	GA	30344

000

Purpose of Disbursement:
 TRAVEL

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date 03 / 07 / 2011

Transaction ID: H4.234

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
168.85		168.85		337.70

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 909 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)

DELTA AIR LINES

Mailing Address

ATLANTA AIRPORT

City	State	Zip Code
ATLANTA	GA	30344

000

Purpose of Disbursement:
TRAVELCategory/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.235

[MEMO ITEM]

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

160.68

160.67

321.35

B. Full Name (Last, First, Middle Initial)

DELTA AIR LINES

Mailing Address

ATLANTA AIRPORT

City	State	Zip Code
DALLAS	TX	30344

000

Purpose of Disbursement:
TRAVELCategory/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.236

[MEMO ITEM]

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

257.05

257.05

514.10

C. Full Name (Last, First, Middle Initial)

DELTA AIR LINES

Mailing Address

ATLANTA AIRPORT

City	State	Zip Code
ATLANTA	GA	30344

000

Purpose of Disbursement:
TRAVELCategory/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.237

[MEMO ITEM]

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

245.95

245.95

491.90

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 910 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
DELTA AIR LINES

Mailing Address

ATLANTA AIRPORT

City	State	Zip Code
ATLANTA	GA	30344

000

Purpose of Disbursement:
TRAVEL

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.238

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
34.10		34.10		68.20

B. Full Name (Last, First, Middle Initial)
DELTA AIR LINES

Mailing Address

ATLANTA AIRPORT

City	State	Zip Code
ATLANTA	GA	30344

000

Purpose of Disbursement:
TRAVEL

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.239

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
57.36		57.35		114.71

C. Full Name (Last, First, Middle Initial)
DELTA AIR LINES

Mailing Address

ATLANTA AIRPORT

City	State	Zip Code
ATLANTA	GA	30344

000

Purpose of Disbursement:
TRAVEL

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.240

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
213.10		213.10		426.20

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 911 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)

DELTA AIR LINES

Mailing Address

ATLANTA AIRPORT

City	State	Zip Code
ATLANTA	GA	30344

000

Purpose of Disbursement:
TRAVELCategory/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.241

[MEMO ITEM]

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

165.20

165.20

330.40

B. Full Name (Last, First, Middle Initial)

DENVER AIRPORT

Mailing Address

DENVER INTL AIRPORT

City	State	Zip Code
DENVER	CO	80249

000

Purpose of Disbursement:
TRAVEL EXPENSECategory/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.242

[MEMO ITEM]

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

4.95

4.95

9.90

C. Full Name (Last, First, Middle Initial)

DIRECTV INC

Mailing Address

2230 E IMPERIAL HWY

City	State	Zip Code
EL SEGUNDO	CA	90245

000

Purpose of Disbursement:
SATELLITE TVCategory/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.243

[MEMO ITEM]

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

42.52

42.51

85.03

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 912 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
DENVER AIRPORT

Mailing Address

PO BOX 492009

City	State	Zip Code
DENVER	CO	80249

000

 Purpose of Disbursement:
TRAVEL EXPENSE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

 Date

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	7	/	2	0	1	1

Transaction ID: H4.244

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.00		5.00		10.00

B. Full Name (Last, First, Middle Initial)
DROPBOX

Mailing Address

153 KEARNY ST

City	State	Zip Code
SAN FRANCISCO	CA	94108

000

 Purpose of Disbursement:
SUBSCRIPTION FOR PAC
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

 Date

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	7	/	2	0	1	1

Transaction ID: H4.245

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.00		9.99		19.99

C. Full Name (Last, First, Middle Initial)
DUANE READE

Mailing Address

1889 BROADWAY

City	State	Zip Code
NEW YORK	NY	10023

000

 Purpose of Disbursement:
TRAVEL EXPENSE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

 Date

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	7	/	2	0	1	1

Transaction ID: H4.246

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.09		1.08		2.17

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 913 / 970
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
 DUNKIN DONUTS

Mailing Address

373 WALTHAM ST

City

LEXINGTON

State

MA

Zip Code

02421

000

Purpose of Disbursement:
 MEETING EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
 03 / 07 / 2011

Transaction ID: H4.247

[MEMO ITEM]

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

29.53

29.53

59.06

B. Full Name (Last, First, Middle Initial)
 EMPIRE HOTEL

Mailing Address

44 W 63RD ST

City

NEW YORK

State

NY

Zip Code

10023

000

Purpose of Disbursement:
 TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
 03 / 07 / 2011

Transaction ID: H4.248

[MEMO ITEM]

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3.27

3.26

6.53

C. Full Name (Last, First, Middle Initial)
 EMPIRE HOTEL

Mailing Address

44 W 63RD ST

City

NEW YORK

State

NY

Zip Code

10023

000

Purpose of Disbursement:
 TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
 03 / 07 / 2011

Transaction ID: H4.249

[MEMO ITEM]

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

395.42

395.42

790.84

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 914 / 970
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
 EVEREADY TRANSPORTATION

Mailing Address

130 LENOX AVE

City State Zip Code
 STAMFORD CT 06906

000

Purpose of Disbursement:
 TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
 03 / 07 / 2011

Transaction ID: H4.250

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 39.00		<input type="text"/> 39.00		<input type="text"/> 78.00

B. Full Name (Last, First, Middle Initial)
 FEDEX

Mailing Address

45 W CENTER ST

City State Zip Code
 OREM UT 84057

000

Purpose of Disbursement:
 TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
 03 / 07 / 2011

Transaction ID: H4.251

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 20.16		<input type="text"/> 20.15		<input type="text"/> 40.31

C. Full Name (Last, First, Middle Initial)
 FIVE GUYS

Mailing Address

TERMINAL C SPACE 3

City State Zip Code
 WASHINGTON DC 20001

000

Purpose of Disbursement:
 TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
 03 / 07 / 2011

Transaction ID: H4.252

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 2.28		<input type="text"/> 2.28		<input type="text"/> 4.56

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 0.00		<input type="text"/> 0.00		<input type="text"/> 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 915 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
FLAT BREADZ

Mailing Address

5757 PARADISE RD

City State Zip Code
LAS VEGAS NV 89111

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
03 / 07 / 2011

Transaction ID: H4.253

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 7.88		<input type="text"/> 7.87		<input type="text"/> 15.75

B. Full Name (Last, First, Middle Initial)
FOUR SEASONS

Mailing Address

99 E 52ND ST

City State Zip Code
NEW YORK NY 10022

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
03 / 07 / 2011

Transaction ID: H4.254

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 55.00		<input type="text"/> 55.00		<input type="text"/> 110.00

C. Full Name (Last, First, Middle Initial)
FOX SKY BOX BAR

Mailing Address

5757 WAYNE NEWTON BLVD

City State Zip Code
LAS VEGAS NV 89111

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
03 / 07 / 2011

Transaction ID: H4.255

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 16.09		<input type="text"/> 16.08		<input type="text"/> 32.17

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 0.00		<input type="text"/> 0.00		<input type="text"/> 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 916 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
FRESHENS

Mailing Address

2400 YANKEE CLIPPER DR

City State Zip Code
JACKSONVILLE FL 32218

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	7	/	2	0	1	1

Transaction ID: H4.256

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.19		2.18		4.37

B. Full Name (Last, First, Middle Initial)
GREEN MOUNTAIN COFFEE

Mailing Address

33 COFFEE LN

City State Zip Code
WATERBURY VT 05676

000

Purpose of Disbursement:
OFFICE SUPPLIES

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	7	/	2	0	1	1

Transaction ID: H4.257

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
40.24		40.24		80.48

C. Full Name (Last, First, Middle Initial)
GREEN MOUNTAIN COFFEE

Mailing Address

33 COFFEE LN

City State Zip Code
WATERBURY VT 05676

000

Purpose of Disbursement:
OFFICE SUPPLIES

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	7	/	2	0	1	1

Transaction ID: H4.258

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
46.81		46.80		93.61

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 917 / 970
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
 GBC BLUE

Mailing Address

5721 SE COLUMBIA WAY

City	State	Zip Code
VANCOUVER	WA	98661

000

Purpose of Disbursement:
 TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.259

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.71		4.71		9.42

B. Full Name (Last, First, Middle Initial)
 GBC BLUE

Mailing Address

5721 SE COLUMBIA WAY

City	State	Zip Code
VANCOUVER	WA	98661

000

Purpose of Disbursement:
 TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.260

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.19		6.18		12.37

C. Full Name (Last, First, Middle Initial)
 GBC BLUE

Mailing Address

5721 SE COLUMBIA WAY

City	State	Zip Code
VANCOUVER	WA	98661

000

Purpose of Disbursement:
 TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.261

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.41		7.40		14.81

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 918 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)

GBC BLUE

Mailing Address

5721 SE COLUMBIA WAY

City	State	Zip Code
VANCOUVER	WA	98661

000

Purpose of Disbursement:
TRAVEL EXPENSECategory/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.262

[MEMO ITEM]

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1.87

1.86

3.73

B. Full Name (Last, First, Middle Initial)

GBC BLUE

Mailing Address

5721 SE COLUMBIA WAY

City	State	Zip Code
VANCOUVER	WA	98661

000

Purpose of Disbursement:
TRAVEL EXPENSECategory/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.263

[MEMO ITEM]

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3.98

3.97

7.95

C. Full Name (Last, First, Middle Initial)

GBC BLUE

Mailing Address

5721 SE COLUMBIA WAY

City	State	Zip Code
VANCOUVER	WA	98661

000

Purpose of Disbursement:
TRAVEL EXPENSECategory/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.264

[MEMO ITEM]

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

5.45

5.44

10.89

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 919 / 970
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)

GBC BLUE

Mailing Address

5721 SE COLUMBIA WAY

City

VANCOUVER

State

WA

Zip Code

98661

000

Purpose of Disbursement:

TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y

Transaction ID: H4.265

[MEMO ITEM]

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

7.51

7.50

15.01

B. Full Name (Last, First, Middle Initial)

HERTZ

Mailing Address

14501 HERTZ QUAIL SPGS PK

City

OKLAHOMA CITY

State

OK

Zip Code

73134

000

Purpose of Disbursement:

TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y

Transaction ID: H4.266

[MEMO ITEM]

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

48.59

48.59

97.18

C. Full Name (Last, First, Middle Initial)

HERTZ

Mailing Address

14501 HERTZ QUAIL SPGS PK

City

OKLAHOMA CITY

State

OK

Zip Code

73134

000

Purpose of Disbursement:

TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y

Transaction ID: H4.267

[MEMO ITEM]

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

51.01

51.01

102.02

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 920 / 970
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
 HERTZ

Mailing Address

14501 HERTZ QUAIL SPGS PK

City	State	Zip Code
OKLAHOMA CITY	OK	73134

000

Purpose of Disbursement:
 TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.268

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
366.68		366.67		733.35

B. Full Name (Last, First, Middle Initial)
 HERTZ

Mailing Address

14501 HERTZ QUAIL SPGS PK

City	State	Zip Code
OKLAHOMA CITY	OK	73134

000

Purpose of Disbursement:
 TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.269

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
132.35		132.35		264.70

C. Full Name (Last, First, Middle Initial)
 HERTZ

Mailing Address

14501 HERTZ QUAIL SPGS PK

City	State	Zip Code
OKLAHOMA CITY	OK	73134

000

Purpose of Disbursement:
 TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.270

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
397.45		397.45		794.90

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 921 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
HILTON

Mailing Address

755 CROSSOVER LN

City State Zip Code
MEMPHIS TN 38117

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
03 / 07 / 2011

Transaction ID: H4.271

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 68.10		<input type="text"/> 68.10		<input type="text"/> 136.20

B. Full Name (Last, First, Middle Initial)
HILTON

Mailing Address

40 DALTON ST

City State Zip Code
BOSTON MA 02115

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
03 / 07 / 2011

Transaction ID: H4.272

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 117.14		<input type="text"/> 117.13		<input type="text"/> 234.27

C. Full Name (Last, First, Middle Initial)
HILTON

Mailing Address

40 DALTON ST

City State Zip Code
BOSTON MA 02115

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
03 / 07 / 2011

Transaction ID: H4.273

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 139.63		<input type="text"/> 139.63		<input type="text"/> 279.26

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 0.00		<input type="text"/> 0.00		<input type="text"/> 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 922 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
NATL AIR VENTURES

Mailing Address

200 TERMINAL B

City	State	Zip Code
BOSTON	MA	02128

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.274

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.12		2.12		4.24

B. Full Name (Last, First, Middle Initial)
HUDSON NEWS INC

Mailing Address

100 INTERNATIONAL DR

City	State	Zip Code
JACKSON	MS	39208

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.275

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.14		2.13		4.27

C. Full Name (Last, First, Middle Initial)
US AIRWAYS

Mailing Address

4000 E. SKY HARBOR BLVD.

City	State	Zip Code
PHOENIX	AZ	85034

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.276

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.00		2.00		4.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 923 / 970
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
 JETBLUE AIRWAYS

Mailing Address

6322 S 3000 E STE G10

City	State	Zip Code
SALT LAKE CITY	UT	84121

000

Purpose of Disbursement:
 TRAVEL

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.277

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
102.85		102.85		205.70

B. Full Name (Last, First, Middle Initial)
 JETBLUE AIRWAYS

Mailing Address

6322 S 3000 E STE G10

City	State	Zip Code
SALT LAKE CITY	UT	84121

000

Purpose of Disbursement:
 TRAVEL

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.278

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
216.85		216.85		433.70

C. Full Name (Last, First, Middle Initial)
 JETBLUE AIRWAYS

Mailing Address

6322 S 3000 E STE G10

City	State	Zip Code
SALT LAKE CITY	UT	84121

000

Purpose of Disbursement:
 TRAVEL

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.279

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
27.50		27.50		55.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 924 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
JETBLUE AIRWAYS

Mailing Address

6322 S 3000 E STE G10

City	State	Zip Code
SALT LAKE CITY	UT	84121

000

Purpose of Disbursement:
TRAVEL

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.280

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
441.70		441.70		883.40

B. Full Name (Last, First, Middle Initial)
JETBLUE AIRWAYS

Mailing Address

6322 S 3000 E STE G10

City	State	Zip Code
SALT LAKE CITY	UT	84121

000

Purpose of Disbursement:
TRAVEL

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.281

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
95.70		95.70		191.40

C. Full Name (Last, First, Middle Initial)
JETBLUE AIRWAYS

Mailing Address

6322 S 3000 E STE G10

City	State	Zip Code
SALT LAKE CITY	UT	84121

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.282

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.00		2.99		5.99

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 925 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
JETBLUE AIRWAYS

Mailing Address

6322 S 3000 E STE G10

 City State Zip Code
SALT LAKE CITY UT 84121

000

 Purpose of Disbursement:
TRAVEL EXPENSE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

 Date MM / DD / YYYY
03 / 07 / 2011

Transaction ID: H4.283

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.00		2.99		5.99

B. Full Name (Last, First, Middle Initial)
JTL MANAGEMENT INC

Mailing Address

3616 SKILLMAN AVE

 City State Zip Code
LONG ISLAND CITY NY 11101

000

 Purpose of Disbursement:
TRAVEL EXPENSE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

 Date MM / DD / YYYY
03 / 07 / 2011

Transaction ID: H4.284

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.10		4.10		8.20

C. Full Name (Last, First, Middle Initial)
LAZ PARKING

Mailing Address

ROWES WHARF

 City State Zip Code
BOSTON MA 02110

000

 Purpose of Disbursement:
TRAVEL EXPENSE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

 Date MM / DD / YYYY
03 / 07 / 2011

Transaction ID: H4.285

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.50		17.50		35.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 926 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
LE PAIN QUOTIDIEN

Mailing Address

111 WEST 50TH STREET

City State Zip Code
NEW YORK NY 10020

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	7	/	2	0	1	1

Transaction ID: H4.286

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.24		3.24		6.48

B. Full Name (Last, First, Middle Initial)
LEGAL SEA FOODS

Mailing Address

LOGON AIRPORT

City State Zip Code
BOSTON MA 02128

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	7	/	2	0	1	1

Transaction ID: H4.287

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.63		7.63		15.26

C. Full Name (Last, First, Middle Initial)
LEGAL TEST KITCHEN

Mailing Address

23 TERMINAL A

City State Zip Code
BOSTON MA 02128

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	7	/	2	0	1	1

Transaction ID: H4.288

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.61		1.60		3.21

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 927 / 970
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
 LEXIS-NEXIS

Mailing Address

9393 SPRINGBORO PIKE

City State Zip Code
 MIAMISBURG OH 45342

000

Purpose of Disbursement:
 SUBSCRIPTION FOR PAC

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
 03 / 07 / 2011

Transaction ID: H4.289

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 300.00		<input type="text"/> 300.00		<input type="text"/> 600.00

B. Full Name (Last, First, Middle Initial)
 LITTLE AMERICA HOTEL

Mailing Address

500 S MAIN ST

City State Zip Code
 SALT LAKE CITY UT 84101

000

Purpose of Disbursement:
 TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
 03 / 07 / 2011

Transaction ID: H4.290

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 55.80		<input type="text"/> 55.79		<input type="text"/> 111.59

C. Full Name (Last, First, Middle Initial)
 MARRIOTT

Mailing Address

630 CLEARWATER PARK RD

City State Zip Code
 WEST PALM BEACH FL 33401

000

Purpose of Disbursement:
 TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
 03 / 07 / 2011

Transaction ID: H4.291

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 143.75		<input type="text"/> 143.74		<input type="text"/> 287.49

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 0.00		<input type="text"/> 0.00		<input type="text"/> 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 928 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)

MARRIOTT

Mailing Address

1895 SIDEWINDER DR

 City State Zip Code
 PARK CITY UT 84060

000

 Purpose of Disbursement:
 TRAVEL EXPENSE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

 Date MM / DD / YYYY
 03 / 07 / 2011

Transaction ID: H4.292

[MEMO ITEM]

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

253.98

253.98

507.96

B. Full Name (Last, First, Middle Initial)

MARRIOTT

Mailing Address

1895 SIDEWINDER DR

 City State Zip Code
 PARK CITY UT 84060

000

 Purpose of Disbursement:
 TRAVEL EXPENSE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

 Date MM / DD / YYYY
 03 / 07 / 2011

Transaction ID: H4.293

[MEMO ITEM]

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

5.00

5.00

10.00

C. Full Name (Last, First, Middle Initial)

MARRIOTT

Mailing Address

1895 SIDEWINDER DR

 City State Zip Code
 PARK CITY UT 84060

000

 Purpose of Disbursement:
 TRAVEL EXPENSE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

 Date MM / DD / YYYY
 03 / 07 / 2011

Transaction ID: H4.294

[MEMO ITEM]

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

115.95

115.94

231.89

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 929 / 970
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
 MARRIOTT

Mailing Address

1895 SIDEWINDER DR

City	State	Zip Code
PARK CITY	UT	84060

000

Purpose of Disbursement:
 TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.295

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.98		3.98		7.96

B. Full Name (Last, First, Middle Initial)
 MCCARRAN INTL AIRPORT

Mailing Address

5757 WAYNE NEWTON BLVD

City	State	Zip Code
LAS VEGAS	NV	89111

000

Purpose of Disbursement:
 TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.296

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.00		1.00		2.00

C. Full Name (Last, First, Middle Initial)
 MEMPHIS AIRPORT

Mailing Address

2491 WINCHESTER RD

City	State	Zip Code
MEMPHIS	TN	38116

000

Purpose of Disbursement:
 TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.297

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.60		5.59		11.19

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 930 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
NEILLIOS

Mailing Address

53 BEDFORD ST

City

LEXINGTON

State

MA

Zip Code

02420

000

Purpose of Disbursement:
MEETING EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y

Transaction ID: H4.298

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 32.85		<input type="text"/> 32.85		<input type="text"/> 65.70

B. Full Name (Last, First, Middle Initial)
INTERCONTINENTAL

Mailing Address

111 E 48TH ST

City

NEW YORK

State

NY

Zip Code

10017

000

Purpose of Disbursement:
TRAVEL

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y

Transaction ID: H4.299

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 18.25		<input type="text"/> 18.24		<input type="text"/> 36.49

C. Full Name (Last, First, Middle Initial)
MCGUINNESS MANAGEMENT

Mailing Address

330 MCGUINNESS BLVD

City

BROOKLYN

State

NY

Zip Code

11222

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y

Transaction ID: H4.300

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 9.66		<input type="text"/> 9.66		<input type="text"/> 19.32

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 0.00		<input type="text"/> 0.00		<input type="text"/> 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<input type="text"/>		<input type="text"/>		<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 931 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
DOWNTOWN TAXI MGMT INC

Mailing Address

330 BUTLER ST

City State Zip Code
BROOKLYN NY 11217

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
03 / 07 / 2011

Transaction ID: H4.301

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 6.36		<input type="text"/> 6.36		<input type="text"/> 12.72

B. Full Name (Last, First, Middle Initial)
DOWNTOWN TAXI MGMT INC

Mailing Address

330 BUTLER ST

City State Zip Code
BROOKLYN NY 11217

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
03 / 07 / 2011

Transaction ID: H4.302

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 4.50		<input type="text"/> 4.50		<input type="text"/> 9.00

C. Full Name (Last, First, Middle Initial)
ARTHUR CAB LEASING CORP

Mailing Address

25 11 41ST AVE

City State Zip Code
LONG ISLAND CITY NY 11101

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
03 / 07 / 2011

Transaction ID: H4.303

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 4.55		<input type="text"/> 4.55		<input type="text"/> 9.10

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 0.00		<input type="text"/> 0.00		<input type="text"/> 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 932 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
UNITED MGMT GROUP INC

Mailing Address

43-10 39TH STREET

 City State Zip Code
LONG ISLAND CITY NY 11104

000

 Purpose of Disbursement:
TRAVEL EXPENSE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date 03 / 07 / 2011

Transaction ID: H4.304

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.50		6.50		13.00

B. Full Name (Last, First, Middle Initial)
GREEN APPLE MANAGEMENT CO

Mailing Address

3420 31ST ST

 City State Zip Code
ASTORIA NY 11106

000

 Purpose of Disbursement:
TRAVEL EXPENSE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date 03 / 07 / 2011

Transaction ID: H4.305

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.68		4.68		9.36

C. Full Name (Last, First, Middle Initial)
OFFICEMAX

Mailing Address

3605 WARRENSVILLE CTR RD

 City State Zip Code
BEACHWOOD OH 44122

000

 Purpose of Disbursement:
OFFICE SUPPLIES
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date 03 / 07 / 2011

Transaction ID: H4.306

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
153.90		153.90		307.80

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 933 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
CIBO MARKET

Mailing Address

1 HARBORSIDE DR

City	State	Zip Code
BOSTON	MA	02128

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.307

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.30		7.29		14.59

B. Full Name (Last, First, Middle Initial)
PALM RESTAURANT

Mailing Address

3500 LAS VEGAS BLVD S

City	State	Zip Code
LAS VEGAS	NV	89109

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.308

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.30		20.29		40.59

C. Full Name (Last, First, Middle Initial)
PALM RESTAURANT

Mailing Address

3500 LAS VEGAS BLVD S

City	State	Zip Code
LAS VEGAS	NV	89109

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.309

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
128.51		128.50		257.01

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 934 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
PANERA BREAD

Mailing Address

1100 LEXINGTON ST

City	State	Zip Code
WALTHAM	MA	02452

000

Purpose of Disbursement:
MEETING EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.310

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.43		11.43		22.86

B. Full Name (Last, First, Middle Initial)
PANERA BREAD

Mailing Address

1100 LEXINGTON ST

City	State	Zip Code
WALTHAM	MA	02452

000

Purpose of Disbursement:
MEETING EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.311

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
123.50		123.50		247.00

C. Full Name (Last, First, Middle Initial)
PANERA BREAD

Mailing Address

1100 LEXINGTON ST

City	State	Zip Code
WALTHAM	MA	02452

000

Purpose of Disbursement:
MEETING EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.312

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.19		9.19		18.38

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 935 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
PANERA BREAD

Mailing Address

1100 LEXINGTON ST

City	State	Zip Code
WALTHAM	MA	02452

000

 Purpose of Disbursement:
MEETING EXPENSE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

 Date

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	7	/	2	0	1	1

Transaction ID: H4.313

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.18		9.18		18.36

B. Full Name (Last, First, Middle Initial)
POPEYES CHICKEN

Mailing Address

HARTSFIELD ATLANTA ARPT

City	State	Zip Code
ATLANTA	GA	30320

000

 Purpose of Disbursement:
TRAVEL EXPENSE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

 Date

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	7	/	2	0	1	1

Transaction ID: H4.314

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.03		4.02		8.05

C. Full Name (Last, First, Middle Initial)
MASS PORT

Mailing Address

1 HARBORSIDE DR

City	State	Zip Code
BOSTON	MA	02128

000

 Purpose of Disbursement:
TRAVEL EXPENSE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

 Date

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	7	/	2	0	1	1

Transaction ID: H4.315

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
42.00		42.00		84.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE	936 / 970
FOR LINE 21a OF FORM 3X	

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
 MASS PORT

Mailing Address

1 HARBORSIDE DR STE 200S

City	State	Zip Code
BOSTON	MA	02128

000

Purpose of Disbursement:
TRAVEL EXPENSECategory/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.316

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
38.50		38.50		77.00

B. Full Name (Last, First, Middle Initial)
 QUIZNO'S

Mailing Address

2400 YANKEE CLIPPER DR#26

City	State	Zip Code
JACKSONVILLE	FL	32218

000

Purpose of Disbursement:
TRAVEL EXPENSECategory/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.317

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.82		10.81		21.63

C. Full Name (Last, First, Middle Initial)
 ROADHOUSE 66

Mailing Address

3400 SKY HARBOR BLVD

City	State	Zip Code
PHOENIX	AZ	85034

000

Purpose of Disbursement:
TRAVEL EXPENSECategory/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.318

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.56		7.55		15.11

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 937 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
SQUATTERS AIRPORT PUB

Mailing Address

147 W BROADWAY

 City State Zip Code
SALT LAKE CITY UT 84101

000

 Purpose of Disbursement:
TRAVEL EXPENSE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date 03 / 07 / 2011

Transaction ID: H4.319

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.47		2.47		4.94

B. Full Name (Last, First, Middle Initial)
STAPLES

Mailing Address

1070 LEXINGTON ST

 City State Zip Code
WALTHAM MA 02452

000

 Purpose of Disbursement:
OFFICE SUPPLIES
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date 03 / 07 / 2011

Transaction ID: H4.320

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
42.22		42.22		84.44

C. Full Name (Last, First, Middle Initial)
STAPLES

Mailing Address

1070 LEXINGTON ST

 City State Zip Code
WALTHAM MA 02452

000

 Purpose of Disbursement:
OFFICE SUPPLIES
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date 03 / 07 / 2011

Transaction ID: H4.321

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.96		16.96		33.92

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 938 / 970
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
 STAPLES

Mailing Address

1070 LEXINGTON ST

City	State	Zip Code
WALTHAM	MA	02452

000

Purpose of Disbursement:
 OFFICE SUPPLIES

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.322

[MEMO ITEM]

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

10.59

10.58

21.17

B. Full Name (Last, First, Middle Initial)
 STAPLES

Mailing Address

1070 LEXINGTON ST

City	State	Zip Code
WALTHAM	MA	02452

000

Purpose of Disbursement:
 OFFICE SUPPLIES

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.323

[MEMO ITEM]

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3.61

3.60

7.21

C. Full Name (Last, First, Middle Initial)
 STAPLES

Mailing Address

186 ALEWIFE BROOK PKWY

City	State	Zip Code
CAMBRIDGE	MA	02138

000

Purpose of Disbursement:
 OFFICE SUPPLIES

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.324

[MEMO ITEM]

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

14.87

14.87

29.74

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 939 / 970
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
 STAPLES

Mailing Address

6543 LANDMARK DR

City	State	Zip Code
SALT LAKE CITY	UT	84098

000

Purpose of Disbursement:
 TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.325

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.32		5.32		10.64

B. Full Name (Last, First, Middle Initial)
 STAPLES

Mailing Address

6543 LANDMARK DR

City	State	Zip Code
SALT LAKE CITY	UT	84098

000

Purpose of Disbursement:
 TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.326

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.79		30.79		61.58

C. Full Name (Last, First, Middle Initial)
 STARBUCKS

Mailing Address

815 POST RD

City	State	Zip Code
DARIEN	CT	06820

000

Purpose of Disbursement:
 TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.327

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.33		1.32		2.65

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 940 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
STARBUCKS

Mailing Address

1889 BROADWAY

City State Zip Code
NEW YORK NY 10023

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
03 / 07 / 2011

Transaction ID: H4.328

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 2.42		<input type="text"/> 2.42		<input type="text"/> 4.84

B. Full Name (Last, First, Middle Initial)
STARBUCKS

Mailing Address

1889 BROADWAY

City State Zip Code
NEW YORK NY 10023

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
03 / 07 / 2011

Transaction ID: H4.329

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 2.86		<input type="text"/> 2.85		<input type="text"/> 5.71

C. Full Name (Last, First, Middle Initial)
SUBWAY

Mailing Address

30 STATION PLACE

City State Zip Code
STAMFORD CT 06901

000

Purpose of Disbursement:
TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
03 / 07 / 2011

Transaction ID: H4.330

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 3.10		<input type="text"/> 3.09		<input type="text"/> 6.19

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 0.00		<input type="text"/> 0.00		<input type="text"/> 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 941 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
SWEET TOMATOES

Mailing Address

2080 N RAINBOW BLVD

 City State Zip Code
LAS VEGAS NV 89108

000

 Purpose of Disbursement:
TRAVEL EXPENSE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date 03 / 07 / 2011

Transaction ID: H4.331

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.20		10.19		20.39

B. Full Name (Last, First, Middle Initial)
TACO BELL

Mailing Address

4751 E SHEA BLVD

 City State Zip Code
PHOENIX AZ 85028

000

 Purpose of Disbursement:
TRAVEL EXPENSE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date 03 / 07 / 2011

Transaction ID: H4.332

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.36		1.35		2.71

C. Full Name (Last, First, Middle Initial)
TACOCINA

Mailing Address

714 9TH AVENUE

 City State Zip Code
NEW YORK NY 10019

000

 Purpose of Disbursement:
TRAVEL EXPENSE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date 03 / 07 / 2011

Transaction ID: H4.333

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
45.08		45.08		90.16

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 942 / 970
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
 TIJUANA FLATS

Mailing Address

1619 E SUNRISE BLVD

City	State	Zip Code
FORT LAUDERDALE	FL	33304

000

Purpose of Disbursement:
 TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.334

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.44		3.43		6.87

B. Full Name (Last, First, Middle Initial)
 TELEFLORA

Mailing Address

3737 NW 34TH STREET

City	State	Zip Code
OKLAHOMA CITY	OK	73112

000

Purpose of Disbursement:
 FLORAL ARRANGEMENT

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.335

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
56.25		56.25		112.50

C. Full Name (Last, First, Middle Initial)
 TELEFLORA

Mailing Address

3737 NW 34TH STREET

City	State	Zip Code
OKLAHOMA CITY	OK	73112

000

Purpose of Disbursement:
 FLORAL ARRANGEMENT

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.336

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
68.75		68.75		137.50

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 943 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
TELEFLORA

Mailing Address

3737 NW 34TH STREET

 City State Zip Code
OKLAHOMA CITY OK 73112

000

 Purpose of Disbursement:
FLORAL ARRANGEMENT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date 03 / 07 / 2011

Transaction ID: H4.337

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
60.38		60.37		120.75

B. Full Name (Last, First, Middle Initial)
TRAVEL TRADERS

Mailing Address

111 E 48TH ST

 City State Zip Code
NEW YORK NY 10017

000

 Purpose of Disbursement:
TRAVEL EXPENSE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date 03 / 07 / 2011

Transaction ID: H4.338

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.26		3.26		6.52

C. Full Name (Last, First, Middle Initial)
TTI TECHNOLOGIES INC

Mailing Address

891 AMSTERDAM AVE

 City State Zip Code
NEW YORK NY 10025

000

 Purpose of Disbursement:
TRAVEL EXPENSE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date 03 / 07 / 2011

Transaction ID: H4.339

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.50		1.50		3.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 944 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
UNITED AIRLINES

Mailing Address

1200 E ALGONQUIN RD

City State Zip Code

ELK GROVE VILLAGE IL

60007

000

Purpose of Disbursement:
TRAVEL

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	7	/	2	0	1	1

Transaction ID: H4.340

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
39.00		39.00		78.00

B. Full Name (Last, First, Middle Initial)
UNITED AIRLINES

Mailing Address

1200 E ALGONQUIN RD

City State Zip Code

ELK GROVE VILLAGE IL

60007

000

Purpose of Disbursement:
TRAVEL

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	7	/	2	0	1	1

Transaction ID: H4.341

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
107.85		107.85		215.70

C. Full Name (Last, First, Middle Initial)
UNITED AIRLINES

Mailing Address

1200 E ALGONQUIN RD

City State Zip Code

ELK GROVE VILLAGE IL

60007

000

Purpose of Disbursement:
TRAVEL

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	7	/	2	0	1	1

Transaction ID: H4.342

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
122.85		122.85		245.70

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 945 / 970
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
 UPPER CRUST

Mailing Address

41 WALTHAM ST

City	State	Zip Code
LEXINGTON	MA	02421

000

Purpose of Disbursement:
 MEETING EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.343

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
28.76		28.75		57.51

B. Full Name (Last, First, Middle Initial)
 US AIRWAYS

Mailing Address

4000 E SKY HARBOR BLVD

City	State	Zip Code
PHOENIX	AZ	85034

000

Purpose of Disbursement:
 TRAVEL

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.344

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
62.35		62.35		124.70

C. Full Name (Last, First, Middle Initial)
 US AIRWAYS

Mailing Address

4000 E SKY HARBOR BLVD

City	State	Zip Code
PHOENIX	AZ	85034

000

Purpose of Disbursement:
 TRAVEL

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.345

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
102.85		102.85		205.70

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 946 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
US AIRWAYS

Mailing Address

4000 E SKY HARBOR BLVD

City	State	Zip Code
PHOENIX	AZ	85034

000

Purpose of Disbursement:
TRAVEL

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.346

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
39.50		39.50		79.00

B. Full Name (Last, First, Middle Initial)
US AIRWAYS

Mailing Address

4000 E SKY HARBOR BLVD

City	State	Zip Code
PHOENIX	AZ	85034

000

Purpose of Disbursement:
TRAVEL

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.347

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
165.20		165.20		330.40

C. Full Name (Last, First, Middle Initial)
US AIRWAYS

Mailing Address

4000 E SKY HARBOR BLVD

City	State	Zip Code
PHOENIX	AZ	85034

000

Purpose of Disbursement:
TRAVEL

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.348

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.00		5.00		10.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 947 / 970
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
 US AIRWAYS

Mailing Address

4000 E SKY HARBOR BLVD

City	State	Zip Code
PHOENIX	AZ	85034

000

Purpose of Disbursement:
 TRAVEL

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.349

[MEMO ITEM]

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

189.10

189.10

378.20

B. Full Name (Last, First, Middle Initial)
 US AIRWAYS

Mailing Address

4000 E SKY HARBOR BLVD

City	State	Zip Code
PHOENIX	AZ	85034

000

Purpose of Disbursement:
 TRAVEL

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.350

[MEMO ITEM]

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

216.85

216.85

433.70

C. Full Name (Last, First, Middle Initial)
 USPS

Mailing Address

25 DORCHESTER AVE

City	State	Zip Code
BOSTON	MA	02205

000

Purpose of Disbursement:
 POSTAGE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.351

[MEMO ITEM]

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

98.50

98.50

197.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 948 / 970
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
 USPS

Mailing Address

25 DORCHESTER AVE

City	State	Zip Code
BOSTON	MA	02205

000

Purpose of Disbursement:
 POSTAGE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.352

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.85		2.85		5.70

B. Full Name (Last, First, Middle Initial)
 USPS

Mailing Address

25 DORCHESTER AVE

City	State	Zip Code
BOSTON	MA	02205

000

Purpose of Disbursement:
 POSTAGE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.353

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.95		16.95		33.90

C. Full Name (Last, First, Middle Initial)
 USPS

Mailing Address

25 DORCHESTER AVE

City	State	Zip Code
BOSTON	MA	02205

000

Purpose of Disbursement:
 POSTAGE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M	M
0	3

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.354

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
27.45		27.45		54.90

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY

PAGE 949 / 970
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
 USPS

Mailing Address

25 DORCHESTER AVE

City State Zip Code
 BOSTON MA 02205

000

Purpose of Disbursement:
 POSTAGE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
 03 / 07 / 2011

Transaction ID: H4.355

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 54.90		<input type="text"/> 54.90		<input type="text"/> 109.80

B. Full Name (Last, First, Middle Initial)
 WFM WILD OATS

Mailing Address

1748 REDSTONE CENTER DR

City State Zip Code
 SALT LAKE CITY UT 84098

000

Purpose of Disbursement:
 TRAVEL EXPENSE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
 03 / 07 / 2011

Transaction ID: H4.356

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 11.00		<input type="text"/> 11.00		<input type="text"/> 22.00

C. Full Name (Last, First, Middle Initial)
 GOTOWEBINAR

Mailing Address

7414 HOLLISTER AVENUE

City State Zip Code
 GOLETA CA 93117

000

Purpose of Disbursement:
 WEB SERVICE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date M M / D D / Y Y Y Y
 03 / 07 / 2011

Transaction ID: H4.357

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 49.50		<input type="text"/> 49.50		<input type="text"/> 99.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 0.00		<input type="text"/> 0.00		<input type="text"/> 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 950 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
YAHOO TRAVEL

Mailing Address

3150 SABRE DR

 City State Zip Code
SOUTHLAKE TX 76092

000

 Purpose of Disbursement:
TRAVEL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

 Date MM / DD / YYYY
03 / 07 / 2011

Transaction ID: H4.358

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.47		13.47		26.94

B. Full Name (Last, First, Middle Initial)
YANGTZE RIVER RESTAURANT

Mailing Address

21 DEPOT SQ

 City State Zip Code
LEXINGTON MA 02420

000

 Purpose of Disbursement:
MEETING EXPENSE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

 Date MM / DD / YYYY
03 / 07 / 2011

Transaction ID: H4.359

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
114.73		114.73		229.46

C. Full Name (Last, First, Middle Initial)
YANKEE CLIPPER BAR

Mailing Address

81 MARINE AIR TERMINAL

 City State Zip Code
FLUSHING NY 11371

000

 Purpose of Disbursement:
TRAVEL EXPENSE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

 Date MM / DD / YYYY
03 / 07 / 2011

Transaction ID: H4.360

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.23		6.23		12.46

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 951 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
YELLOW CAB DRIVERS ASSOC

Mailing Address

435 S 600 W

 City State Zip Code
SALT LAKE CITY UT 84101

000

 Purpose of Disbursement:
TRAVEL EXPENSE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

 Date MM / DD / YYYY
03 / 07 / 2011

Transaction ID: H4.361

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
41.85		41.85		83.70

B. Full Name (Last, First, Middle Initial)
THE STEVENS & SCHRIEFER GROUP

Mailing Address

1117 EAST WEST HIGHWAY

 City State Zip Code
SILVER SPRINGS MD 20910

000

 Purpose of Disbursement:
STRATEGY CONSULTING
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

 Date MM / DD / YYYY
03 / 09 / 2011

Transaction ID: H4.362

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52500.00		52500.00		105000.00

C. Full Name (Last, First, Middle Initial)
SJZ LLC

Mailing Address

80 HAYDEN AVE.

 City State Zip Code
LEXINGTON MA 02421

000

 Purpose of Disbursement:
OFFICE EXPENSE REIMBURSEMENT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

 Date MM / DD / YYYY
03 / 09 / 2011

Transaction ID: H4.363

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3050.45		3050.45		6100.90

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
55550.45		55550.45		111100.90

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 952 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
ADMINISTAFF COMPANIES

Mailing Address

19001 CRESCENT SPRINGS DRIVE

City	State	Zip Code
KINGWOOD	TX	77339

000

 Purpose of Disbursement:
PAYROLL TAXES/INSURANCE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

543683.79

 Date

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	4	/	2	0	1	1

Transaction ID: H4.364

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

4613.88

4613.87

9227.75

B. Full Name (Last, First, Middle Initial)
ADMINISTAFF COMPANIES

Mailing Address

19001 CRESCENT SPRINGS DRIVE

City	State	Zip Code
KINGWOOD	TX	77339

000

 Purpose of Disbursement:
PAYROLL SERVICES
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

551859.47

 Date

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	4	/	2	0	1	1

Transaction ID: H4.365

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

4087.84

4087.84

8175.68

C. Full Name (Last, First, Middle Initial)
LANHEE CHEN

Mailing Address

30 CAMBRIDGE PARK DR. #6132

City	State	Zip Code
CAMBRIDGE	MA	02140

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

556355.74

 Date

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	4	/	2	0	1	1

Transaction ID: H4.366

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

2248.14

2248.13

4496.27

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

10949.86

10949.84

21899.70

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 953 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
ERIC FEHRNSTROM

Mailing Address

83 RISLEY ROAD

 City State Zip Code
CHESTNUT HILL MA 02467

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

560934.18

 Date MM / DD / YYYY
03 / 14 / 2011

Transaction ID: H4.367

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2289.22

2289.22

4578.44

B. Full Name (Last, First, Middle Initial)
KELLI HARRISON

Mailing Address

21 CENTURY STREET APT. 1

 City State Zip Code
MEDFORD MA 02155

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

562257.04

 Date MM / DD / YYYY
03 / 14 / 2011

Transaction ID: H4.368

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

661.43

661.43

1322.86

C. Full Name (Last, First, Middle Initial)
GARRETT JACKSON

Mailing Address

1 LEIGHTON STREET APT. 301

 City State Zip Code
CAMBRIDGE MA 02141

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

563722.16

 Date MM / DD / YYYY
03 / 14 / 2011

Transaction ID: H4.369

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

732.56

732.56

1465.12

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

3683.21

3683.21

7366.42

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 954 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
BRUCE NILSON

Mailing Address

40 KINGS WAY, #401A APT.1

 City State Zip Code
WALTHAM MA 02451

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

564975.83

 Date MM / DD / YYYY
03 / 14 / 2011

Transaction ID: H4.370

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
626.84		626.83		1253.67

B. Full Name (Last, First, Middle Initial)
MATTHEW RHOADES

Mailing Address

90-92 REVERE STREET

 City State Zip Code
BOSTON MA 02114

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

569100.63

 Date MM / DD / YYYY
03 / 14 / 2011

Transaction ID: H4.371

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2062.40		2062.40		4124.80

C. Full Name (Last, First, Middle Initial)
WILL RITTER

Mailing Address

11 CHAMPNEY PLACE

 City State Zip Code
BOSTON MA 02114

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

570624.57

 Date MM / DD / YYYY
03 / 14 / 2011

Transaction ID: H4.372

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
761.97		761.97		1523.94

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3451.21		3451.20		6902.41

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 955 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
JACQUELINE ROONEY

Mailing Address

9 COMMONWEALTH AVE. APT. 1A

 City State Zip Code
BOSTON MA 02116

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

571662.21

 Date MM / DD / YYYY
03 / 14 / 2011

Transaction ID: H4.373

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
518.82		518.82		1037.64

B. Full Name (Last, First, Middle Initial)
LOUIS TAVARES

Mailing Address

42 HAZEN STREET

 City State Zip Code
CHELMSFORD MA 01824

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

575170.05

 Date MM / DD / YYYY
03 / 14 / 2011

Transaction ID: H4.374

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1753.92		1753.92		3507.84

C. Full Name (Last, First, Middle Initial)
FLS CONNECT, LLC

Mailing Address

7300 HUDSON BLVD. SUITE 270

 City State Zip Code
SAINT PAUL MN 55128

000

 Purpose of Disbursement:
STRATEGY CONSULTING
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

590170.05

 Date MM / DD / YYYY
03 / 14 / 2011

Transaction ID: H4.375

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7500.00		7500.00		15000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9772.74		9772.74		19545.48

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 956 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
GABRIEL SCHOENFELD

Mailing Address

2830 W. 17TH ST.

 City State Zip Code
BROOKLYN NY 11224

000

 Purpose of Disbursement:
COMMUNICATIONS CONSULTING FOR PAC
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

593320.05

Date 03 / 14 / 2011

Transaction ID: H4.376

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1575.00

1575.00

3150.00

B. Full Name (Last, First, Middle Initial)
GABRIEL SCHOENFELD

Mailing Address

2830 W. 17TH ST.

 City State Zip Code
BROOKLYN NY 11224

000

 Purpose of Disbursement:
COMMUNICATIONS CONSULTING FOR PAC
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

596120.05

Date 03 / 14 / 2011

Transaction ID: H4.377

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1400.00

1400.00

2800.00

C. Full Name (Last, First, Middle Initial)
ANDREW HEMMING

Mailing Address

124 LA CALERA WAY

 City State Zip Code
GOLETA CA 93117

000

 Purpose of Disbursement:
RESEARCH CONSULTING FOR PAC
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

597620.05

Date 03 / 14 / 2011

Transaction ID: H4.378

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

750.00

750.00

1500.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

3725.00

3725.00

7450.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 957 / 970
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
 SJZ LLC

Mailing Address

80 HAYDEN AVE.

City State Zip Code
 LEXINGTON MA 02421

000

Purpose of Disbursement:
 TRAVEL EXPENSE REIMBURSEMENT

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

599304.32

Date M M / D D / Y Y Y Y
 0 3 / 1 4 / 2 0 1 1

Transaction ID: H4.379

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

842.14

842.13

1684.27

B. Full Name (Last, First, Middle Initial)
 VERIZON WIRELESS

Mailing Address

P.O. BOX 15062

City State Zip Code
 ALBANY NY 12212

000

Purpose of Disbursement:
 PHONE SERVICE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

601601.14

Date M M / D D / Y Y Y Y
 0 3 / 1 4 / 2 0 1 1

Transaction ID: H4.380

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1148.41

1148.41

2296.82

C. Full Name (Last, First, Middle Initial)
 FLS CONNECT, LLC

Mailing Address

7300 HUDSON BLVD. SUITE 270

City State Zip Code
 SAINT PAUL MN 55128

000

Purpose of Disbursement:
 PHONE SERVICE

Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

602478.38

Date M M / D D / Y Y Y Y
 0 3 / 1 6 / 2 0 1 1

Transaction ID: H4.381

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

438.62

438.62

877.24

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2429.17

2429.16

4858.33

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 958 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
SJZ LLC

Mailing Address

80 HAYDEN AVE.

City	State	Zip Code
LEXINGTON	MA	02421

000

 Purpose of Disbursement:
OFFICE EXPENSE REIMBURSEMENT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

602670.08

 Date

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	6	/	2	0	1	1

Transaction ID: H4.382

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

95.85

95.85

191.70

B. Full Name (Last, First, Middle Initial)
LANHEE CHEN

Mailing Address

30 CAMBRIDGE PARK DR. #6132

City	State	Zip Code
CAMBRIDGE	MA	02140

000

 Purpose of Disbursement:
TRAVEL EXPENSE REIMBURSEMENT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

602746.25

 Date

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	6	/	2	0	1	1

Transaction ID: H4.383

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

38.09

38.08

76.17

C. Full Name (Last, First, Middle Initial)
LANHEE CHEN

Mailing Address

30 CAMBRIDGE PARK DR. #6132

City	State	Zip Code
CAMBRIDGE	MA	02140

000

 Purpose of Disbursement:
TRAVEL EXPENSE REIMBURSEMENT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

603044.78

 Date

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	6	/	2	0	1	1

Transaction ID: H4.384

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

149.27

149.26

298.53

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

283.21

283.19

566.40

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 959 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
SHRED-IT BOSTON

Mailing Address

2 C GILL STREET

 City State Zip Code
WOBURN MA 01801

000

 Purpose of Disbursement:
SHREDDING SERVICES
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

603097.98

 Date MM / DD / YYYY
03 / 16 / 2011

Transaction ID: H4.385

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

26.60

26.60

53.20

B. Full Name (Last, First, Middle Initial)
THE STEVENS & SCHRIEFER GROUP

Mailing Address

1117 EAST WEST HIGHWAY

 City State Zip Code
SILVER SPRINGS MD 20910

000

 Purpose of Disbursement:
STRATEGY CONSULTING
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

638097.98

 Date MM / DD / YYYY
03 / 16 / 2011

Transaction ID: H4.386

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

17500.00

17500.00

35000.00

C. Full Name (Last, First, Middle Initial)
MINDSHIFT TECHNOLOGIES

Mailing Address

3975 FAIR RIDGE DRIVE SUITE 200-S

 City State Zip Code
FAIRFAX VA 22033

000

 Purpose of Disbursement:
PHONE SERVICE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

638172.37

 Date MM / DD / YYYY
03 / 16 / 2011

Transaction ID: H4.387

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

37.20

37.19

74.39

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

17563.80

17563.79

35127.59

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 960 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
SJZ LLC

Mailing Address

80 HAYDEN AVE.

 City State Zip Code
LEXINGTON MA 02421

000

 Purpose of Disbursement:
OFFICE EXPENSE REIMBURSEMENT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

638370.67

 Date M M / D D / Y Y Y Y
0 3 / 1 6 / 2 0 1 1

Transaction ID: H4.388

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
99.15		99.15		198.30

B. Full Name (Last, First, Middle Initial)
LANHEE CHEN

Mailing Address

30 CAMBRIDGE PARK DR. #6132

 City State Zip Code
CAMBRIDGE MA 02140

000

 Purpose of Disbursement:
TRAVEL EXPENSE REIMBURSEMENT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

638565.44

 Date M M / D D / Y Y Y Y
0 3 / 1 6 / 2 0 1 1

Transaction ID: H4.389

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
97.39		97.38		194.77

C. Full Name (Last, First, Middle Initial)
THE STEVENS & SCHRIEFER GROUP

Mailing Address

1117 EAST WEST HIGHWAY

 City State Zip Code
SILVER SPRINGS MD 20910

000

 Purpose of Disbursement:
TRAVEL EXPENSE REIMBURSEMENT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

639584.98

 Date M M / D D / Y Y Y Y
0 3 / 1 6 / 2 0 1 1

Transaction ID: H4.390

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
509.77		509.77		1019.54

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
706.31		706.30		1412.61

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 961 / 970
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
 ADMINISTAFF COMPANIES

Mailing Address

19001 CRESCENT SPRINGS DRIVE

 City State Zip Code
 KINGWOOD TX 77339

000

 Purpose of Disbursement:
 PAYROLL TAXES/INSURANCE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

639704.11

Date 03 / 16 / 2011

Transaction ID: H4.391

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

60.07

59.06

119.13

B. Full Name (Last, First, Middle Initial)
 ADMINISTAFF COMPANIES

Mailing Address

19001 CRESCENT SPRINGS DRIVE

 City State Zip Code
 KINGWOOD TX 77339

000

 Purpose of Disbursement:
 PAYROLL SERVICES
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

639952.52

Date 03 / 16 / 2011

Transaction ID: H4.392

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

124.21

124.20

248.41

C. Full Name (Last, First, Middle Initial)
 ALAN NGUYEN

Mailing Address

80 HAYDEN AVE.

 City State Zip Code
 LEXINGTON MA 02421

000

 Purpose of Disbursement:
 PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

640641.91

Date 03 / 16 / 2011

Transaction ID: H4.393

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

344.70

344.69

689.39

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

528.98

527.95

1056.93

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 962 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
FEDEX

Mailing Address

PO BOX 371461

 City State Zip Code
PITTSBURGH PA 15250

000

 Purpose of Disbursement:
DELIVERY
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

640654.67

 Date MM / DD / YYYY
03 / 28 / 2011

Transaction ID: H4.394

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.38		6.38		12.76

B. Full Name (Last, First, Middle Initial)
SHRED-IT BOSTON

Mailing Address

2 C GILL STREET

 City State Zip Code
WOBBURN MA 01801

000

 Purpose of Disbursement:
SHREDDING SERVICES
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

640707.87

 Date MM / DD / YYYY
03 / 28 / 2011

Transaction ID: H4.395

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
26.60		26.60		53.20

C. Full Name (Last, First, Middle Initial)
WILL RITTER

Mailing Address

11 CHAMPNEY PLACE

 City State Zip Code
BOSTON MA 02114

000

 Purpose of Disbursement:
TRAVEL EXPENSE REIMBURSEMENT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

640883.37

 Date MM / DD / YYYY
03 / 28 / 2011

Transaction ID: H4.396

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
87.75		87.75		175.50

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
120.73		120.73		241.46

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 963 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
PUBLIC OPINION STRATEGIES

Mailing Address

214 NORTH FAYETTE STREET

 City State Zip Code
ALEXANDRIA VA 22314

000

 Purpose of Disbursement:
TRAVEL EXPENSE REIMBURSEMENT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

641550.68

 Date MM / DD / YYYY
03 / 28 / 2011

Transaction ID: H4.397

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

333.66

333.65

667.31

B. Full Name (Last, First, Middle Initial)
PATTON BOGGS LLP

Mailing Address

2550 M ST. N.W.

 City State Zip Code
WASHINGTON DC 20037

000

 Purpose of Disbursement:
LEGAL FEES
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

651554.67

 Date MM / DD / YYYY
03 / 28 / 2011

Transaction ID: H4.398

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

5002.00

5001.99

10003.99

C. Full Name (Last, First, Middle Initial)
MATTHEW RHOADES

Mailing Address

90-92 REVERE STREET

 City State Zip Code
BOSTON MA 02114

000

 Purpose of Disbursement:
TRAVEL EXPENSE REIMBURSEMENT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

651750.98

 Date MM / DD / YYYY
03 / 28 / 2011

Transaction ID: H4.399

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

98.16

98.15

196.31

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

5433.82

5433.79

10867.61

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 964 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
MATTHEW RHOADES

Mailing Address

90-92 REVERE STREET

 City State Zip Code
BOSTON MA 02114

000

 Purpose of Disbursement:
TRAVEL EXPENSE REIMBURSEMENT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

651811.76

 Date M M / D D / Y Y Y Y
0 3 / 2 8 / 2 0 1 1

Transaction ID: H4.400

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.39		30.39		60.78

B. Full Name (Last, First, Middle Initial)
MATTHEW RHOADES

Mailing Address

90-92 REVERE STREET

 City State Zip Code
BOSTON MA 02114

000

 Purpose of Disbursement:
TRAVEL EXPENSE REIMBURSEMENT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

651832.56

 Date M M / D D / Y Y Y Y
0 3 / 2 8 / 2 0 1 1

Transaction ID: H4.401

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.40		10.40		20.80

C. Full Name (Last, First, Middle Initial)
ERIC FEHRNSTROM

Mailing Address

83 RISLEY ROAD

 City State Zip Code
CHESTNUT HILL MA 02467

000

 Purpose of Disbursement:
TRAVEL EXPENSE REIMBURSEMENT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

651913.01

 Date M M / D D / Y Y Y Y
0 3 / 2 8 / 2 0 1 1

Transaction ID: H4.402

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
40.23		40.22		80.45

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
81.02		81.01		162.03

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 965 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
RED CURVE SOLUTIONS

Mailing Address

138 CONANT STREET FLOOR 1

 City State Zip Code
BEVERLY MA 01915

000

 Purpose of Disbursement:
COMPLIANCE AND TREASURY CONSULTING
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

672113.01

 Date M M / D D / Y Y Y Y
03 / 28 / 2011

Transaction ID: H4.403

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

10100.00

10100.00

20200.00

B. Full Name (Last, First, Middle Initial)
BETH MYERS

Mailing Address

201 BUCKMINSTER RD.

 City State Zip Code
BROOKLINE MA 02455

000

 Purpose of Disbursement:
STRATEGY CONSULTING
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

682113.01

 Date M M / D D / Y Y Y Y
03 / 28 / 2011

Transaction ID: H4.404

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

5000.00

5000.00

10000.00

C. Full Name (Last, First, Middle Initial)
PETER FLAHERTY

Mailing Address

8 ROCKMONT ROAD

 City State Zip Code
BELMONT MA 02478

000

 Purpose of Disbursement:
STRATEGY CONSULTING
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

687113.01

 Date M M / D D / Y Y Y Y
03 / 28 / 2011

Transaction ID: H4.405

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2500.00

2500.00

5000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

17600.00

17600.00

35200.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 966 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
JACQUELINE ROONEY

Mailing Address

9 COMMONWEALTH AVE., #1A

 City State Zip Code
BOSTON MA 02116

000

 Purpose of Disbursement:
TRAVEL EXPENSE REIMBURSEMENT
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

687176.51

 Date M M / D D / Y Y Y Y
0 3 / 2 8 / 2 0 1 1

Transaction ID: H4.406

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

31.75

31.75

63.50

B. Full Name (Last, First, Middle Initial)
ADMINISTAFF COMPANIES

Mailing Address

19001 CRESCENT SPRINGS DRIVE

 City State Zip Code
KINGWOOD TX 77339

000

 Purpose of Disbursement:
PAYROLL TAXES/INSURANCE
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

696651.41

 Date M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 1 1

Transaction ID: H4.407

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

4737.45

4737.45

9474.90

C. Full Name (Last, First, Middle Initial)
ADMINISTAFF COMPANIES

Mailing Address

19001 CRESCENT SPRINGS DRIVE

 City State Zip Code
KINGWOOD TX 77339

000

 Purpose of Disbursement:
PAYROLL SERVICES
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

705531.57

 Date M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 1 1

Transaction ID: H4.408

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

4443.24

4436.92

8880.16

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

9212.44

9206.12

18418.56

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 967 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
LANHEE CHEN

Mailing Address

30 CAMBRIDGE PARK DR. #6132

 City State Zip Code
CAMBRIDGE MA 02140

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

710023.25

 Date M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 1 1

Transaction ID: H4.409

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2245.84

2245.84

4491.68

B. Full Name (Last, First, Middle Initial)
ERIC FEHRNSTROM

Mailing Address

83 RISLEY ROAD

 City State Zip Code
CHESTNUT HILL MA 02467

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

714597.07

 Date M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 1 1

Transaction ID: H4.410

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2286.91

2286.91

4573.82

C. Full Name (Last, First, Middle Initial)
KELLI HARRISON

Mailing Address

21 CENTURY STREET APT. 1

 City State Zip Code
MEDFORD MA 02155

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

715919.93

 Date M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 1 1

Transaction ID: H4.411

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

661.43

661.43

1322.86

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

5194.18

5194.18

10388.36

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 968 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)

GARRETT JACKSON

Mailing Address

1 LEIGHTON STREET APT. 301

City	State	Zip Code
CAMBRIDGE	MA	02141

000

Purpose of Disbursement:
PAYROLLCategory/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

717385.05

Date

M	M
0	3

 /

D	D
3	1

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.412

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

732.56

732.56

1465.12

B. Full Name (Last, First, Middle Initial)

ALAN NGUYEN

Mailing Address

80 HAYDEN AVE.

City	State	Zip Code
LEXINGTON	MA	02421

000

Purpose of Disbursement:
PAYROLLCategory/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

718403.43

Date

M	M
0	3

 /

D	D
3	1

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.413

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

509.19

509.19

1018.38

C. Full Name (Last, First, Middle Initial)

BRUCE NILSON

Mailing Address

40 KINGS WAY, #401A APT.1

City	State	Zip Code
WALTHAM	MA	02451

000

Purpose of Disbursement:
PAYROLLCategory/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

719657.11

Date

M	M
0	3

 /

D	D
3	1

 /

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.414

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

626.84

626.84

1253.68

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1868.59

1868.59

3737.18

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 969 / 970
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
MATTHEW RHOADES

Mailing Address

90-92 REVERE STREET

 City State Zip Code
BOSTON MA 02114

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

723781.91

 Date MM / DD / YYYY
03 / 31 / 2011

Transaction ID: H4.415

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2062.40

2062.40

4124.80

B. Full Name (Last, First, Middle Initial)
WILL RITTER

Mailing Address

11 CHAMPNEY PLACE

 City State Zip Code
BOSTON MA 02114

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

725305.85

 Date MM / DD / YYYY
03 / 31 / 2011

Transaction ID: H4.416

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

761.97

761.97

1523.94

C. Full Name (Last, First, Middle Initial)
JACQUELINE ROONEY

Mailing Address

9 COMMONWEALTH AVE. APT. 1A

 City State Zip Code
BOSTON MA 02116

000

 Purpose of Disbursement:
PAYROLL
Category/
Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

726343.48

 Date MM / DD / YYYY
03 / 31 / 2011

Transaction ID: H4.417

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

518.82

518.81

1037.63

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

3343.19

3343.18

6686.37

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 970 / 970
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
 LOUIS TAVARES

Mailing Address

42 HAZEN STREET

City

State

Zip Code

CHELMSFORD

MA

01824

000

Purpose of Disbursement:
 PAYROLL

Category/
 Type

Activity or Event Identifier:

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

729851.31

Date

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 1 1

Transaction ID: H4.418

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

1753.92

1753.91

3507.83

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

1753.92

1753.91

3507.83

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

364929.92

364921.39

729851.31