

**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	4

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		255568.08
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	262585.94									
(c) Total Receipts (from Line 19)	100412.91	326104.43								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	362998.85	581672.51								
7. Total Disbursements (from Line 31)	72956.98	291630.64								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	290041.87	290041.87								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
FREEDOM PROJECT; THE

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	29750.00	62250.00
(i) Itemized (use Schedule A)	0.00	500.00
(ii) Unitemized	29750.00	62750.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	70500.00	258500.00
(c) Other Political Committees (such as PACs)	100250.00	321250.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	162.91	4854.43
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total 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))	100412.91	326104.43
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	100412.91	326104.43

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	31956.98	153914.73
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	31956.98	153914.73
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	46000.00	142715.91
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	-5000.00	-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))..	72956.98	291630.64
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	72956.98	291630.64

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)	100250.00	321250.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	100250.00	321250.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	31956.98	153914.73
37. Offsets to Operating Expenditures (from Line 15, page 3)	162.91	4854.43
38. Net Operating Expenditures (subtract Line 37 from Line 36)	31794.07	149060.30

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 46
	<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	

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)
Mr. James Woodroffe

Mailing Address 2805 Samara Drive

City Tampa State FL Zip Code 33618-4024

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

Name of Employer Alcade & Fay Occupation Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: SA11A1-827-8093-c

Amount of Each Receipt this Period
1000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Michael Boland

Mailing Address 3218 Thornapple Street

City Chevy Chase State MD Zip Code 20815-4048

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

Name of Employer Boland & Madigan Occupation Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 0 7

Transaction ID: SA11A1-937-8086-c

Amount of Each Receipt this Period
1500.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Michael Bates

Mailing Address 1320 Argyll Drive

City Arnold State MD Zip Code 21012-2104

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

Name of Employer Timmons and Company, Inc. Occupation Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: SA11A1-3033-8074-c

Amount of Each Receipt this Period
1500.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	4000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial)
Ms. Virginia Loper

Mailing Address 3309 23rd Street N

City Arlington State VA Zip Code 22201-4310

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

Name of Employer Timmons & Co. Occupation Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: SA11A1-3693-8071-c

Amount of Each Receipt this Period
1500.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. Bryce Harlow

Mailing Address 1812 Solitaire Lane

City Mclean State VA Zip Code 22101-4200

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

Name of Employer Timmons and Company, Inc. Occupation President & Managing Dir.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: SA11A1-3697-8073-c

Amount of Each Receipt this Period
1500.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Malcolm Everett, III

Mailing Address 1501 Maryland Avenue

City Charlotte State NC Zip Code 28209-1529

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

Name of Employer Wachovia Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 0 7

Transaction ID: SA11A1-3883-8049-c

Amount of Each Receipt this Period
500.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	3500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial)
Mr. Sherrill Hudson

Mailing Address 745 San Esteban Avenue

City State Zip Code
Coral Gables FL 33146-1215

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

Name of Employer Occupation
TECO Energy Chairman & CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 23 / 2007

Transaction ID: SA11A1-4490-8092-c

Amount of Each Receipt this Period
1000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. James Miller

Mailing Address 1900 K Street NW

City State Zip Code
Washington DC 20006-1110

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

Name of Employer Occupation
Hunton & Williams Partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 30 / 2007

Transaction ID: SA11A1-4491-8088-c

Amount of Each Receipt this Period
1500.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. James Delay

Mailing Address 9432 Preston Trail W

City State Zip Code
Ponte Vedra Beach FL 32082-3308

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

Name of Employer Occupation
Clark Consulting Financial Services

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 12 / 2007

Transaction ID: SA11A1-4484-8083-c

Amount of Each Receipt this Period
250.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	2750.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial)
Mrs. Steven Schramm

Mailing Address 444 Whitestone Court

City State Zip Code
Cincinnati OH 45231-2716

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

Name of Employer
OK Interiors Corp.

Occupation
President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
04 / 12 / 2007

Transaction ID: SA11A1-4485-8084-c

Amount of Each Receipt this Period
2500.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. Stephen Clark

Mailing Address 9273 Lerwick Drive

City State Zip Code
Dublin OH 43017-9492

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

Name of Employer
Clark & Associates

Occupation
President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
04 / 30 / 2007

Transaction ID: SA11A1-4486-8087-c

Amount of Each Receipt this Period
2500.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Gordon Gillette

Mailing Address 13908 Shady Shores Drive

City State Zip Code
Tampa FL 33613-1900

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

Name of Employer
TECO Energy

Occupation
Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
04 / 23 / 2007

Transaction ID: SA11A1-4487-8089-c

Amount of Each Receipt this Period
500.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	5500.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial)
Mr. Clinton Childress

Mailing Address 5921 Falconwood Place

City State Zip Code
Lithia FL 33547-5830

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

Name of Employer Occupation
TECO Energy VP, Corporate Services

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: SA11A1-4488-8090-c

Amount of Each Receipt this Period
500.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mrs. Janet Sena

Mailing Address 7760 Chars Lane

City State Zip Code
Springfield VA 22153-1841

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

Name of Employer Occupation
TEC Energy VP, Federal Affairs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: SA11A1-4489-8091-c

Amount of Each Receipt this Period
1000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Richard Hunt

Mailing Address 913 Bernard Street

City State Zip Code
Alexandria VA 22314-1209

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

Name of Employer Occupation
Securities Industry Assoc. Government Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 0 7

Transaction ID: SA11A1-4460-8062-c

Amount of Each Receipt this Period
1500.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial)
John Kelliher

Mailing Address 202 N Royal Street

City State Zip Code
Alexandria VA 22314-2627

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

Name of Employer Occupation
Timmons and Company Inc. Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: SA11A1-4470-8072-c

Amount of Each Receipt this Period
1500.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. Tom Rankin

Mailing Address 101 E Kennedy Boulevard

City State Zip Code
Tampa FL 33602-5179

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

Name of Employer Occupation
Self Private Investor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: SA11A1-4472-8078-c

Amount of Each Receipt this Period
1000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Richard Beard, III

Mailing Address 100 N Tampa Street Suite 2175

City State Zip Code
Tampa FL 33602-5858

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

Name of Employer Occupation
R.A. Beard Co. President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: SA11A1-4473-8079-c

Amount of Each Receipt this Period
1000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	3500.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial)
Mr. John Ramil

Mailing Address 6416 E Maclaurin Drive

City Tampa State FL Zip Code 33647-1170

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

Name of Employer TECO Energy, Inc. Occupation President & COO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: SA11A1-4474-8080-c

Amount of Each Receipt this Period
1000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Ms. Sheila McDevitt

Mailing Address 16750 Gulf Boulevard Apt. 215

City North Redington Be State FL Zip Code 33708-1586

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

Name of Employer TECO Energy Occupation Sr. VP, Chief Legal Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: SA11A1-4475-8081-c

Amount of Each Receipt this Period
500.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Edward Kutler

Mailing Address 6405 Tree Top Circle

City Columbia State MD Zip Code 21045-2895

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

Name of Employer Clark & Weinstock Occupation Managing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 0 7

Transaction ID: SA11A1-4009-8085-c

Amount of Each Receipt this Period
1500.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial)
Mr. Christopher Cox

Mailing Address 3106 Russell Road

City State Zip Code
Alexandria VA 22305-1720

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

Name of Employer Navigators Occupation Principal

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

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

Transaction ID: SA11A1-4039-8082-c

Amount of Each Receipt this Period
2500.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. Vincent Randazzo

Mailing Address 5022 Kimblewyck Lane

City State Zip Code
Charlotte NC 28226-6464

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

Name of Employer Wachovia Occupation Public Affairs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 0 7

Transaction ID: SA11A1-4450-8051-c

Amount of Each Receipt this Period
500.00

Contribution

C. Full Name (Last, First, Middle Initial)
Lauren Steele

Mailing Address 3022 Chaucer Drive

City State Zip Code
Charlotte NC 28210-4810

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

Name of Employer Coca-Cola Consolidated Occupation Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 0 7

Transaction ID: SA11A1-4452-8052-c

Amount of Each Receipt this Period
500.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **3500.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 / 46
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial)
John Hines, Jr.

Mailing Address 675 Hempstead Place

City State Zip Code
Charlotte NC 28207-2319

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

Name of Employer Occupation
Wachovia Corporation Investment Banker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
04 / 30 / 2007

Transaction ID: SA11A1-4453-8053-c

Amount of Each Receipt this Period
500.00

Contribution

B. Full Name (Last, First, Middle Initial)
Thomas Beddow

Mailing Address 19 Edinburgh Lane

City State Zip Code
Pinehurst NC 28374-6714

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

Name of Employer Occupation
3M Corporation Vice President Public Affairs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
04 / 30 / 2007

Transaction ID: SA11A1-4458-8060-c

Amount of Each Receipt this Period
500.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	29750.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 / 46
	(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)
CSX Corp. PAC

Mailing Address 1331 Pennsylvania Avenue NW
Suite 560

City State Zip Code
Washington DC 20004-1745

FEC ID number of contributing federal political committee. **C** C00163832

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 0 7

Transaction ID: SA11C-312-8066-c

Amount of Each Receipt this Period
5000.00

Contribution

B. Full Name (Last, First, Middle Initial)
WINE AND SPIRITS WHOLESALERS OF AMERICA INC. POLITICAL ACTION COMMITTEE

Mailing Address 805 15th Street NW
Suite 430

City State Zip Code
Washington DC 20005-2273

FEC ID number of contributing federal political committee. **C** C00147173

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 4 / 3 0 / 2 0 0 7

Transaction ID: SA11C-3629-8061-c

Amount of Each Receipt this Period
2500.00

Contribution

C. Full Name (Last, First, Middle Initial)
AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)

Mailing Address 1120 Connecticut Avenue NW

City State Zip Code
Washington DC 20036-3902

FEC ID number of contributing federal political committee. **C** C00004275

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 4 / 3 0 / 2 0 0 7

Transaction ID: SA11C-3632-8063-c

Amount of Each Receipt this Period
2500.00

Contribution

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 46
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. WACHOVIA CORPORATION EMPLOYEES GOOD GOVERNMENT FEDERAL FUND I		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address 301 S College Street		Transaction ID: SA11C-3841-8050-c
City State Zip Code Charlotte NC 28288-0001	FEC ID number of contributing federal political committee. C C00012518	Amount of Each Receipt this Period 5000.00
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. BUCHANAN INGERSOLL PROFESSIONAL CORPORATION COMMITTEE FOR EFFECTIVE GOVERNMENT		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address 1 Oxford Center		Transaction ID: SA11C-3858-8065-c
City State Zip Code Pittsburgh PA 15219-1400	FEC ID number of contributing federal political committee. C C00195388	Amount of Each Receipt this Period 2500.00
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2500.00	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. BUILD POLITICAL ACTION COMMITTEE OF THE NATIONAL ASSOCIATION OF HOME BUILDERS		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address 1201 15th Street NW		Transaction ID: SA11C-3870-8057-c
City State Zip Code Washington DC 20005-2842	FEC ID number of contributing federal political committee. C C00000901	Amount of Each Receipt this Period 5000.00
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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

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

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

FOR LINE NUMBER: PAGE 17 / 46
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial)
A. Vanguard Group Committee For Responsible Government (vanguard Committee For Responsibl,
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
M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 0 7
Transaction ID: SA11C-4468-8067-c
Amount of Each Receipt this Period
2500.00
Contribution

Full Name (Last, First, Middle Initial)
B. NORFOLK SOUTHERN CORP GOOD GOVT. FUND
Mailing Address 3 Commercial Place
City State Zip Code
Norfolk VA 23510-2108
FEC ID number of contributing federal political committee. **C** C00009282
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 4 / 3 0 / 2 0 0 7
Transaction ID: SA11C-2660-8068-c
Amount of Each Receipt this Period
2500.00
Contribution

Full Name (Last, First, Middle Initial)
C. AMERICAN HOTEL AND LODGING ASSOCIATION PAC
Mailing Address 1201 New York Avenue NW
Floor 6
City State Zip Code
Washington DC 20005-3917
FEC ID number of contributing federal political committee. **C** C00001198
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 4 / 3 0 / 2 0 0 7
Transaction ID: SA11C-4262-8070-c
Amount of Each Receipt this Period
5000.00
Contribution

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 46
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. NATIONAL THOROUGHbred RACING ASSOCIATION POLITICAL ACTION COMMITTEE/HORSE PAC		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address 2525 Harrodsburg Road		Transaction ID: SA11C-4263-8058-c
City Lexington State KY Zip Code 40504-3355	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00360008	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	Amount of Each Receipt this Period 5000.00	

Full Name (Last, First, Middle Initial) B. CHICAGO BOARD OF OPTIONS EXCHANGE INC PAC		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address 400 S. LaSalle Street		Transaction ID: SA11C-4268-8075-c
City Chicago State IL Zip Code 60605	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00100693	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	Amount of Each Receipt this Period 2500.00	

Full Name (Last, First, Middle Initial) C. Checkfree Corp. PAC		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address 4411 E Jones Bridge Road		Transaction ID: SA11C-4462-8064-c
City Norcross State GA Zip Code 30092-1615	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C C00378166	Contribution	
Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Aggregate Year-to-Date 2000.00	Amount of Each Receipt this Period 2000.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 / 46
	(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)
Johnson & Johnson Political Action Committee

Mailing Address 1 Johnson And Johnson Plaza

City State Zip Code
New Brunswick NJ 08933-0001

FEC ID number of contributing federal political committee. **C** C00010983

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 4 / 2 3 / 2 0 0 7

Transaction ID: SA11C-4471-8076-c

Amount of Each Receipt this Period
2500.00

Contribution

B. Full Name (Last, First, Middle Initial)
3M PAC

Mailing Address 3M Center

City State Zip Code
Saint Paul MN 55144-1001

FEC ID number of contributing federal political committee. **C** C00084475

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 3 0 / 2 0 0 7

Transaction ID: SA11C-4457-8059-c

Amount of Each Receipt this Period
1000.00

Contribution

C. Full Name (Last, First, Middle Initial)
TECO ENERGY INC., EMPLOYEES PAC

Mailing Address 702 N Franklin Street

City State Zip Code
Tampa FL 33602-4429

FEC ID number of contributing federal political committee. **C** C00161422

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 4 / 3 0 / 2 0 0 7

Transaction ID: SA11C-156-8069-c

Amount of Each Receipt this Period
5000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	8500.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 46
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Natl. Assoc. of Insurance and Financial Advisors (NAIFA PAC)		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address 2901 Telestar Court		Transaction ID: SA11C-2072-8056-c
City Falls Church State VA Zip Code 22042-1260	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00005249	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		

Full Name (Last, First, Middle Initial) B. ACCENTURE PAC		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address 800 Connecticut Avenue NW		Transaction ID: SA11C-3979-8048-c
City Washington State DC Zip Code 20006-2709	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00300707	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		

Full Name (Last, First, Middle Initial) C. LORILLARD TOBACCO COMPANY PUBLIC AFFAIRS COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address 714 Green Valley Road		Transaction ID: SA11C-4002-8094-c
City Greensboro State NC Zip Code 27408-7018	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00112888	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		

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 46
	(check only one)
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. NATIONAL VENTURE CAPITAL ASSOCIATION VENTUREPAC		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address 1655 Fort Myer Drive		Transaction ID: SA11C-4115-8054-c
City State Zip Code Arlington VA 22209-3113	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00150367	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		

Full Name (Last, First, Middle Initial) B. KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address 655 15th Street NW Suite 445		Transaction ID: SA11C-4186-8055-c
City State Zip Code Washington DC 20005-5727	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00236489	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		

SUBTOTAL of Receipts This Page (optional) ▶	7500.00
TOTAL This Period (last page this line number only) ▶	70500.00

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. Delta Airlines Full Name (Last, First, Middle Initial) Mailing Address: Rightway Travel NASA Building City: Stennis Space Cent State: MS Zip Code: 39529 Purpose of Disbursement: Gen. fund., - air travel 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-396-7957-V Date of Disbursement: MM / DD / YYYY 04 / 24 / 2007 Amount of Each Disbursement this Period 424.40 [MEMO ITEM] Subitemization of Master-card
--	--	---

B. FedEx Full Name (Last, First, Middle Initial) 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-514-7972-V Date of Disbursement: MM / DD / YYYY 04 / 24 / 2007 Amount of Each Disbursement this Period 49.88 [MEMO ITEM] Subitemization of Master-card
--	--	--

C. FedEx Full Name (Last, First, Middle Initial) 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-514-7976-V Date of Disbursement: MM / DD / YYYY 04 / 24 / 2007 Amount of Each Disbursement this Period 18.54 [MEMO ITEM] Subitemization of Master-card
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 23 / 46

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

<p>A. Full Name (Last, First, Middle Initial) FedEx</p> <p>Mailing Address PO Box 1140</p> <p>City Memphis State TN Zip Code 38101-1140</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-514-7969-V</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="53.49"/></p> <p>[MEMO ITEM] Subitemization of Master-card</p>	
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text" value="001"/></p>	

<p>B. Full Name (Last, First, Middle Initial) FedEx</p> <p>Mailing Address PO Box 1140</p> <p>City Memphis State TN Zip Code 38101-1140</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-514-7982-V</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="20.96"/></p> <p>[MEMO ITEM] Subitemization of Master-card</p>	
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text" value="001"/></p>	

<p>C. Full Name (Last, First, Middle Initial) FedEx</p> <p>Mailing Address PO Box 1140</p> <p>City Memphis State TN Zip Code 38101-1140</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-514-7983-V</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="23.87"/></p> <p>[MEMO ITEM] Subitemization of Master-card</p>	
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text" value="001"/></p>	

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Clark, Schaefer, Hackett & Co.		Transaction ID: SB21B-1382-8019-e Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7
Mailing Address 160 N Breiel Boulevard		Amount of Each Disbursement this Period 45.00
City Middletown State OH Zip Code 45042-3806	Purpose of Disbursement Payroll processing Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) B. Intuit		Transaction ID: SB21B-3874-8026-e Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 113.98
City Mountain View State CA Zip Code 94043-1126	Purpose of Disbursement Printing Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) C. Intuit		Transaction ID: SB21B-3874-8024-e Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 68.39
City Mountain View State CA Zip Code 94043-1126	Purpose of Disbursement Printing Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ▶

227.37

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

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

Use separate schedule(s) for each category of the Detailed Summary 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. Intuit Full Name (Last, First, Middle Initial) Mailing Address 2632 Marine Way City Mountain View State CA Zip Code 94043-1126 Purpose of Disbursement Printing 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-3874-8025-e Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7 Amount of Each Disbursement this Period: 56.98 Category/Type: 001
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B. Capitol Associates III-X Full Name (Last, First, Middle Initial) Mailing Address 426 C Street NE City Washington State DC Zip Code 20002-5818 Purpose of Disbursement Office rent Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-4390-8021-e Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 7 Amount of Each Disbursement this Period: 625.00 Category/Type: 001
--	--	---

C. Whitaker Mr. Askew Full Name (Last, First, Middle Initial) Mailing Address 3044 R Street NW City Washington State DC Zip Code 20007-2962 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-3802-8017-e Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7 Amount of Each Disbursement this Period: 1954.85 Category/Type: 001
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SUBTOTAL of Disbursements This Page (optional) ▶	2636.83
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 26 / 46

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Whitaker Mr. Askew		Transaction ID: SB21B-3802-8031-e Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address 3044 R Street NW		Amount of Each Disbursement this Period 1954.84
City Washington State DC Zip Code 20007-2962	Purpose of Disbursement Salary Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Kevin Mr. McGrann		Transaction ID: SB21B-4052-8018-e Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7
Mailing Address 150 N Carolina Avenue SE		Amount of Each Disbursement this Period 976.50
City Washington State DC Zip Code 20003-1841	Purpose of Disbursement Salary Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. First Financial Bank		Transaction ID: SB21B-3803-8013-e Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address 7795 Tylersville Road		Amount of Each Disbursement this Period 32.00
City West Chester State OH Zip Code 45069-2592	Purpose of Disbursement Bank fees Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2963.34
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE 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 27 / 46

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

<p>A. Full Name (Last, First, Middle Initial) Clark, Schaefer, Hackett & Co.</p>		<p>Transaction ID: SB21B-1382-8033-e Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		3	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		3	0		2	0	0	7													
<p>Mailing Address 160 N Breiel Boulevard</p>		<p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td>45.00</td> </tr> </table>	45.00																			
45.00																						
<p>City Middletown State OH Zip Code 45042-3806</p>	<p>Purpose of Disbursement Payroll processing</p>																					
<p>Candidate Name</p>	<p>001 Category/Type</p>																					
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>																					
<p>State: District:</p>																						

<p>B. Full Name (Last, First, Middle Initial) First Financial Bank</p>		<p>Transaction ID: SB21B-3803-8034-e Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		3	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		3	0		2	0	0	7													
<p>Mailing Address 7795 Tylersville Road</p>		<p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td>2389.90</td> </tr> </table>	2389.90																			
2389.90																						
<p>City West Chester State OH Zip Code 45069-2592</p>	<p>Purpose of Disbursement Payroll taxes</p>																					
<p>Candidate Name</p>	<p>001 Category/Type</p>																					
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>																					
<p>State: District:</p>																						

<p>C. Full Name (Last, First, Middle Initial) Kevin Mr. McGrann</p>		<p>Transaction ID: SB21B-4052-8030-e Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		3	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		3	0		2	0	0	7													
<p>Mailing Address 150 N Carolina Avenue SE</p>		<p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td>976.49</td> </tr> </table>	976.49																			
976.49																						
<p>City Washington State DC Zip Code 20003-1841</p>	<p>Purpose of Disbursement Salary</p>																					
<p>Candidate Name</p>	<p>001 Category/Type</p>																					
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>																					
<p>State: District:</p>																						

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>3411.39</p>
<p>TOTAL This Period (last page this line number only)</p>	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Jessica Towhey		Transaction ID: SB21B-4392-8015-e Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address 618 N Carolina Avenue SE Apt. 3		Amount of Each Disbursement this Period 250.00
City Washington State DC Zip Code 20003-4392		
Purpose of Disbursement Consulting, Copywriting	Candidate Name	001 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Jessica Towhey		Transaction ID: SB21B-4392-8032-e Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address 618 N Carolina Avenue SE Apt. 3		Amount of Each Disbursement this Period 250.00
City Washington State DC Zip Code 20003-4392		
Purpose of Disbursement Consulting Copywriting	Candidate Name	001 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Department of Employment Services		Transaction ID: SB21B-4076-8016-e Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7
Mailing Address PO Box 96664		Amount of Each Disbursement this Period 532.98
City Washington State DC Zip Code 20090-6664		
Purpose of Disbursement Payroll taxes	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) ▶	1032.98
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Office of Tax and Revenue		Transaction ID: SB21B-4077-8035-e Date of Disbursement MM / DD / YYYY 04 / 30 / 2007
Mailing Address PO Box 96385		Amount of Each Disbursement this Period 494.00
City Washington State DC Zip Code 20090-6385	Purpose of Disbursement Payroll taxes Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) B. La Quinta Resort & Club		Transaction ID: SB21B-1804-7952-V Date of Disbursement MM / DD / YYYY 04 / 24 / 2007
Mailing Address 49499 Eisenhower Drive		Amount of Each Disbursement this Period 600.00
City La Quinta State CA Zip Code 92253-2722	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:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 003 [MEMO ITEM] Subitemization of Master-card

Full Name (Last, First, Middle Initial) C. FedEx		Transaction ID: SB21B-514-8023-e Date of Disbursement MM / DD / YYYY 04 / 19 / 2007
Mailing Address PO Box 1140		Amount of Each Disbursement this Period 6.14
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) ▼	Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ▶	500.14
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Mastercard		Transaction ID: SB21B-3605-8037-e Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address PO Box 70		Amount of Each Disbursement this Period 16928.77
City Middletown State OH Zip Code 45042	Purpose of Disbursement Credit Card Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type 001

Full Name (Last, First, Middle Initial) B. Wiley Rein & Fielding, LLP		Transaction ID: SB21B-3634-8027-e Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 1776 K Street NW		Amount of Each Disbursement this Period 2001.87
City Washington State DC Zip Code 20006-2304	Purpose of Disbursement Legal services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type 001

Full Name (Last, First, Middle Initial) C. Verizon Wireless		Transaction ID: SB21B-3722-8028-e Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address PO Box 17464		Amount of Each Disbursement this Period 748.04
City Baltimore State MD Zip Code 21297-1464	Purpose of Disbursement Telephone Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ▶	19678.68
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input 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. Venturehouse Group Full Name (Last, First, Middle Initial) Mailing Address 509 7th Street NW City Washington State DC Zip Code 20004-1600 Purpose of Disbursement Office rent Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-3787-8014-e Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7 Amount of Each Disbursement this Period: 1250.00 Category/Type: 001
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B. The Alamo Travel Group Full Name (Last, First, Middle Initial) Mailing Address 9000 Wurzbach Road City San Antonio State TX Zip Code 78240-1038 Purpose of Disbursement Gen. fund. - travel reservation fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B-4316-7986-V Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7 Amount of Each Disbursement this Period: 50.00 Category/Type: 002 [MEMO ITEM] Subitemization of Master-card
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C. FedEx Full Name (Last, First, Middle Initial) 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-514-7984-V Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7 Amount of Each Disbursement this Period: 35.20 Category/Type: 001 [MEMO ITEM] Subitemization of Master-card
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SUBTOTAL of Disbursements This Page (optional) ▶	1250.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

<p>A. Mastercard</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 70</p> <p>City Middletown State OH Zip Code 45042</p> <p>Purpose of Disbursement Finance charge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-3605-7987-V</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="193.59"/></p> <p>[MEMO ITEM] Subitemization of Master-card</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text" value="001"/></p>

<p>B. Verizon Wireless</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 17464</p> <p>City Baltimore State MD Zip Code 21297-1464</p> <p>Purpose of Disbursement Telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-3722-7979-V</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="366.99"/></p> <p>[MEMO ITEM] Subitemization of Master-card</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text" value="001"/></p>

<p>C. Boca Raton Resort</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 501 E Camino Real</p> <p>City Boca Raton State FL Zip Code 33432-6127</p> <p>Purpose of Disbursement Gen. Fund., travel, lodging</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-609-7949-V</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1433.28"/></p> <p>[MEMO ITEM] Subitemization of Master-card</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text" value="002"/></p>

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

<p>A. Boca Raton Resort</p> <p>Full Name (Last, First, Middle Initial) Boca Raton Resort</p> <p>Mailing Address 501 E Camino Real</p> <p>City Boca Raton State FL Zip Code 33432-6127</p> <p>Purpose of Disbursement Gen. Fund., travel lodging</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-609-7950-V</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1588.26"/></p> <p>[MEMO ITEM] Subitemization of Master-card</p>
<p>Purpose of Disbursement Gen. Fund., travel lodging</p> <p>Candidate Name</p> <p>Category/Type <input type="text" value="002"/></p>		
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p>B. The Palm Tampa Bay</p> <p>Full Name (Last, First, Middle Initial) The Palm Tampa Bay</p> <p>Mailing Address 205 Westshore Plaza Drive</p> <p>City Tampa State FL Zip Code 33609</p> <p>Purpose of Disbursement Gen. fund. food & beverage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-4479-7971-V</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="350.61"/></p> <p>[MEMO ITEM] Subitemization of Master-card</p>
<p>Purpose of Disbursement Gen. fund. food & beverage</p> <p>Candidate Name</p> <p>Category/Type <input type="text" value="003"/></p>		
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p>C. La Quinta Resort & Club</p> <p>Full Name (Last, First, Middle Initial) La Quinta Resort & Club</p> <p>Mailing Address 49499 Eisenhower Drive</p> <p>City La Quinta State CA Zip Code 92253-2722</p> <p>Purpose of Disbursement Gen. Fund., Food & Beverage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-1804-7953-V</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4246.71"/></p> <p>[MEMO ITEM] Subitemization of Master-card</p>
<p>Purpose of Disbursement Gen. Fund., Food & Beverage</p> <p>Candidate Name</p> <p>Category/Type <input type="text" value="003"/></p>		
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. The Alamo Travel Group		Transaction ID: SB21B-4316-7954-V Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 9000 Wurzbach Road		Amount of Each Disbursement this Period 25.00
City San Antonio State TX Zip Code 78240-1038	[MEMO ITEM] Subitemization of Master-card	
Purpose of Disbursement Gen.Fund. - travel reservation fee Candidate Name		002 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. U.S. Airways		Transaction ID: SB21B-607-7955-V Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 111 W Rio Salado Parkway		Amount of Each Disbursement this Period 288.80
City Tempe State AZ Zip Code 85281-2880	[MEMO ITEM] Subitemization of Master-card	
Purpose of Disbursement Gen. fund., air travel Candidate Name		002 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Kelly's Fish House		Transaction ID: SB21B-4482-7978-V Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 1302 5th Avenue		Amount of Each Disbursement this Period 300.07
City Naples State FL Zip Code 34102	[MEMO ITEM] Subitemization of Master-card	
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) ▼	

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Naples Grande Resort		Transaction ID: SB21B-4478-7958-V Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 475 Seagate Drive		Amount of Each Disbursement this Period 147.64
City Naples State FL Zip Code 34103-2413	Purpose of Disbursement Gen. fund., travel - lodging Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Subitemization of Master-card

Full Name (Last, First, Middle Initial) B. Naples Grande Resort		Transaction ID: SB21B-4478-7959-V Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 475 Seagate Drive		Amount of Each Disbursement this Period 167.25
City Naples State FL Zip Code 34103-2413	Purpose of Disbursement Gen. fund., travel - lodging Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Subitemization of Master-card

Full Name (Last, First, Middle Initial) C. Naples Grande Resort		Transaction ID: SB21B-4478-7960-V Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 475 Seagate Drive		Amount of Each Disbursement this Period 798.00
City Naples State FL Zip Code 34103-2413	Purpose of Disbursement Gen. fund., travel - lodging Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Subitemization of Master-card

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Naples Grande Resort		Transaction ID: SB21B-4478-7961-V Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 475 Seagate Drive		Amount of Each Disbursement this Period 798.00
City Naples State FL Zip Code 34103-2413	Purpose of Disbursement Gen. fund., travel - lodging Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Subitemization of Master-card

Full Name (Last, First, Middle Initial) B. Hyatt Regency - Tampa City Center		Transaction ID: SB21B-4480-7974-V Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 211 N Tampa Street		Amount of Each Disbursement this Period 144.65
City Tampa State FL Zip Code 33602-5805	Purpose of Disbursement Gen. fund., travel - lodging Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Subitemization of Master-card

Full Name (Last, First, Middle Initial) C. Corks Steak & Seafood Grille		Transaction ID: SB21B-4483-7981-V Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 862 5th Avenue S		Amount of Each Disbursement this Period 303.48
City Naples State FL Zip Code 34102-6606	Purpose of Disbursement Gen. fund. - food & beverage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Subitemization of Master-card

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. U.S. Airways		Transaction ID: SB21B-607-7977-V Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 111 W Rio Salado Parkway		Amount of Each Disbursement this Period 233.00
City Tempe State AZ Zip Code 85281-2880	Purpose of Disbursement Gen. fund., air travel Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Subitemization of Master-card

Full Name (Last, First, Middle Initial) B. U.S. Airways		Transaction ID: SB21B-607-7964-V Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 111 W Rio Salado Parkway		Amount of Each Disbursement this Period 342.30
City Tempe State AZ Zip Code 85281-2880	Purpose of Disbursement Gen. fund. - air travel Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Subitemization of Master-card

Full Name (Last, First, Middle Initial) C. U.S. Airways		Transaction ID: SB21B-607-7965-V Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 111 W Rio Salado Parkway		Amount of Each Disbursement this Period 361.30
City Tempe State AZ Zip Code 85281-2880	Purpose of Disbursement Gen. fund., air travel Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Subitemization of Master-card

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

<p>A. U.S. Airways</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 111 W Rio Salado Parkway</p> <p>City Tempe State AZ Zip Code 85281-2880</p> <p>Purpose of Disbursement Gen. fund., air travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-607-7966-V</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="361.30"/></p> <p>[MEMO ITEM] Subitemization of Master-card</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text" value="002"/></p>

<p>B. JB's on the Beach</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 300 NE 21st Avenue</p> <p>City Deerfield Beach State FL Zip Code 33441-3803</p> <p>Purpose of Disbursement Gen. fund., food & bev.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-4477-7948-V</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="241.18"/></p> <p>[MEMO ITEM] Subitemization of Master-card</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text" value="003"/></p>

<p>C. U.S. Airways</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 111 W Rio Salado Parkway</p> <p>City Tempe State AZ Zip Code 85281-2880</p> <p>Purpose of Disbursement Gen fund., air travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB21B-607-7956-V</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="414.40"/></p> <p>[MEMO ITEM] Subitemization of Master-card</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text" value="002"/></p>

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. U.S. Airways		Transaction ID: SB21B-607-7967-V Date of Disbursement 04 / 24 / 2007
Mailing Address 111 W Rio Salado Parkway		Amount of Each Disbursement this Period 361.30
City Tempe State AZ Zip Code 85281-2880	Purpose of Disbursement Gen. fund. - air travel Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Subitemization of Master-card

Full Name (Last, First, Middle Initial) B. U.S. Airways		Transaction ID: SB21B-607-7968-V Date of Disbursement 04 / 24 / 2007
Mailing Address 111 W Rio Salado Parkway		Amount of Each Disbursement this Period 1337.30
City Tempe State AZ Zip Code 85281-2880	Purpose of Disbursement Gen. fund., air travel Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Subitemization of Master-card

Full Name (Last, First, Middle Initial) C. Best Buy		Transaction ID: SB21B-3893-7970-V Date of Disbursement 04 / 24 / 2007
Mailing Address 5799 Leesburg Pike		Amount of Each Disbursement this Period 241.48
City Falls Church State VA Zip Code 22041-2906	Purpose of Disbursement Equipment Purchase Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Subitemization of Master-card

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

A. Full Name (Last, First, Middle Initial)
Hyatt Regency - Tampa City Center

Mailing Address 211 N Tampa Street

City Tampa State FL Zip Code 33602-5805

Purpose of Disbursement
Gen. fund., travel - lodging

Candidate Name

002
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B-4480-7973-V

Date of Disbursement

04 / 24 / 2007

Amount of Each Disbursement this Period

200.48

[MEMO ITEM]

Subitemization of Master-card

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

31700.73

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. STEVE CHABOT FOR CONGRESS		Transaction ID: SB23-3670-8038-e Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 3014 Harrison Avenue		Amount of Each Disbursement this Period 2500.00
City Cincinnati State OH Zip Code 45211-5702		
Purpose of Disbursement Contribution Candidate Name Steve Chabot	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 01 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. BACHMANN FOR CONGRESS		Transaction ID: SB23-3916-8020-e Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 7
Mailing Address PO Box 49756		Amount of Each Disbursement this Period 5000.00
City Blaine State MN Zip Code 55449-0756		
Purpose of Disbursement Contribution Candidate Name Michele M Bachmann	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. CHRISTOPHER SHAYS FOR CONGRESS COMMITTEE		Transaction ID: SB23-3908-7981-e Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 7
Mailing Address 98 East Avenue Rear BUILDING		Amount of Each Disbursement this Period 5000.00
City Norwalk State CT Zip Code 06851-5029		
Purpose of Disbursement Contribution Candidate Name Christopher Shays	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. HAYES FOR CONGRESS		Transaction ID: SB23-3920-8040-e Date of Disbursement 04 / 24 / 2007
Mailing Address PO Box 2000		Amount of Each Disbursement this Period 2500.00
City Concord State NC Zip Code 28026-2000	Purpose of Disbursement Contribution Contribution Candidate Name Robert Cannon Hayes Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 08	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Heather Wilson for Congress		Transaction ID: SB23-2097-8046-e Date of Disbursement 04 / 24 / 2007
Mailing Address 1420 Carlisle NE, Suite 108		Amount of Each Disbursement this Period 2500.00
City Albuquerque State NM Zip Code 88710	Purpose of Disbursement Contribution Contribution Candidate Name Heather A. Wilson Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 01	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. JIM GERLACH FOR CONGRESS COMMITTEE		Transaction ID: SB23-3912-8039-e Date of Disbursement 04 / 24 / 2007
Mailing Address PO Box 87		Amount of Each Disbursement this Period 2500.00
City Uwchland State PA Zip Code 19480-0087	Purpose of Disbursement Contribution Contribution Candidate Name Jim Gerlach Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 06	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	7500.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<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)
FRIENDS OF DAVE REICHERT

Mailing Address PO Box 53322

City Bellevue State WA Zip Code 98015-3322

Purpose of Disbursement
Contribution

Candidate Name
Dave Reichert

Office Sought: House
 Senate
 President
State: WA District: 08

Disbursement For: 2008
 Primary General
 Other (specify) ▼

011
Category/
Type

Transaction ID: SB23-4065-8044-e
Date of Disbursement

04 / 24 / 2007

Amount of Each Disbursement this Period

2500.00

B. Full Name (Last, First, Middle Initial)
KNOLLENBERG FOR CONGRESS COMMITTEE

Mailing Address 31000 Telegraph Road
Suite 110

City Bingham Farms State MI Zip Code 48025-4321

Purpose of Disbursement
Contribution

Candidate Name
Joseph K Knollenberg

Office Sought: House
 Senate
 President
State: MI District: 09

Disbursement For: 2008
 Primary General
 Other (specify) ▼

011
Category/
Type

Transaction ID: SB23-4305-8041-e
Date of Disbursement

04 / 24 / 2007

Amount of Each Disbursement this Period

2500.00

C. Full Name (Last, First, Middle Initial)
Porter for Congress

Mailing Address 1111 Mary Crest Road
Suite G

City Henderson State NV Zip Code 89074-8747

Purpose of Disbursement
Contribution

Candidate Name
Jon Porter, Sr.

Office Sought: House
 Senate
 President
State: NV District: 03

Disbursement For: 2008
 Primary General
 Other (specify) ▼

011
Category/
Type

Transaction ID: SB23-3162-8042-e
Date of Disbursement

04 / 24 / 2007

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional) ▶

7500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Roskam For Congress Committee		Transaction ID: SB23-4446-8045-e Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 141 Shelley Lane		Amount of Each Disbursement this Period 2500.00
City Wheaton State IL Zip Code 60187-7423	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name Peter Roskam		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 06	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. PRYCE FOR CONGRESS		Transaction ID: SB23-3915-8043-e Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 145 E Rich Street		Amount of Each Disbursement this Period 2500.00
City Columbus State OH Zip Code 43215-5240	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name Deborah D. Pryce		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 15	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. ROMP 2007		Transaction ID: SB23-4449-8047-e Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 228 S Washington Street Suite 115		Amount of Each Disbursement this Period 13500.00
City Alexandria State VA Zip Code 22314-5404	011 Category/ Type	
Purpose of Disbursement Jt. Fundraising Cmt. Contribution		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	18500.00
TOTAL This Period (last page this line number only) ▶	46000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial)
A. Simmons Recount 2006

Mailing Address 12 Roosevelt Avenue

City State Zip Code
Mystic CT 06355-2809

Purpose of Disbursement
Void stale check

Candidate Name
Simmons Recount 2006

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: SB29-4336-8036-e
Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ▶

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