

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.   
**Faith Family Freedom Fund**

ADDRESS (number and street)   
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

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 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- |                                      |                                      |                                       |   |
|--------------------------------------|--------------------------------------|---------------------------------------|---|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input checked="" type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)            |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                                      |

- (c) 12-Day PRE-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) |                                       |

Election on  /  /  in the State of

- (d) 30-Day POST-Election Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

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 Paul Tripodi

Signature of Treasurer Paul Tripodi [Electronically Filed] Date  /  /

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Faith Family Freedom Fund**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2011"/>		50413.00
(b) Cash on Hand at Beginning of Reporting Period.....	111201.49	
(c) Total Receipts (from Line 19) .....	16417.29	208529.94
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	127618.78	258942.94
7. Total Disbursements (from Line 31).....	2681.29	134005.45
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	124937.49	124937.49
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

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

**For further information contact:**

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

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

## DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Faith Family Freedom Fund**

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 01 / 2011 To: M M / D D / Y Y Y Y 10 / 31 / 2011

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).....	16231.29	161077.33
(ii) Unitemized .....	136.00	47402.61
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	16367.29	208479.94
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	16367.29	208479.94
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).....	50.00	50.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	16417.29	208529.94
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	16417.29	208529.94

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

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II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	2681.29	98986.05
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	2681.29	98986.05
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	60.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	60.00
29. Other Disbursements .....	0.00	34959.40
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated 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)) ..	2681.29	134005.45
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2681.29	134005.45

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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) .....	16367.29	208479.94
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	60.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	16367.29	208419.94
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	2681.29	98986.05
37. Offsets to Operating Expenditures (from Line 15, page 3).....	50.00	50.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	2631.29	98936.05

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 9
	<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)  
**Faith Family Freedom Fund**

**A. Mrs. Susan Aleshire**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4930 SW 198th Ter  
 City Southwest Ranches State FL Zip Code 33332-1130  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Info requested per best effort Info requested per best efforts  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 06 / 2011  
**Transaction ID : SA11AI.7081**  
 Amount of Each Receipt this Period  
 1500.00

**B. Mrs. Susan Aleshire**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4930 SW 198th Ter  
 City Southwest Ranches State FL Zip Code 33332-1130  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Info requested per best effort Info requested per best efforts  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 4500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 06 / 2011  
**Transaction ID : SA11AI.7082**  
 Amount of Each Receipt this Period  
 3000.00

**C. Mrs. Kim Bengard**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3912 Calle Ariana  
 City San Clemente State CA Zip Code 92672-4503  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Info requested per best effort Info requested per best efforts  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2011  
**Transaction ID : SA11AI.7084**  
 Amount of Each Receipt this Period  
 5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	9500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 9
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Faith Family Freedom Fund**

Full Name (Last, First, Middle Initial) <b>A. Mr. Jared Carman</b>			Date of Receipt 10 / 03 / 2011 <b>Transaction ID : SA11AI.7075</b>
Mailing Address 6748 Canterbury Dr			Amount of Each Receipt this Period 50.00
City Highland	State UT	Zip Code 84003-9331	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 550.00	
Name of Employer Agilant Learning		Occupation Self Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Family Research Council Action</b>			Date of Receipt 10 / 31 / 2011 <b>Transaction ID : SA11AI.7088</b>
Mailing Address 801 G Street, NW			Amount of Each Receipt this Period 181.29
City Washington	State DC	Zip Code 20001	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 16507.33	
Name of Employer		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		In-kind - Administrative, compliance, fundraising support, website	

Full Name (Last, First, Middle Initial) <b>C. Dr. Robert Kinney</b>			Date of Receipt 10 / 14 / 2011 <b>Transaction ID : SA11AI.7086</b>
Mailing Address 4664 Dovefield Ln			Amount of Each Receipt this Period 5000.00
City Kannapolis	State NC	Zip Code 28081-6401	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 5000.00	
Name of Employer		Occupation	
Info requested per best effort		Info requested per best efforts	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5231.29
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 9
	<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)  
**Faith Family Freedom Fund**

**A. Mr. Lloyd Mencinger**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4124 Purdue Ave  
 City Dallas State TX Zip Code 75225-6701  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Info requested per best effort Occupation Info requested per best efforts  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2011  
**Transaction ID : SA11AI.7079**  
 Amount of Each Receipt this Period  
 1000.00

**B. Mrs. Rhonda Mixon**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5868 Gene Ave  
 City Columbus State GA Zip Code 31909-3866  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Info requested per best effort Occupation Info requested per best efforts  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 18 / 2011  
**Transaction ID : SA11AI.7077**  
 Amount of Each Receipt this Period  
 500.00

**C. Mr. Albert Normandia**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 41 School Rd W  
 City Marlboro State NJ Zip Code 07746-1543  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Info requested per best effort Occupation Info requested per best efforts  
 New York City Dept. of Ed/Meridian Hea Teacher/physical therapist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 03 / 2011  
**Transaction ID : SA11AI.7067**  
 Amount of Each Receipt this Period  
 0.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	16231.29



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Faith Family Freedom Fund**

Full Name (Last, First, Middle Initial)

**A. Family Research Council Action**

Mailing Address 801 G Street, NW

City Washington State DC Zip Code 20001

Purpose of Disbursement  
In-kind - Administrative, compliance, fundraising support, website

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.7089**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. The Family Leader**

Mailing Address 1100 N. Hickory  
Suite 107

City Pleasant Hill State IA Zip Code 50327

Purpose of Disbursement  
Fee for listing in debate program

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.7091**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

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