



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
FREEDOM PROJECT; THE

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		363740.79
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	610988.74									
(c) Total Receipts (from Line 19) .....	123290.00	953993.45								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	734278.74	1317734.24								
7. Total Disbursements (from Line 31) .....	250056.53	833512.03								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	484222.21	484222.21								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
FREEDOM PROJECT; THE

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

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	25200.00	244065.94
(i) Itemized (use Schedule A) .....	2590.00	4055.00
(ii) Unitemized .....	27790.00	248120.94
(iii) TOTAL (add Lines 11(a)(i) and (ii) ▶	0.00	0.00
(b) Political Party Committees .....	90500.00	695450.00
(c) Other Political Committees (such as PACs) .....	118290.00	943570.94
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ▶		
12. Transfers From Affiliated/Other Party Committees .....	.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) .....	0.00	422.51
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	5000.00	10000.00
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 Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	123290.00	953993.45
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	123290.00	953993.45

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	70056.53	364089.38
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	70056.53	364089.38
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	180000.00	462822.65
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	1600.00
(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	1600.00
29. Other Disbursements.....	0.00	5000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share.....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds.....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	250056.53	833512.03
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	250056.53	833512.03

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3 .....	118290.00	943570.94
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	1600.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	118290.00	941970.94
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	70056.53	364089.38
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	422.51
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	70056.53	363666.87

**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 / 60
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b>	Full Name (Last, First, Middle Initial) James Boland	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 4115 Leland Street	<b>Transaction ID:</b> SA11AI-5462-19623-c
	City State Zip Code Chevy Chase MD 20815-5033	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation The Boland Company Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Michael Boland	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 3218 Thornapple Street	<b>Transaction ID:</b> SA11AI-5837-19765-c
	City State Zip Code Chevy Chase MD 20815-4048	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Griffin, Johnson, Dover & Stewart Principal	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Kirsten Chadwick	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 1350 I Street NW Suite 690	<b>Transaction ID:</b> SA11AI-6467-19628-c
	City State Zip Code Washington DC 20005-3382	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation O'Brien Calio Professional Staff	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4500.00
<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 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b>	Full Name (Last, First, Middle Initial) Fuad El-Hibri	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 13340 Signal Tree Lane	<b>Transaction ID:</b> SA11AI-10459-19571-c
	City State Zip Code Potomac MD 20854-6053	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Emergent BioSolutions, Inc. CEO & Chairman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Don Fierce	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 600 New Hampshire Avenue NW Suite 1000	<b>Transaction ID:</b> SA11AI-6317-19567-c
	City State Zip Code Washington DC 20037-2401	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Fierce & Isakowitz President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Salt River Pima Mari Indian Community	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 10005 E Osborn Road	<b>Transaction ID:</b> SA11AI-10606-19769-c
	City State Zip Code Scottsdale AZ 85256-4019	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Indian Tribe Indian Tribe	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	8500.00
<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: PAGE 8 / 60  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.** Full Name (Last, First, Middle Initial)  
Shahira Knight  
 Mailing Address 209 Pennsylvania Avenue  
 City Falls Church State VA Zip Code 22046-3241  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SIFM Assoc. Occupation Managing Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00  
 Date of Receipt MM / DD / YYYY  
06 / 12 / 2008  
**Transaction ID:** SA11AI-10249-19631-c  
 Amount of Each Receipt this Period 2500.00  
 Contribution

**B.** Full Name (Last, First, Middle Initial)  
R. Nelson Litterst  
 Mailing Address 1655 N Greenbrier Street  
 City Arlington State VA Zip Code 22205-3627  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer C2 Group, LLC Occupation Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00  
 Date of Receipt MM / DD / YYYY  
06 / 30 / 2008  
**Transaction ID:** SA11AI-4166-19761-c  
 Amount of Each Receipt this Period 1000.00  
 Contribution

**C.** Full Name (Last, First, Middle Initial)  
Richard Pogue  
 Mailing Address 901 Lakeside Avenue E  
 City Cleveland State OH Zip Code 44114-1163  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Jones Day Occupation Managing Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2700.00  
 Date of Receipt MM / DD / YYYY  
06 / 30 / 2008  
**Transaction ID:** SA11AI-10603-19764-c  
 Amount of Each Receipt this Period 2700.00  
 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 9 / 60  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)  
Dave Sackett, III

Mailing Address 8541 Riverside Road

City State Zip Code  
Alexandria VA 22308-2206

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

Name of Employer Occupation  
Investment Co. Insitute Govt. Affairs Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2008

Transaction ID: SA11AI-6392-19629-c

Amount of Each Receipt this Period  
1000.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
William Steere, Jr.

Mailing Address 27471 Harbor Cove Court

City State Zip Code  
Bonita Springs FL 34134-1620

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

Name of Employer Occupation  
Pfizer, Inc. Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
06 / 20 / 2008

Transaction ID: SA11AI-6011-19575-c

Amount of Each Receipt this Period  
5000.00

Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	6000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	25200.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 60  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.** Full Name (Last, First, Middle Initial)  
Aircraft Owners And Pilots Association Political Action Committee

Mailing Address 421 Aviation Way

City State Zip Code  
Frederick MD 21701-4756

FEC ID number of contributing federal political committee. **C** C00131185

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

**Transaction ID:** SA11C-9979-19579-c

Amount of Each Receipt this Period  
5000.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
AMERICAN BEVERAGE ASSOCIATION POLITICAL ACTION COMMITTEE (AKA AMERICAN BEVERAGE ASSOCIATION)

Mailing Address 1101 16th Street NW

City State Zip Code  
Washington DC 20036-4803

FEC ID number of contributing federal political committee. **C** C00100107

Name of Employer Occupation

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 6 / 2 0 / 2 0 0 8

**Transaction ID:** SA11C-4162-19583-c

Amount of Each Receipt this Period  
2500.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
American Chemistry Council Pac

Mailing Address 1300 Wilson Boulevard

City State Zip Code  
Arlington VA 22209-2323

FEC ID number of contributing federal political committee. **C** C00252338

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

**Transaction ID:** SA11C-10460-19580-c

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 11 / 60  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN INSURANCE ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1130 Connecticut Avenue NW  
Suite 1000

City Washington State DC Zip Code 20036-3910

FEC ID number of contributing federal political committee. **C** C00103143

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 2 0 / 2 0 0 8

**Transaction ID:** SA11C-3970-19572-c

Amount of Each Receipt this Period  
2500.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
CAPITAL ONE FINANCIAL CORP. ASSOC. POLITICAL FUND

Mailing Address 1680 Capital One Drive

City Mclean State VA Zip Code 22102-3407

FEC ID number of contributing federal political committee. **C** C00326595

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 3 0 / 2 0 0 8

**Transaction ID:** SA11C-4267-19758-c

Amount of Each Receipt this Period  
2500.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
CHUBB CORPORATION POLITICAL ACTION COMMITTEE-CHUBBPAC, THE

Mailing Address 15 Mountainview Road

City Warren State NJ Zip Code 07059-6711

FEC ID number of contributing federal political committee. **C** C00229203

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 2 0 / 2 0 0 8

**Transaction ID:** SA11C-3823-19569-c

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 12 / 60  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)  
COCA-COLA ENTERPRISES INC EMPLOYEES PAC

Mailing Address 2500 Windy Ridge Parkway SE

City Atlanta State GA Zip Code 30339-5677

FEC ID number of contributing federal political committee. **C** C00250134

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 20 / 2008

**Transaction ID:** SA11C-3830-19582-c

Amount of Each Receipt this Period 5000.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
Cooper Industries Political Action Committee

Mailing Address PO Box 4446

City Houston State TX Zip Code 77210-4446

FEC ID number of contributing federal political committee. **C** C00099937

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 20 / 2008

**Transaction ID:** SA11C-10019-19576-c

Amount of Each Receipt this Period 5000.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
DIAGEO NORTH AMERICA INC. EMPLOYEES POLITICAL PARTICIPATION COMMITTEE

Mailing Address 1301 K Street NW Suite 1000

City Washington State DC Zip Code 20005-3317

FEC ID number of contributing federal political committee. **C** C00034470

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 06 / 30 / 2008

**Transaction ID:** SA11C-3698-19760-c

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) ..... ►

**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 13 / 60
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b>	Full Name (Last, First, Middle Initial) FARMERS GROUP INC POLITICAL ACTION COMMITTEE	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 591 Redwood Highway Bldg. 4000	<b>Transaction ID:</b> SA11C-3626-19768-c
	City State Zip Code Mill Valley CA 94941-6001	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. <b>C</b> C00135681	Contribution
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00

<b>B.</b>	Full Name (Last, First, Middle Initial) FEDERAL EXPRESS POLITICAL ACTION COMMITTEE	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 942 S Shady Grove Road	<b>Transaction ID:</b> SA11C-3842-19570-c
	City State Zip Code Memphis TN 38120-4117	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. <b>C</b> C00068692	Contribution
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00

<b>C.</b>	Full Name (Last, First, Middle Initial) INTERNATIONAL ASSOCIATION OF HOLIDAY INNS	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 3 Ravinia Drive Suite 100	<b>Transaction ID:</b> SA11C-4135-19626-c
	City State Zip Code Atlanta GA 30346-2121	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. <b>C</b> C00084822	Contribution
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	10000.00
<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 14 / 60
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b>	Full Name (Last, First, Middle Initial) MGM MIRAGE PAC	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 591 Redwood Highway Suite 4000	<b>Transaction ID:</b> SA11C-4157-19625-c
	City Mill Valley State CA Zip Code 94941-3039	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. <b>C</b> C00299321	Contribution
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) MILLER BREWING COMPANY PAC	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 3939 W Highland Boulevard	<b>Transaction ID:</b> SA11C-3747-19566-c
	City Milwaukee State WI Zip Code 53208-2816	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. <b>C</b> C00102780	Contribution
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 1101 King Street Suite 600	<b>Transaction ID:</b> SA11C-3962-19578-c
	City Alexandria State VA Zip Code 22314-2965	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. <b>C</b> C00144766	Contribution
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	15000.00
<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: PAGE 15 / 60  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.** Full Name (Last, First, Middle Initial)  
Natl. Assn. of Convenience Stores PAC (NACS PAC)  
Mailing Address 1600 Duke Street

City State Zip Code  
Alexandria VA 22314-3466

FEC ID number of contributing federal political committee. **C** C00126763

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 6 / 2 0 / 2 0 0 8  
**Transaction ID:** SA11C-412-19581-c  
 Amount of Each Receipt this Period 5000.00  
 Contribution

**B.** Full Name (Last, First, Middle Initial)  
Novartis Political Action Committee  
Mailing Address 701 Pennsylvania Avenue NW  
Suite 725

City State Zip Code  
Washington DC 20004-2608

FEC ID number of contributing federal political committee. **C** C00033969

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 6 / 2 0 / 2 0 0 8  
**Transaction ID:** SA11C-10157-19568-c  
 Amount of Each Receipt this Period 5000.00  
 Contribution

**C.** Full Name (Last, First, Middle Initial)  
PINNACLE WEST CAPITAL CORPORATION PAC  
Mailing Address 800 Connecticut Avenue NW  
Suite 610

City State Zip Code  
Washington DC 20006-2709

FEC ID number of contributing federal political committee. **C** C00015933

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 3 0 / 2 0 0 8  
**Transaction ID:** SA11C-4161-19624-c  
 Amount of Each Receipt this Period 2500.00  
 Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 12500.00

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

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

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

FOR LINE NUMBER: PAGE 16 / 60  
(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)  
FREEDOM PROJECT; THE

**A.** Full Name (Last, First, Middle Initial)  
Southern Company Employees PAC  
Mailing Address 241 Ralph McGill Boulevard NE  
City Atlanta State GA Zip Code 30308-3374  
FEC ID number of contributing federal political committee. **C** C00144774  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00  
Date of Receipt 06 / 30 / 2008  
Transaction ID: SA11C-6926-19759-c  
Amount of Each Receipt this Period 2500.00  
Contribution

**B.** Full Name (Last, First, Middle Initial)  
Targetcitizens Political Forum  
Mailing Address 1000 Nicollet Mall  
City Minneapolis State MN Zip Code 55403-2542  
FEC ID number of contributing federal political committee. **C** C00098061  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 06 / 20 / 2008  
Transaction ID: SA11C-10461-19584-c  
Amount of Each Receipt this Period 1000.00  
Contribution

**C.** Full Name (Last, First, Middle Initial)  
THE TRAVELERS COMPANIES INC. POLITICAL ACTION COMMITTEE (STA PAC), THE  
Mailing Address One Tower Square  
City Hartford State CT Zip Code 06183  
FEC ID number of contributing federal political committee. **C** C00376376  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00  
Date of Receipt 06 / 30 / 2008  
Transaction ID: SA11C-4014-19622-c  
Amount of Each Receipt this Period 2500.00  
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 17 / 60  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.** Full Name (Last, First, Middle Initial)  
Vanguard Group Committee For Responsible Government

Mailing Address 400 Devon Park Drive

City State Zip Code  
Wayne PA 19087-1816

FEC ID number of contributing federal political committee. **C** C00410266

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2008

**Transaction ID:** SA11C-4468-19630-c

Amount of Each Receipt this Period  
2500.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
WACHOVIA CORPORATION EMPLOYEES GOOD GOVERNMENT FEDERAL FUND I

Mailing Address 301 S College Street

City State Zip Code  
Charlotte NC 28288-0001

FEC ID number of contributing federal political committee. **C** C00012518

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
06 / 20 / 2008

**Transaction ID:** SA11C-3841-19577-c

Amount of Each Receipt this Period  
5000.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
WAL-MART STORES INC. PAC FOR RESPONSIBLE GOVERNMENT

Mailing Address 702 SW 8th Street

City State Zip Code  
Bentonville AR 72716-0150

FEC ID number of contributing federal political committee. **C** C00093054

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
06 / 20 / 2008

**Transaction ID:** SA11C-7978-19574-c

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 18 / 60  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.** Full Name (Last, First, Middle Initial)  
ZURICH HOLDING COMPANY OF AMERICA COMMITTEE FOR GOOD GOVERNMENT (Z-PAC)

Mailing Address 1201 F Street NW

City State Zip Code  
Washington DC 20004-1217

FEC ID number of contributing federal political committee. **C** C00235036

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11C-4117-19767-c

Amount of Each Receipt this Period  
2500.00

Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	90500.00

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

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

FOR LINE NUMBER: PAGE 19 / 60  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)  
Heather Wilson For Senate

Mailing Address PO Box 14070

City State Zip Code  
Albuquerque NM 87191-4070

FEC ID number of contributing federal political committee. **C** C00334060

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 6 / 3 0 / 2 0 0 8

Transaction ID: SA16-19766000

Amount of Each Receipt this Period  
5000.00

Refund, Heather Wilson for Congress General 2008

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	5000.00

# 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)

PAGE 20 / 60

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) 123 Together.com	Transaction ID: SB21B-10075-10258-V
	Mailing Address 111 S Bedford Street Suite 200	Date of Disbursement MM / DD / YYYY 06 / 30 / 2008
	City Burlington State MA Zip Code 01803-5145	Amount of Each Disbursement this Period 213.84
	Purpose of Disbursement Internet Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> Subitemization of Master-card

B.	Full Name (Last, First, Middle Initial) 123 Together.com	Transaction ID: SB21B-10075-10277-V
	Mailing Address 111 S Bedford Street Suite 200	Date of Disbursement MM / DD / YYYY 06 / 30 / 2008
	City Burlington State MA Zip Code 01803-5145	Amount of Each Disbursement this Period 194.85
	Purpose of Disbursement Internet Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> Subitemization of Master-card

C.	Full Name (Last, First, Middle Initial) 29 South	Transaction ID: SB21B-10513-10294-V
	Mailing Address 29 S 3rd Street	Date of Disbursement MM / DD / YYYY 06 / 30 / 2008
	City Fernandina Beach State FL Zip Code 32034-4206	Amount of Each Disbursement this Period 209.30
	Purpose of Disbursement Gen. fund. - food & bev. Candidate Name	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> Subitemization of Master-card

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

PAGE 21 / 60

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)  
Acadiana

Mailing Address 901 New York Avenue NW

City Washington State DC Zip Code 20001-4432

Purpose of Disbursement  
Gen. fund - food & bev.

Candidate Name

003  
Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: SB21B-10332-10291-V  
Date of Disbursement

06 / 30 / 2008

Amount of Each Disbursement this Period

45.43

[MEMO ITEM]

Subitemization of Master-card

B.

Full Name (Last, First, Middle Initial)  
Acadiana

Mailing Address 901 New York Avenue NW

City Washington State DC Zip Code 20001-4432

Purpose of Disbursement  
Gen. fund. - food & bev.

Candidate Name

003  
Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: SB21B-10332-10293-V  
Date of Disbursement

06 / 30 / 2008

Amount of Each Disbursement this Period

152.53

[MEMO ITEM]

Subitemization of Master-card

C.

Full Name (Last, First, Middle Initial)  
Capital Grille

Mailing Address 601 Pennsylvania Avenue NW

City Washington State DC Zip Code 20004-2601

Purpose of Disbursement  
Gen. fund. - food & bev.

Candidate Name

003  
Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: SB21B-5298-10288-V  
Date of Disbursement

06 / 30 / 2008

Amount of Each Disbursement this Period

4195.25

[MEMO ITEM]

Subitemization of Master-card

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Capitol Associates III-X	Transaction ID: SB21B-4390-19587-e
	Mailing Address 426 C Street NE	Date of Disbursement 06 / 02 / 2008
	City Washington State DC Zip Code 20002-5818	Amount of Each Disbursement this Period 1437.50
	Purpose of Disbursement Office rent Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Capitol Associates III-X	Transaction ID: SB21B-4390-19549-e
	Mailing Address 426 C Street NE	Date of Disbursement 06 / 05 / 2008
	City Washington State DC Zip Code 20002-5818	Amount of Each Disbursement this Period 4.49
	Purpose of Disbursement Postage Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Capitol Associates III-X	Transaction ID: SB21B-4390-19666-e
	Mailing Address 426 C Street NE	Date of Disbursement 06 / 26 / 2008
	City Washington State DC Zip Code 20002-5818	Amount of Each Disbursement this Period 1437.50
	Purpose of Disbursement Office rent Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

2879.49

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Capitol Hill Club</p> <p>Mailing Address 300 1st Street SE</p> <p>City Washington State DC Zip Code 20003-1801</p> <p>Purpose of Disbursement Mtg. exp. food &amp; bev.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-5501-10252-V</p> <p>Date of Disbursement 06 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 54.52</p> <p><b>[MEMO ITEM]</b> Subitemization of Master-card</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Capitol Hill Club</p> <p>Mailing Address 300 1st Street SE</p> <p>City Washington State DC Zip Code 20003-1801</p> <p>Purpose of Disbursement Mtg. exp. food &amp; bev.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-5501-10259-V</p> <p>Date of Disbursement 06 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 30.50</p> <p><b>[MEMO ITEM]</b> Subitemization of Master-card</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Clark, Schaefer, Hackett &amp; Company</p> <p>Mailing Address 160 N Breiel Boulevard</p> <p>City Middletown State OH Zip Code 45042-3806</p> <p>Purpose of Disbursement Payroll procesing</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><b>Transaction ID:</b> SB21B-6282-19671-e</p> <p>Date of Disbursement 06 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 45.00</p>

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

45.00

**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 24 / 60

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)  
Clark, Schaefer, Hackett & Company

Transaction ID: SB21B-6282-19662-e  
Date of Disbursement

Mailing Address 160 N Breiel Boulevard

06 / 26 / 2008

City Middletown State OH Zip Code 45042-3806

Amount of Each Disbursement this Period

Purpose of Disbursement  
Accounting services

001  
Category/  
Type

430.00

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Clark, Schaefer, Hackett & Company

Transaction ID: SB21B-6282-19672-e  
Date of Disbursement

Mailing Address 160 N Breiel Boulevard

06 / 30 / 2008

City Middletown State OH Zip Code 45042-3806

Amount of Each Disbursement this Period

Purpose of Disbursement  
Payroll processing

001  
Category/  
Type

45.00

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Congressional Liquors

Transaction ID: SB21B-6678-10278-V  
Date of Disbursement

Mailing Address 404 1st Street SE

06 / 30 / 2008

City Washington State DC Zip Code 20003-1826

Amount of Each Disbursement this Period

Purpose of Disbursement  
Gen. fund. - food & bev.

003  
Category/  
Type

359.46

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

[MEMO ITEM]  
Subitemization of Master-card

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

475.00

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 25 / 60

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input 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)  
FREEDOM PROJECT; THE

<p><b>A.</b> Full Name (Last, First, Middle Initial) Cosi</p> <p>Mailing Address 301 Pennsylvania Avenue, NW</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Mtg. exp. food &amp; bev.</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><b>Transaction ID:</b> SB21B-10015-10244-V <b>Date of Disbursement</b> 06 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 29.84</p> <p><b>[MEMO ITEM]</b> Subitemization of Master-card</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Cosi</p> <p>Mailing Address 301 Pennsylvania Avenue, NW</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Mtg. exp. food &amp; bev.</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><b>Transaction ID:</b> SB21B-10015-10257-V <b>Date of Disbursement</b> 06 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 27.59</p> <p><b>[MEMO ITEM]</b> Subitemization of Master-card</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Cosi</p> <p>Mailing Address 301 Pennsylvania Avenue, NW</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Mtg. exp. food &amp; bev.</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><b>Transaction ID:</b> SB21B-10015-10264-V <b>Date of Disbursement</b> 06 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 30.88</p> <p><b>[MEMO ITEM]</b> Subitemization of Master-card</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)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<p><b>A.</b> Full Name (Last, First, Middle Initial) Cosi</p> <p>Mailing Address 301 Pennsylvania Avenue, NW</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Mtg. exp. food &amp; bev.</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><b>Transaction ID:</b> SB21B-10015-10270-V <b>Date of Disbursement</b> 06 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 30.86</p> <p><b>[MEMO ITEM]</b> Subitemization of Master-card</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Cosi</p> <p>Mailing Address 301 Pennsylvania Avenue, NW</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Mtg. exp. food &amp; bev.</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><b>Transaction ID:</b> SB21B-10015-10276-V <b>Date of Disbursement</b> 06 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 30.88</p> <p><b>[MEMO ITEM]</b> Subitemization of Master-card</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Cosi</p> <p>Mailing Address 301 Pennsylvania Avenue, NW</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Mtg. exp. food &amp; bev.</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><b>Transaction ID:</b> SB21B-10015-10286-V <b>Date of Disbursement</b> 06 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 31.01</p> <p><b>[MEMO ITEM]</b> Subitemization of Master-card</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) Delta Air Lines Mailing Address PO Box 20706 City Atlanta State GA Zip Code 30320-6001 Purpose of Disbursement Gen. fund. - travel airfare Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21B-5296-10250-V Date of Disbursement 06 / 30 / 2008
	Amount of Each Disbursement this Period 169.00 [MEMO ITEM] Subitemization of Master-card

<b>B.</b> Full Name (Last, First, Middle Initial) Disney Resort Destinations Mailing Address PO Box 403411 City Atlanta State GA Zip Code 30384-3411 Purpose of Disbursement Gen. fund. event deposit Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21B-3618-10273-V Date of Disbursement 06 / 30 / 2008
	Amount of Each Disbursement this Period 5000.00 [MEMO ITEM] Subitemization of Master-card

<b>C.</b> Full Name (Last, First, Middle Initial) Epiphany Productions Mailing Address 104 Hume Avenue City Alexandria State VA Zip Code 22301-1015 Purpose of Disbursement Gen. fund. - Fundraising consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21B-8930-19546-e Date of Disbursement 06 / 05 / 2008
	Amount of Each Disbursement this Period 2500.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b>	Full Name (Last, First, Middle Initial) Extra Virgin  Mailing Address 4053 28th Street S  City Arlington State VA Zip Code 22206-2201  Purpose of Disbursement Gen. fund. - food & bev. Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-10222-10296-V Date of Disbursement 06 / 30 / 2008  Amount of Each Disbursement this Period 332.80  <b>[MEMO ITEM]</b> Subitemization of Master-card
<b>B.</b>	Full Name (Last, First, Middle Initial) FedEx  Mailing Address PO Box 1140  City Memphis State TN Zip Code 38101-1140  Purpose of Disbursement Shipping 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-5414-10247-V Date of Disbursement 06 / 30 / 2008  Amount of Each Disbursement this Period 21.97  <b>[MEMO ITEM]</b> Subitemization of Master-card
<b>C.</b>	Full Name (Last, First, Middle Initial) FedEx  Mailing Address PO Box 1140  City Memphis State TN Zip Code 38101-1140  Purpose of Disbursement Shipping 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-5414-10261-V Date of Disbursement 06 / 30 / 2008  Amount of Each Disbursement this Period 22.89  <b>[MEMO ITEM]</b> Subitemization of Master-card

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	0.00

# 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)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) FedEx  Mailing Address PO Box 1140  City Memphis State TN Zip Code 38101-1140 Purpose of Disbursement Shipping 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-5414-10262-V Date of Disbursement 06 / 30 / 2008  Amount of Each Disbursement this Period 22.89  <b>[MEMO ITEM]</b> Subitemization of Master-card
B.	Full Name (Last, First, Middle Initial) FedEx  Mailing Address PO Box 1140  City Memphis State TN Zip Code 38101-1140 Purpose of Disbursement Shipping 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-5414-10268-V Date of Disbursement 06 / 30 / 2008  Amount of Each Disbursement this Period 24.13  <b>[MEMO ITEM]</b> Subitemization of Master-card
C.	Full Name (Last, First, Middle Initial) FedEx  Mailing Address PO Box 1140  City Memphis State TN Zip Code 38101-1140 Purpose of Disbursement Shipping 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-5414-10274-V Date of Disbursement 06 / 30 / 2008  Amount of Each Disbursement this Period 17.26  <b>[MEMO ITEM]</b> Subitemization of Master-card

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 30 / 60

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b>	Full Name (Last, First, Middle Initial) FedEx  Mailing Address PO Box 1140  City Memphis State TN Zip Code 38101-1140  Purpose of Disbursement Shipping 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-5414-10282-V Date of Disbursement 06 / 30 / 2008  Amount of Each Disbursement this Period 18.20  <b>[MEMO ITEM]</b> Subitemization of Master-card	
<b>B.</b>	Full Name (Last, First, Middle Initial) FedEx  Mailing Address PO Box 1140  City Memphis State TN Zip Code 38101-1140  Purpose of Disbursement Shipping 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-5414-10283-V Date of Disbursement 06 / 30 / 2008  Amount of Each Disbursement this Period 23.44  <b>[MEMO ITEM]</b> Subitemization of Master-card	
<b>C.</b>	Full Name (Last, First, Middle Initial) FedEx  Mailing Address PO Box 1140  City Memphis State TN Zip Code 38101-1140  Purpose of Disbursement Shipping 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-5414-10284-V Date of Disbursement 06 / 30 / 2008  Amount of Each Disbursement this Period 24.47  <b>[MEMO ITEM]</b> Subitemization of Master-card	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE 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 31 / 60

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b>	Full Name (Last, First, Middle Initial) FedEx  Mailing Address PO Box 1140  City Memphis State TN Zip Code 38101-1140  Purpose of Disbursement Shipping 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-5414-10289-V Date of Disbursement 06 / 30 / 2008  Amount of Each Disbursement this Period 26.25  <b>[MEMO ITEM]</b> Subitemization of Master-card	
<b>B.</b>	Full Name (Last, First, Middle Initial) FedEx  Mailing Address PO Box 1140  City Memphis State TN Zip Code 38101-1140  Purpose of Disbursement Shipping 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-5414-10290-V Date of Disbursement 06 / 30 / 2008  Amount of Each Disbursement this Period 29.20  <b>[MEMO ITEM]</b> Subitemization of Master-card	
<b>C.</b>	Full Name (Last, First, Middle Initial) First Financial Bank  Mailing Address 7795 Tylersville Road  City West Chester State OH Zip Code 45069-2592  Purpose of Disbursement Payroll taxes Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-3803-19669-e Date of Disbursement 06 / 30 / 2008  Amount of Each Disbursement this Period 2671.05	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2671.05
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) Guapos Mailing Address 4036 28th Street S City Arlington State VA Zip Code 22206-2202 Purpose of Disbursement Mtg. exp. food & bev. Candidate Name	Transaction ID: SB21B-10172-10267-V Date of Disbursement 06 / 30 / 2008
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Subitemization of Master-card

<b>B.</b> Full Name (Last, First, Middle Initial) Landini Brothers Mailing Address 115 King Street City Alexandria State VA Zip Code 22314-3207 Purpose of Disbursement Gen. fund. - food & bev. Candidate Name	Transaction ID: SB21B-10481-10269-V Date of Disbursement 06 / 30 / 2008
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Subitemization of Master-card

<b>C.</b> Full Name (Last, First, Middle Initial) Mastercard Mailing Address PO Box 70 City Middletown State OH Zip Code 45042 Purpose of Disbursement Credit card (see itemization) Candidate Name	Transaction ID: SB21B-3605-19600-e Date of Disbursement 06 / 30 / 2008
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>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	36273.06
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) National Journal Group	Transaction ID: SB21B-3639-10260-V Date of Disbursement
	Mailing Address 600 New Hampshire Avenue NW	<input type="text" value="06"/> <input type="text" value="30"/> / <input type="text" value="2008"/>
	City Washington State DC Zip Code 20037-2403	Amount of Each Disbursement this Period
	Purpose of Disbursement Subscription Candidate Name	<input type="text" value="5238.86"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] Subitemization of Master-card
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
		001 Category/Type

B.	Full Name (Last, First, Middle Initial) New Media Communications	Transaction ID: SB21B-7123-19548-e Date of Disbursement
	Mailing Address 3046 Brecksville Road	<input type="text" value="06"/> <input type="text" value="05"/> / <input type="text" value="2008"/>
	City Richfield State OH Zip Code 44286-9399	Amount of Each Disbursement this Period
	Purpose of Disbursement Website maintenance Candidate Name	<input type="text" value="4288.48"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] Subitemization of Master-card
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
		001 Category/Type

C.	Full Name (Last, First, Middle Initial) New Media Communications	Transaction ID: SB21B-7123-19601-e Date of Disbursement
	Mailing Address 3046 Brecksville Road	<input type="text" value="06"/> <input type="text" value="06"/> / <input type="text" value="2008"/>
	City Richfield State OH Zip Code 44286-9399	Amount of Each Disbursement this Period
	Purpose of Disbursement TFP contribution processing Candidate Name	<input type="text" value="2.14"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] Subitemization of Master-card
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
		003 Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="4290.62"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) New Media Communications	Transaction ID: SB21B-7123-19602-e Date of Disbursement
	Mailing Address 3046 Brecksville Road	<input type="text" value="06"/> / <input type="text" value="10"/> / <input type="text" value="2008"/>
	City Richfield State OH Zip Code 44286-9399	Amount of Each Disbursement this Period
	Purpose of Disbursement TFP contribution processing Candidate Name	<input type="text" value="1.52"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="003"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) New Media Communications	Transaction ID: SB21B-7123-19603-e Date of Disbursement
	Mailing Address 3046 Brecksville Road	<input type="text" value="06"/> / <input type="text" value="12"/> / <input type="text" value="2008"/>
	City Richfield State OH Zip Code 44286-9399	Amount of Each Disbursement this Period
	Purpose of Disbursement TFP contribution processing Candidate Name	<input type="text" value="202.90"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="003"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) New Media Communications	Transaction ID: SB21B-7123-19604-e Date of Disbursement
	Mailing Address 3046 Brecksville Road	<input type="text" value="06"/> / <input type="text" value="18"/> / <input type="text" value="2008"/>
	City Richfield State OH Zip Code 44286-9399	Amount of Each Disbursement this Period
	Purpose of Disbursement TFP contribution processing Candidate Name	<input type="text" value="108.30"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="003"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="312.72"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE 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 35 / 60

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) New Media Communications <hr/> Mailing Address 3046 Brecksville Road <hr/> City Richfield State OH Zip Code 44286-9399 <hr/> Purpose of Disbursement TFP contribution processing Candidate Name <hr/> 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-7123-19605-e Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 8 / 2 0 0 8
	Amount of Each Disbursement this Period 28.85
	Category/ Type 003
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) New Media Communications <hr/> Mailing Address 3046 Brecksville Road <hr/> City Richfield State OH Zip Code 44286-9399 <hr/> Purpose of Disbursement TFP contribution processing Candidate Name <hr/> 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-7123-19542-e Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 9 / 2 0 0 8
	Amount of Each Disbursement this Period 122.72
	Category/ Type 003
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) New Media Communications <hr/> Mailing Address 3046 Brecksville Road <hr/> City Richfield State OH Zip Code 44286-9399 <hr/> Purpose of Disbursement TFP contribution processing Candidate Name <hr/> 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-7123-19606-e Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 9 / 2 0 0 8
	Amount of Each Disbursement this Period 13.94
	Category/ Type 003
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	165.51
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b>	Full Name (Last, First, Middle Initial) New Media Communications  Mailing Address 3046 Brecksville Road  City Richfield State OH Zip Code 44286-9399 Purpose of Disbursement TFP contribution processing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-7123-19607-e Date of Disbursement 06 / 19 / 2008  Amount of Each Disbursement this Period 53.26  003 Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) New Media Communications  Mailing Address 3046 Brecksville Road  City Richfield State OH Zip Code 44286-9399 Purpose of Disbursement TFP contribution processing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-7123-19673-e Date of Disbursement 06 / 19 / 2008  Amount of Each Disbursement this Period 1.52  001 Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) New Media Communications  Mailing Address 3046 Brecksville Road  City Richfield State OH Zip Code 44286-9399 Purpose of Disbursement TFP contribution processing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-7123-19674-e Date of Disbursement 06 / 26 / 2008  Amount of Each Disbursement this Period 1.91  001 Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	56.69
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) Occasions Caterers Mailing Address 5458 3rd Street NE City Washington State DC Zip Code 20011-6316 Purpose of Disbursement Gen. fund. - food & bev. Candidate Name	Transaction ID: SB21B-4089-10275-V Date of Disbursement 06 / 30 / 2008 Amount of Each Disbursement this Period 2593.43

**[MEMO ITEM]**  
Subitemization of Master-card

<b>B.</b> Full Name (Last, First, Middle Initial) Office of Tax and Revenue Mailing Address PO Box 96385 City Washington State DC Zip Code 20090-6385 Purpose of Disbursement Payroll taxes Candidate Name	Transaction ID: SB21B-4077-19670-e Date of Disbursement 06 / 30 / 2008 Amount of Each Disbursement this Period 330.00

<b>C.</b> Full Name (Last, First, Middle Initial) Pepco Mailing Address PO Box 17143 City Baltimore State MD Zip Code 21297-1143 Purpose of Disbursement Utilities Candidate Name	Transaction ID: SB21B-9967-19545-e Date of Disbursement 06 / 05 / 2008 Amount of Each Disbursement this Period 66.59

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

396.59

**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)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Pepco	Transaction ID: SB21B-9967-19664-e
	Mailing Address PO Box 17143	Date of Disbursement 06 / 26 / 2008
	City Baltimore State MD Zip Code 21297-1143	Amount of Each Disbursement this Period 83.10
	Purpose of Disbursement Utilities Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PR Promotions	Transaction ID: SB21B-10478-19619-e
	Mailing Address PO Box 34407	Date of Disbursement 06 / 23 / 2008
	City Bethesda State MD Zip Code 20827-0407	Amount of Each Disbursement this Period 250.00
	Purpose of Disbursement TFP Bumper stickers Candidate Name	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Retire Debt -

C.	Full Name (Last, First, Middle Initial) Signs by Tomorrow	Transaction ID: SB21B-10514-10295-V
	Mailing Address 8609 16th Street	Date of Disbursement 06 / 30 / 2008
	City Silver Spring State MD Zip Code 20910-2261	Amount of Each Disbursement this Period 830.00
	Purpose of Disbursement TFP Printing Signage Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**[MEMO ITEM]**  
Subitemization of Master-card

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>333.10</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: SB21B-6636-10246-V Date of Disbursement
	Mailing Address 8 Technology Drive # 1020	<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City Westborough State MA Zip Code 01581-1756	Amount of Each Disbursement this Period
	Purpose of Disbursement Office supplies	<input type="text" value="93.05"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> Subitemization of Master-card

B.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: SB21B-6636-10248-V Date of Disbursement
	Mailing Address 8 Technology Drive # 1020	<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City Westborough State MA Zip Code 01581-1756	Amount of Each Disbursement this Period
	Purpose of Disbursement Office supplies	<input type="text" value="52.86"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> Subitemization of Master-card

C.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: SB21B-6636-10265-V Date of Disbursement
	Mailing Address 8 Technology Drive # 1020	<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City Westborough State MA Zip Code 01581-1756	Amount of Each Disbursement this Period
	Purpose of Disbursement Office supplies	<input type="text" value="76.71"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> Subitemization of Master-card

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

# SCHEDULE 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 40 / 60

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<p><b>A.</b> Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 8 Technology Drive # 1020</p> <p>City Westborough State MA Zip Code 01581-1756</p> <p>Purpose of Disbursement Office supplies</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><b>Transaction ID:</b> SB21B-6636-10271-V</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="95.15"/></p> <p><b>[MEMO ITEM]</b> Subitemization of Master-card</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Szechuan House Fusion Grill</p> <p>Mailing Address 515 8th Street SE</p> <p>City Washington State DC Zip Code 20003-2835</p> <p>Purpose of Disbursement Mtg. exp. food &amp; bev.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-10221-10245-V</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="120.40"/></p> <p><b>[MEMO ITEM]</b> Subitemization of Master-card</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Szechuan House Fusion Grill</p> <p>Mailing Address 515 8th Street SE</p> <p>City Washington State DC Zip Code 20003-2835</p> <p>Purpose of Disbursement Mtg. exp. food &amp; bev.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-10221-10272-V</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="130.40"/></p> <p><b>[MEMO ITEM]</b> Subitemization of Master-card</p>

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) The Greenbrier	Transaction ID: SB21B-5252-10279-V Date of Disbursement
	Mailing Address 300 W Main Street	<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City White Sulphur Spri State WV Zip Code 24986-2414	Amount of Each Disbursement this Period
	Purpose of Disbursement Gen. fund. - travel lodging Candidate Name	<input type="text" value="366.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] Subitemization of Master-card
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) The Greenbrier	Transaction ID: SB21B-5252-10280-V Date of Disbursement
	Mailing Address 300 W Main Street	<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City White Sulphur Spri State WV Zip Code 24986-2414	Amount of Each Disbursement this Period
	Purpose of Disbursement Gen. fund. - travel lodging Candidate Name	<input type="text" value="366.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] Subitemization of Master-card
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) The Greenbrier	Transaction ID: SB21B-5252-10281-V Date of Disbursement
	Mailing Address 300 W Main Street	<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City White Sulphur Spri State WV Zip Code 24986-2414	Amount of Each Disbursement this Period
	Purpose of Disbursement Gen. fund. - travel lodging Candidate Name	<input type="text" value="366.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] Subitemization of Master-card
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) The Greenbrier	Transaction ID: SB21B-5252-10287-V Date of Disbursement 06 / 30 / 2008
	Mailing Address 300 W Main Street	Amount of Each Disbursement this Period 366.00
	City White Sulphur Spri State WV Zip Code 24986-2414	
	Purpose of Disbursement Gen. fund. - travel lodging Candidate Name	002 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> Subitemization of Master-card

B.	Full Name (Last, First, Middle Initial) The Michelangelo	Transaction ID: SB21B-4347-10253-V Date of Disbursement 06 / 30 / 2008
	Mailing Address 152 W 51st Street	Amount of Each Disbursement this Period 884.56
	City New York State NY Zip Code 10019-6813	
	Purpose of Disbursement Gen. fund. travel lodging Candidate Name	002 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> Subitemization of Master-card

C.	Full Name (Last, First, Middle Initial) The Occidental Grill	Transaction ID: SB21B-8042-10254-V Date of Disbursement 06 / 30 / 2008
	Mailing Address 1475 Pennsylvania Avenue NW	Amount of Each Disbursement this Period 2000.00
	City Washington State DC Zip Code 20004-1046	
	Purpose of Disbursement Gen. fund. - food & bev deposit Candidate Name	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> Subitemization of Master-card

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE 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

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

NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) The Occidental Grill Mailing Address 1475 Pennsylvania Avenue NW City Washington State DC Zip Code 20004-1046 Purpose of Disbursement Gen. fund. - food & bev. Candidate Name	Transaction ID: SB21B-8042-10266-V Date of Disbursement 06 / 30 / 2008 Amount of Each Disbursement this Period 9926.05 [MEMO ITEM] Subitemization of Master-card

<b>B.</b> Full Name (Last, First, Middle Initial) TMA List Brokerage Mailing Address 12120 Sunset Hills Road Suite 450 City Reston State VA Zip Code 20190-5858 Purpose of Disbursement TFP fundraising list rental Candidate Name	Transaction ID: SB21B-10321-19663-e Date of Disbursement 06 / 26 / 2008 Amount of Each Disbursement this Period 5700.00

<b>C.</b> Full Name (Last, First, Middle Initial) Trattoria Alberto Mailing Address 506 8th Street SE City Washington State DC Zip Code 20003-2834 Purpose of Disbursement Mtg. exp. food & bev. Candidate Name	Transaction ID: SB21B-10171-10292-V Date of Disbursement 06 / 30 / 2008 Amount of Each Disbursement this Period 80.00 [MEMO ITEM] Subitemization of Master-card

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	5700.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) U.S. Airways	Transaction ID: SB21B-5507-10249-V
	Mailing Address 2345 Crystal Drive	Date of Disbursement 06 / 30 / 2008
	City Arlington State VA Zip Code 22227-0001	Amount of Each Disbursement this Period 100.00
	Purpose of Disbursement Gen. fund. - travel airfare Candidate Name	002 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> Subitemization of Master-card

B.	Full Name (Last, First, Middle Initial) Verizon	Transaction ID: SB21B-8324-19547-e
	Mailing Address PO Box 17577	Date of Disbursement 06 / 05 / 2008
	City Baltimore State MD Zip Code 21297-0513	Amount of Each Disbursement this Period 866.49
	Purpose of Disbursement Telephone Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Verizon	Transaction ID: SB21B-8324-19665-e
	Mailing Address PO Box 17577	Date of Disbursement 06 / 26 / 2008
	City Baltimore State MD Zip Code 21297-0513	Amount of Each Disbursement this Period 930.62
	Purpose of Disbursement Telephone Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1797.11
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) W. Millar and Co. Catering Mailing Address 1335 14th Street NW City Washington State DC Zip Code 20005-3610 Purpose of Disbursement Gen. fund. - food & bev. Candidate Name	Transaction ID: SB21B-10515-10297-V Date of Disbursement MM / DD / YYYY 06 / 30 / 2008
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 003
[MEMO ITEM] Subitemization of Master-card	

<b>B.</b> Full Name (Last, First, Middle Initial) Washington Courier Mailing Address 5520 Cherokee Avenue Suite 120 City Alexandria State VA Zip Code 22312-2319 Purpose of Disbursement Courier Candidate Name	Transaction ID: SB21B-9969-19544-e Date of Disbursement MM / DD / YYYY 06 / 05 / 2008
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

<b>C.</b> Full Name (Last, First, Middle Initial) Washington Courier Mailing Address 5520 Cherokee Avenue Suite 120 City Alexandria State VA Zip Code 22312-2319 Purpose of Disbursement Courier Candidate Name	Transaction ID: SB21B-9969-19661-e Date of Disbursement MM / DD / YYYY 06 / 26 / 2008
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	106.35
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE 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 46 / 60

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Wiley Rein LLP	Transaction ID: SB21B-3634-19660-e
	Mailing Address 1776 K Street NW	Date of Disbursement MM / DD / YYYY 06 / 26 / 2008
	City Washington State DC Zip Code 20006-2304	Amount of Each Disbursement this Period 3000.00
	Purpose of Disbursement Legal services	001 Category/ Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Whitaker Askew	Transaction ID: SB21B-3802-19590-e
	Mailing Address 3044 R Street NW	Date of Disbursement MM / DD / YYYY 06 / 15 / 2008
	City Washington State DC Zip Code 20007-2962	Amount of Each Disbursement this Period 1251.55
	Purpose of Disbursement Salary	001 Category/ Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Whitaker Askew	Transaction ID: SB21B-3802-19591-e
	Mailing Address 3044 R Street NW	Date of Disbursement MM / DD / YYYY 06 / 30 / 2008
	City Washington State DC Zip Code 20007-2962	Amount of Each Disbursement this Period 1251.54
	Purpose of Disbursement Salary	001 Category/ Type
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	5503.09
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Johnny DeStefano	Transaction ID: SB21B-10021-19592-e
	Mailing Address 1000 New Jersey Ave., SE #1011	Date of Disbursement MM / DD / YYYY 06 / 15 / 2008
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period 404.25
	Purpose of Disbursement Salary Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Johnny DeStefano	Transaction ID: SB21B-10021-19564-e
	Mailing Address 1000 New Jersey Ave., SE #1011	Date of Disbursement MM / DD / YYYY 06 / 16 / 2008
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period 105.00
	Purpose of Disbursement Mtg. exp. travel reimb. Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Johnny DeStefano	Transaction ID: SB21B-10021-19593-e
	Mailing Address 1000 New Jersey Ave., SE #1011	Date of Disbursement MM / DD / YYYY 06 / 30 / 2008
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period 404.25
	Purpose of Disbursement Salary Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>913.50</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Kevin Mcgrann</p> <p>Mailing Address 150 N Carolina Avenue SE</p> <p>City Washington State DC Zip Code 20003-1841</p> <p>Purpose of Disbursement Salary 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><b>Transaction ID:</b> SB21B-4052-19594-e <b>Date of Disbursement</b></p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p><b>Amount of Each Disbursement this Period</b></p> <p><input type="text" value="497.25"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Kevin Mcgrann</p> <p>Mailing Address 150 N Carolina Avenue SE</p> <p>City Washington State DC Zip Code 20003-1841</p> <p>Purpose of Disbursement Salary 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><b>Transaction ID:</b> SB21B-4052-19595-e <b>Date of Disbursement</b></p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p><b>Amount of Each Disbursement this Period</b></p> <p><input type="text" value="497.25"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Ashlee Reid</p> <p>Mailing Address 3250 N Street NW</p> <p>City Washington State DC Zip Code 20007-2838</p> <p>Purpose of Disbursement Salary 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><b>Transaction ID:</b> SB21B-10255-19596-e <b>Date of Disbursement</b></p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p><b>Amount of Each Disbursement this Period</b></p> <p><input type="text" value="782.87"/></p>

**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)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Ashlee Reid	Transaction ID: SB21B-10255-19597-e
	Mailing Address 3250 N Street NW	Date of Disbursement MM / DD / YYYY 06 / 30 / 2008
	City Washington State DC Zip Code 20007-2838	Amount of Each Disbursement this Period 782.87
	Purpose of Disbursement Salary Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Donald Seymour	Transaction ID: SB21B-10022-19598-e
	Mailing Address 401 Holland Lane #609	Date of Disbursement MM / DD / YYYY 06 / 15 / 2008
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period 1231.61
	Purpose of Disbursement Salary Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Donald Seymour	Transaction ID: SB21B-10022-19599-e
	Mailing Address 401 Holland Lane #609	Date of Disbursement MM / DD / YYYY 06 / 30 / 2008
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period 1231.61
	Purpose of Disbursement Salary Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3246.09</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE 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 50 / 60

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Jessica Towhey	Transaction ID: SB21B-4392-19588-e Date of Disbursement
	Mailing Address 618 N Carolina Avenue SE Apt. 3	<input type="text" value="06"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City Washington State DC Zip Code 20003-4392	Amount of Each Disbursement this Period
	Purpose of Disbursement Consulting-copywriting Candidate Name	<input type="text" value="250.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="003"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) Jessica Towhey	Transaction ID: SB21B-4392-19589-e Date of Disbursement
	Mailing Address 618 N Carolina Avenue SE Apt. 3	<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City Washington State DC Zip Code 20003-4392	Amount of Each Disbursement this Period
	Purpose of Disbursement Consulting-copywriting Candidate Name	<input type="text" value="250.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="003"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) BILIRAKIS FOR CONGRESS	Transaction ID: SB23-3925-19550-e Date of Disbursement
	Mailing Address 610 S Boulevard	<input type="text" value="06"/> <input type="text" value="12"/> / <input type="text" value="2008"/>
	City Tampa State FL Zip Code 33606-2693	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="5000.00"/>
	Candidate Name Gus Michael Bilirakis	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 09	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Bob Schaffer For Us Senate	Transaction ID: SB23-10457-19563-e Date of Disbursement
	Mailing Address PO Box 102135	<input type="text" value="06"/> <input type="text" value="16"/> / <input type="text" value="2008"/>
	City Denver State CO Zip Code 80250-2135	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="5000.00"/>
	Candidate Name Robert W Schaffer	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Chris Lee For Congress	Transaction ID: SB23-10468-19613-e Date of Disbursement
	Mailing Address PO Box 15395	<input type="text" value="06"/> <input type="text" value="25"/> / <input type="text" value="2008"/>
	City Rochester State NY Zip Code 14615-0395	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="5000.00"/>
	Candidate Name Christopher J. Lee	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 26	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="15000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<p><b>A.</b> Full Name (Last, First, Middle Initial) Chris Myers For Congress</p> <p>Mailing Address 112 High Street</p> <p>City Mount Holly State NJ Zip Code 08060-1402</p> <p>Purpose of Disbursement Contribution <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name Chris Myers</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NJ District: 03</p>	<p><b>Transaction ID:</b> SB23-10447-19557-e <b>Date of Disbursement</b>  <table border="1" style="width: 100%; text-align: center;"> <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>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>5000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	6		2	0	0	8	5000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		1	6		2	0	0	8													
5000.00																						
<p><b>B.</b> Full Name (Last, First, Middle Initial) Committee To Elect David Cappiello</p> <p>Mailing Address PO Box 3198</p> <p>City Danbury State CT Zip Code 06813-3198</p> <p>Purpose of Disbursement Contribution <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name David John Cappiello</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CT District: 05</p>	<p><b>Transaction ID:</b> SB23-10138-19543-e <b>Date of Disbursement</b>  <table border="1" style="width: 100%; text-align: center;"> <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>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>5000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	5		2	0	0	8	5000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		0	5		2	0	0	8													
5000.00																						
<p><b>C.</b> Full Name (Last, First, Middle Initial) Committee To Elect John Stone</p> <p>Mailing Address PO Box 2444</p> <p>City Augusta State GA Zip Code 30903-2444</p> <p>Purpose of Disbursement Contribution <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name John Erwin Stone, II</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: GA District: 12</p>	<p><b>Transaction ID:</b> SB23-10453-19561-e <b>Date of Disbursement</b>  <table border="1" style="width: 100%; text-align: center;"> <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>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>5000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	6		2	0	0	8	5000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		1	6		2	0	0	8													
5000.00																						

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1" style="width: 100%;"><tr><td style="text-align: center;">15000.00</td></tr></table>	15000.00
15000.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1" style="width: 100%;"><tr><td style="text-align: center;"> </td></tr></table>	

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) Culberson For Congress <hr/> Mailing Address PO Box 41964 <hr/> City Houston State TX Zip Code 77241-1964 <hr/> Purpose of Disbursement Contribution Candidate Name John Culberson Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 07 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-10466-19611-e Date of Disbursement 06 / 25 / 2008
	Amount of Each Disbursement this Period 5000.00
	Category/Type 011
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Friends Of Bill Posey <hr/> Mailing Address 1824 Fiske Boulevard <hr/> City Rockledge State FL Zip Code 32955-3045 <hr/> Purpose of Disbursement Contribution Candidate Name Bill Posey Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 15 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-10470-19614-e Date of Disbursement 06 / 25 / 2008
	Amount of Each Disbursement this Period 5000.00
	Category/Type 011
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Gard for Congress <hr/> Mailing Address PO Box 277 <hr/> City Green Bay State WI Zip Code 54305-0277 <hr/> Purpose of Disbursement Contribution Candidate Name John Gard Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 08 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-9879-19612-e Date of Disbursement 06 / 25 / 2008
	Amount of Each Disbursement this Period 5000.00
	Category/Type 011
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**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)

PAGE 54 / 60

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) Guthrie for Congress <hr/> Mailing Address 1005 Wrenwood Drive <hr/> City Bowling Green State KY Zip Code 42103-1593 <hr/> Purpose of Disbursement Contribution Candidate Name Steven Brett Guthrie <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 02 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-10247-19552-e Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2008
	Amount of Each Disbursement this Period 5000.00
	Category/Type 011
	Retire Debt - R2008
<b>B.</b> Full Name (Last, First, Middle Initial) House Republican Combined Nominee Fund <hr/> Mailing Address 228 S. Washington Stree Suite 115 <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-10477-19617-e Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2008
	Amount of Each Disbursement this Period 35000.00
	Category/Type 011
<b>C.</b> Full Name (Last, First, Middle Initial) Jay Love For Congress Committee <hr/> Mailing Address 1020 Monticello Court Suite 205 <hr/> City Montgomery State AL Zip Code 36117-1901 <hr/> Purpose of Disbursement Primary run-off contribution Candidate Name Jay K Love <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 02 Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-10472-19609-e Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2008
	Amount of Each Disbursement this Period 5000.00
	Category/Type 011

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	45000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<p><b>A.</b> Full Name (Last, First, Middle Initial) Jeff Thompson For Congress</p> <p>Mailing Address 2250 Hospital Drive Suite 200</p> <p>City Bossier City State LA Zip Code 71111-2168</p> <p>Purpose of Disbursement Contribution <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name Jefferson Rowe Thompson</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: LA District: 04</p>	<p><b>Transaction ID:</b> SB23-10476-19615-e <b>Date of Disbursement</b>  <table border="1" style="width: 100%; text-align: center;"> <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>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p><b>Amount of Each Disbursement this Period</b>  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>5000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	6	/	2	5	/	2	0	0	8	5000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	6	/	2	5	/	2	0	0	8													
5000.00																						
<p><b>B.</b> Full Name (Last, First, Middle Initial) Lance For Congress</p> <p>Mailing Address PO Box 225</p> <p>City Colonia State NJ Zip Code 07067-0225</p> <p>Purpose of Disbursement Contribution <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name Leonard Lance</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: NJ District: 07</p>	<p><b>Transaction ID:</b> SB23-10443-19555-e <b>Date of Disbursement</b>  <table border="1" style="width: 100%; text-align: center;"> <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>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p><b>Amount of Each Disbursement this Period</b>  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>5000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	6	/	1	6	/	2	0	0	8	5000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	6	/	1	6	/	2	0	0	8													
5000.00																						
<p><b>C.</b> Full Name (Last, First, Middle Initial) Latham for Congress</p> <p>Mailing Address PO Box 71</p> <p>City Clarion State IA Zip Code 50525-0071</p> <p>Purpose of Disbursement Contribution <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name Thomas P Latham</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: IA District: 04</p>	<p><b>Transaction ID:</b> SB23-8616-19616-e <b>Date of Disbursement</b>  <table border="1" style="width: 100%; text-align: center;"> <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>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p><b>Amount of Each Disbursement this Period</b>  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>5000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	6	/	2	5	/	2	0	0	8	5000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	6	/	2	5	/	2	0	0	8													
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)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Lobiondo For Congress	Transaction ID: SB23-10464-19586-e
	Mailing Address PO Box 775	Date of Disbursement 06 / 02 / 2008
	City Marmora State NJ Zip Code 08223-0775	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Contribution Candidate Name Frank A, Lobiondo	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 02	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Mario Diaz-Balart For Congress	Transaction ID: SB23-10285-19551-e
	Mailing Address 95 Merrick Way Suite 250	Date of Disbursement 06 / 16 / 2008
	City Coral Gables State FL Zip Code 33134-5314	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Contribution Candidate Name Mario Diaz-Balart	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 25	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Mary Bono Mack Committee	Transaction ID: SB23-6682-19585-e
	Mailing Address PO Box 3370	Date of Disbursement 06 / 02 / 2008
	City Palm Springs State CA Zip Code 92263-3370	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Contribution Candidate Name Mary Bono	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 45	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	15000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Mccaal For Congress Inc	Transaction ID: SB23-10512-19667-e
	Mailing Address 815A Brazos Street PMB 230	Date of Disbursement 06 / 26 / 2008
	City Austin State TX Zip Code 78701-2502	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Contribution Candidate Name Michael Mccaal	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 10	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Mcclintock For Congress	Transaction ID: SB23-10445-19556-e
	Mailing Address 2150 River Plaza Drive Suite 150	Date of Disbursement 06 / 16 / 2008
	City Sacramento State CA Zip Code 95833-4131	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Contribution Candidate Name Thomas Mcclintock	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 04	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) McMorris Rodgers for Congress	Transaction ID: SB23-9490-19554-e
	Mailing Address PO Box 137	Date of Disbursement 06 / 16 / 2008
	City Spokane State WA Zip Code 99210-0137	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Contribution Candidate Name Cathy Ann McMorris Rodgers	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 05	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	15000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE 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 58 / 60

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<p><b>A.</b> Full Name (Last, First, Middle Initial) National Republican Congressional Committee</p> <p>Mailing Address 320 1st Street SE</p> <p>City Washington State DC Zip Code 20003-1838</p> <p>Purpose of Disbursement 2008 Contribution</p> <p>Candidate Name National Republican Congressional Committee</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-7991-19618-e <b>Date of Disbursement</b> 06 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 15000.00</p> <p>011 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Parker For Congress</p> <p>Mailing Address PO Box 16135</p> <p>City Huntsville State AL Zip Code 35802-1663</p> <p>Purpose of Disbursement Primary Run-off contribution</p> <p>Candidate Name Wayne Parker, Jr.</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 05</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Retire Debt - R2008</p>	<p><b>Transaction ID:</b> SB23-10474-19608-e <b>Date of Disbursement</b> 06 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) PEOPLE WITH HART INC</p> <p>Mailing Address PO Box 435</p> <p>City Wexford State PA Zip Code 15090-0435</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Melissa A. Hart</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 04</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-3922-19553-e <b>Date of Disbursement</b> 06 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/ Type</p>

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

25000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) Scalise For Congress 08 <hr/> Mailing Address 3100 Ridgelake Drive Suite 301 <hr/> City Metairie State LA Zip Code 70002-4938 <hr/> Purpose of Disbursement Contribution Candidate Name Mr. Steve Scalise Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 01 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-10451-19559-e Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 8
	Amount of Each Disbursement this Period 5000.00 Category/Type 011

<b>B.</b> Full Name (Last, First, Middle Initial) Shelley Moore Capito for Congress <hr/> Mailing Address PO Box 11519 <hr/> City Charleston State WV Zip Code 25339-1519 <hr/> Purpose of Disbursement Contribution Candidate Name Shelley Moore Capito Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 02 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-8362-19610-e Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 5 / 2 0 0 8
	Amount of Each Disbursement this Period 5000.00 Category/Type 011

<b>C.</b> Full Name (Last, First, Middle Initial) Steve Austria For Congress <hr/> Mailing Address 2537 Obetz Drive <hr/> City Beaver creek State OH Zip Code 45434-6956 <hr/> Purpose of Disbursement Contribution Candidate Name Steve C Austria Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 07 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-10201-19560-e Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 8
	Amount of Each Disbursement this Period 5000.00 Category/Type 011

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	15000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 60 / 60

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)  
Tinsley For Congress

Transaction ID: SB23-10449-19558-e  
Date of Disbursement

Mailing Address PO Box 708

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	6		2	0	0	8

City State Zip Code  
Capitan NM 88316-0708

Amount of Each Disbursement this Period

5000.00
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Purpose of Disbursement  
Contribution

011
Category/ Type

Candidate Name  
Edward R Tinsley, III

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: NM District: 02

SUBTOTAL of Disbursements This Page (optional) ..... ►

5000.00
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TOTAL This Period (last page this line number only) ..... ►

180000.00
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