

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 209 Pennsylvania Avenue, SE  
 Check if different than previously reported. (ACC)  
Washington DC 20003

2. **FEC IDENTIFICATION NUMBER** C00344648  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 12 01 2007 through 12 31 2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Paul Kilgore  
Signature of Treasurer Electronically Filed by Paul Kilgore Date 01 31 2008

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

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Rely on Your Beliefs Fund

Report Covering the Period: From: 

M	M
1	2

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
1	2

D	D
3	1

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		240493.94
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period .....	220539.52									
(c) Total Receipts (from Line 19) .....	93803.04	731253.04								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	314342.56	971746.98								
7. Total Disbursements (from Line 31) .....	95631.58	753036.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	218710.98	218710.98								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
Rely on Your Beliefs Fund

Report Covering the Period: From: 

M	M
1	2

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
1	2

D	D
3	1

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	4250.00	58700.00
(i) Itemized (use Schedule A) .....	0.00	0.00
(ii) Unitemized .....	4250.00	58700.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	82500.00	650500.00
(c) Other Political Committees (such as PACs) .....	86750.00	709200.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	2053.04	2053.04
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	5000.00	15000.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	5000.00
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)) .....	93803.04	731253.04
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	93803.04	731253.04

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	51441.83	369637.18
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	51441.83	369637.18
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	44189.75	378048.82
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	5350.00
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))..	95631.58	753036.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	95631.58	753036.00

**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) .....	86750.00	709200.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	86750.00	709200.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	51441.83	369637.18
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	2053.04	2053.04
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	49388.79	367584.14

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 38
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
Rely on Your Beliefs Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) American Assoc of Nurse Anesthetists PAC	Date of Receipt
	Mailing Address 412 1st St., NE Suite 12	<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2007"/>
	City State Zip Code Washington DC 20003	<b>Transaction ID:</b> 80130.C648
	FEC ID number of contributing federal political committee. <input type="text" value="C00173153"/>	Amount of Each Receipt this Period <input type="text" value="2500.00"/>
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Receipt Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) American Assoc of Ortho Surgeons PAC	Date of Receipt
	Mailing Address 317 Massachusetts Ave NE Suite 100	<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2007"/>
	City State Zip Code Washington DC 20002-5769	<b>Transaction ID:</b> 80130.C662
	FEC ID number of contributing federal political committee. <input type="text" value="C00343137"/>	Amount of Each Receipt this Period <input type="text" value="5000.00"/>
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Receipt Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) American Health Care Association PAC	Date of Receipt
	Mailing Address 1201 L St NW	<input type="text" value="12"/> / <input type="text" value="11"/> / <input type="text" value="2007"/>
	City State Zip Code Washington DC 20005-4024	<b>Transaction ID:</b> 71212.C642
	FEC ID number of contributing federal political committee. <input type="text" value="C00006080"/>	Amount of Each Receipt this Period <input type="text" value="5000.00"/>
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Receipt Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="12500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 7 / 38  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

NAME OF COMMITTEE (In Full)  
Rely on Your Beliefs Fund

**A.** Full Name (Last, First, Middle Initial)  
Anheuser-Busch PAC

Mailing Address 1401 I St NW Ste 200

City State Zip Code  
Washington DC 20005-6549

FEC ID number of contributing federal political committee. C C00034488

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 2 8 / 2 0 0 7

**Transaction ID:** 80130.C672

Amount of Each Receipt this Period  
5000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Associated Builders & Contractors PAC

Mailing Address 4250 Fairfax Dr Fl 9  
9th Floor

City State Zip Code  
Arlington VA 22203-1665

FEC ID number of contributing federal political committee. C C00010421

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 2 8 / 2 0 0 7

**Transaction ID:** 80130.C665

Amount of Each Receipt this Period  
5000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
BAE Systems USA PAC

Mailing Address 1300 17th St N

City State Zip Code  
Arlington VA 22209-3803

FEC ID number of contributing federal political committee. C C00281212

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 2 8 / 2 0 0 7

**Transaction ID:** 80130.C660

Amount of Each Receipt this Period  
2000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... 12000.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 38

(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

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)  
Rely on Your Beliefs Fund

**A.**

Full Name (Last, First, Middle Initial)  
Cash America International PAC

Mailing Address 1600 W 7th St

City State Zip Code  
Fort Worth TX 76102-2509

FEC ID number of contributing federal political committee. **C** C00275529

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  
1 2 / 2 0 / 2 0 0 7

Transaction ID: 80130.C652

Amount of Each Receipt this Period

2500.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
CBRL Group, Inc. PAC

Mailing Address PO Box 787

City State Zip Code  
Lebanon TN 37088-0787

FEC ID number of contributing federal political committee. **C** C00252791

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  
1 2 / 2 8 / 2 0 0 7

Transaction ID: 80130.C666

Amount of Each Receipt this Period

2500.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Citigroup Inc. PAC

Mailing Address 1101 Pennsylvania Ave NW  
Suite 1000

City State Zip Code  
Washington DC 20004-2524

FEC ID number of contributing federal political committee. **C** C00039305

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  
1 2 / 2 8 / 2 0 0 7

Transaction ID: 80130.C671

Amount of Each Receipt this Period

1000.00

Receipt

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

6000.00

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



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

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

FOR LINE NUMBER: PAGE 9 / 38  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

NAME OF COMMITTEE (In Full)  
Rely on Your Beliefs Fund

**A.** Full Name (Last, First, Middle Initial)  
Dairy Farmers of America, Inc. DEPAC

Mailing Address 10220 NW Ambassador Dr

City State Zip Code  
Kansas City MO 64153-2312

FEC ID number of contributing federal political committee. **C** C00001388

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 2 / 2 8 / 2 0 0 7

**Transaction ID:** 80130.C670

Amount of Each Receipt this Period  
2000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Deloitte & Touche PAC

Mailing Address PO Box 365

City State Zip Code  
Washington DC 20044-0365

FEC ID number of contributing federal political committee. **C** C00211318

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

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

**Transaction ID:** 71212.C638

Amount of Each Receipt this Period  
5000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Ernst & Young PAC

Mailing Address 1225 Connecticut Ave NW  
Suite 700

City State Zip Code  
Washington DC 20036-2625

FEC ID number of contributing federal political committee. **C** C00227744

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

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

**Transaction ID:** 71212.C634

Amount of Each Receipt this Period  
5000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 12000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 38
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
Rely on Your Beliefs Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) General Electric Company PAC		Date of Receipt
	Mailing Address 1299 Pennsylvania Avenue, NW Suite 1100 W		<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Washington	DC	20004
	FEC ID number of contributing federal political committee.		<b>C</b> C00024869
Name of Employer		Occupation	Transaction ID: 80130.C653
Receipt For:		Amount of Each Receipt this Period	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="2500.00"/>	
		Aggregate Year-to-Date ▼	Receipt
		<input type="text" value="5000.00"/>	

<b>B.</b>	Full Name (Last, First, Middle Initial) Kay Granger Campaign Fund		Date of Receipt
	Mailing Address 715 Jones St Ste 100		<input type="text" value="12"/> / <input type="text" value="11"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Fort Worth	TX	76102-5473
	FEC ID number of contributing federal political committee.		<b>C</b> C00310532
Name of Employer		Occupation	Transaction ID: 71212.C640
Receipt For:		Amount of Each Receipt this Period	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="2000.00"/>	
		Aggregate Year-to-Date ▼	Receipt
		<input type="text" value="2000.00"/>	

<b>C.</b>	Full Name (Last, First, Middle Initial) Marathon Oil Co. Employees PAC		Date of Receipt
	Mailing Address 539 S Main St Rm 2635 Room 2635		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Findlay	OH	45840-3229
	FEC ID number of contributing federal political committee.		<b>C</b> C00040568
Name of Employer		Occupation	Transaction ID: 80130.C664
Receipt For:		Amount of Each Receipt this Period	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="2500.00"/>	
		Aggregate Year-to-Date ▼	Receipt
		<input type="text" value="2500.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="7000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 38  
(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

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)  
Rely on Your Beliefs Fund

**A.** Full Name (Last, First, Middle Initial)  
Mastercard International Employees PAC

Mailing Address 1401 I St NW  
Suite 240

City Washington State DC Zip Code 20005-2225

FEC ID number of contributing federal political committee. **C** C00410274

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 12 / 28 / 2007  
**Transaction ID:** 80130.C659  
Amount of Each Receipt this Period: 2500.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
Metlife, Inc. Employees PAC

Mailing Address 1620 L St NW  
Suite 800

City Washington State DC Zip Code 20036-5629

FEC ID number of contributing federal political committee. **C** C00040923

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: 12 / 28 / 2007  
**Transaction ID:** 80130.C658  
Amount of Each Receipt this Period: 1500.00  
Receipt

**C.** Full Name (Last, First, Middle Initial)  
National Restaurant Association PAC

Mailing Address 1200 17th St NW  
8th Floor

City Washington State DC Zip Code 20036-3006

FEC ID number of contributing federal political committee. **C** C00003764

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 12 / 28 / 2007  
**Transaction ID:** 80130.C669  
Amount of Each Receipt this Period: 2500.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 6500.00

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

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

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

FOR LINE NUMBER: PAGE 12 / 38  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

NAME OF COMMITTEE (In Full)  
Rely on Your Beliefs Fund

**A.** Full Name (Last, First, Middle Initial)  
PCIPAC

Mailing Address 444 N Capitol St NW Ste 801  
Suite 801

City Washington State DC Zip Code 20001-1508

FEC ID number of contributing federal political committee. **C** C00066472

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 12 / 28 / 2007  
**Transaction ID:** 80130.C667  
 Amount of Each Receipt this Period 1500.00  
 Receipt

**B.** Full Name (Last, First, Middle Initial)  
Peabody PAC

Mailing Address 701 Market St

City Saint Louis State MO Zip Code 63101-1830

FEC ID number of contributing federal political committee. **C** C00110478

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 28 / 2007  
**Transaction ID:** 80130.C661  
 Amount of Each Receipt this Period 5000.00  
 Receipt

**C.** Full Name (Last, First, Middle Initial)  
Pork PAC

Mailing Address PO Box 10383

City Des Moines State IA Zip Code 50306-0383

FEC ID number of contributing federal political committee. **C** C00201871

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 20 / 2007  
**Transaction ID:** 80130.C654  
 Amount of Each Receipt this Period 1000.00  
 Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 7500.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 38

(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

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)  
Rely on Your Beliefs Fund

**A.**

Full Name (Last, First, Middle Initial)  
Real Estate Investment Trusts PAC

Mailing Address 1875 I St NW  
Suite 600

City State Zip Code  
Washington DC 20006-5413

FEC ID number of contributing federal political committee. **C** C00303339

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

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

Transaction ID: 80130.C651

Amount of Each Receipt this Period

2500.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Southern Company Employess PAC

Mailing Address 601 Pennsylvania Ave NW  
Suite 800

City State Zip Code  
Washington DC 20004-2601

FEC ID number of contributing federal political committee. **C** C00144774

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt

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

Transaction ID: 71212.C636

Amount of Each Receipt this Period

2500.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Southern Company-Southern Nuclear PAC

Mailing Address PO Box 1295

City State Zip Code  
Birmingham AL 35201-1295

FEC ID number of contributing federal political committee. **C** C00250407

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  
1 2 / 1 1 / 2 0 0 7

Transaction ID: 71212.C637

Amount of Each Receipt this Period

2500.00

Receipt

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

7500.00

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

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

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

FOR LINE NUMBER: PAGE 14 / 38  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

NAME OF COMMITTEE (In Full)  
Rely on Your Beliefs Fund

**A.** Full Name (Last, First, Middle Initial)  
SunPAC

Mailing Address 1101 Pennsylvania Ave NW  
Suite 510

City Washington State DC Zip Code 20004-2514

FEC ID number of contributing federal political committee. **C** C00378216

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 20 / 2007  
**Transaction ID:** 80130.C647  
 Amount of Each Receipt this Period 5000.00  
 Receipt

**B.** Full Name (Last, First, Middle Initial)  
United States Cellular Corp. PAC

Mailing Address 8410 W Bryn Mawr Ave

City Chicago State IL Zip Code 60631-3408

FEC ID number of contributing federal political committee. **C** C00336057

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 12 / 28 / 2007  
**Transaction ID:** 80130.C655  
 Amount of Each Receipt this Period 1500.00  
 Receipt

**C.** Full Name (Last, First, Middle Initial)  
Wal-Mart Stores, Inc. PAC

Mailing Address 575 7th St NW

City Washington State DC Zip Code 20004-1607

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 20 / 2007  
**Transaction ID:** 80130.C650  
 Amount of Each Receipt this Period 5000.00  
 Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 11500.00

**TOTAL** This Period (last page this line number only) ..... ► 82500.00

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

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

FOR LINE NUMBER: PAGE 15 / 38  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

NAME OF COMMITTEE (In Full)  
Rely on Your Beliefs Fund

**A.** Full Name (Last, First, Middle Initial)  
Barbour Griffith & Rogers, LLC

Mailing Address PO Box 14416

City Washington State DC Zip Code 20044-4416

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 12 / 20 / 2007

**Transaction ID:** 80130.C643

Amount of Each Receipt this Period 1500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Ed Rogers

Mailing Address 1275 Pennsylvania Ave NW

City Washington State DC Zip Code 20004-2404

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

Name of Employer Occupation  
Barbour Griffith & Rogers Chairman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 20 / 2007

**Transaction ID:** 80130.C644

Amount of Each Receipt this Period 500.00

Memo

**[MEMO ITEM]**  
Partnership->Barbour Griffith & Rogers, LLC

**C.** Full Name (Last, First, Middle Initial)  
Loren Monroe

Mailing Address 1275 Pennsylvania Ave NW

City Washington State DC Zip Code 20004-2404

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

Name of Employer Occupation  
Barbour Griffith & Rogers COO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 20 / 2007

**Transaction ID:** 80130.C645

Amount of Each Receipt this Period 500.00

Memo

**[MEMO ITEM]**  
Partnership->Barbour Griffith & Rogers, LLC

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1500.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 38  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
Rely on Your Beliefs Fund

**A.**

Full Name (Last, First, Middle Initial) Dan Murphy		Date of Receipt MM / DD / YYYY 12 / 20 / 2007
Mailing Address 1275 Pennsylvania Ave NW		<b>Transaction ID:</b> 80130.C646
City Washington	State DC	Zip Code 20004-2404
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Barbour Griffith & Rogers	Occupation Principal	Memo  <b>[MEMO ITEM]</b> Partnership->Barbour Griffith & Rogers, LLC
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

**B.**

Full Name (Last, First, Middle Initial) Henry Bradley		Date of Receipt MM / DD / YYYY 12 / 20 / 2007
Mailing Address 406 Virginia Ave		<b>Transaction ID:</b> 80130.C649
City Alexandria	State VA	Zip Code 22302-2908
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Chad Bradley & Associates	Occupation CEO	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

**C.**

Full Name (Last, First, Middle Initial) Paul Cambon		Date of Receipt MM / DD / YYYY 12 / 28 / 2007
Mailing Address 908 Croton Dr		<b>Transaction ID:</b> 80130.C668
City Alexandria	State VA	Zip Code 22308-2001
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Information Requested	Occupation Information Requested	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 17 / 38	
	(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"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
Rely on Your Beliefs Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) Alvin Jackson		Date of Receipt																					
	Mailing Address PO Box 551		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>8</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	1	2		2	8		2	0	0	7
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	2		2	8		2	0	0	7														
	City	State	Zip Code		<b>Transaction ID:</b> 80130.C663																			
	Kensington	MD	20895-0551																					
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>		Amount of Each Receipt this Period																				
Name of Employer Jackson Group		Occupation Principal		<input type="text" value="750.00"/>																				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		Receipt																				
		<input type="text" value="750.00"/>																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="750.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="4250.00"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 38  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" 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)  
Rely on Your Beliefs Fund

**A.**

Full Name (Last, First, Middle Initial)  
National Republican Congressional Comm

Mailing Address 320 1st St SE

City State Zip Code  
Washington DC 20003-1838

FEC ID number of contributing federal political committee. **C** C00075820

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1366.71

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

**Transaction ID:** 71212.C641

Amount of Each Receipt this Period  
1366.71

Offsets to Operating Expenditure

**B.**

Full Name (Last, First, Middle Initial)  
Kay Granger

Mailing Address 715 Jones St Ste 200

City State Zip Code  
Fort Worth TX 76102-5400

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

Name of Employer Occupation  
U.S. Congress Congresswoman

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 203.00

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

**Transaction ID:** 71212.C639

Amount of Each Receipt this Period  
203.00

Offsets to Operating Expenditure

**C.**

Full Name (Last, First, Middle Initial)  
Friends of Dave Reichert

Mailing Address PO Box 53322

City State Zip Code  
Bellevue WA 98015-3322

FEC ID number of contributing federal political committee. **C** C00397737

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 483.33

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 2 8 / 2 0 0 7

**Transaction ID:** 80130.C657

Amount of Each Receipt this Period  
483.33

Offsets to Operating Expenditure

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2053.04
<b>TOTAL</b> This Period (last page this line number only) .....	▶	2053.04

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 / 38
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15
		<input type="checkbox"/> 12
		<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)  
Rely on Your Beliefs Fund

A.

Full Name (Last, First, Middle Initial) Friends of Mike Ferguson	
Mailing Address PO Box 225	
City Colonia	State NJ
Zip Code 07067-0225	
FEC ID number of contributing federal political committee. C	
Name of Employer	Occupation C00366195
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00

Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 8 / 2 0 0 7
Transaction ID: 80130.C656
Amount of Each Receipt this Period 5000.00
Refund of Contribution Made

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

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<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)  
Rely on Your Beliefs Fund

A.	Full Name (Last, First, Middle Initial) Comcast	Transaction ID: 80130.E1181 Date of Disbursement 12 / 20 / 2007
	Mailing Address PO Box 3005	Amount of Each Disbursement this Period 46.42
	City Southeastern State PA Zip Code 19398-3005	
	Purpose of Disbursement PAC Internet Expense Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAC INTERNET EXPENSE

B.	Full Name (Last, First, Middle Initial) UPS	Transaction ID: 71212.E1170 Date of Disbursement 12 / 11 / 2007
	Mailing Address PO Box 72470244	Amount of Each Disbursement this Period 19.22
	City Philadelphia State PA Zip Code 19170-0001	
	Purpose of Disbursement PAC Shipping Expense Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAC SHIPPING EXPENSE

C.	Full Name (Last, First, Middle Initial) UPS	Transaction ID: 80130.E1186 Date of Disbursement 12 / 20 / 2007
	Mailing Address PO Box 72470244	Amount of Each Disbursement this Period 39.37
	City Philadelphia State PA Zip Code 19170-0001	
	Purpose of Disbursement PAC Shipping Expense Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAC SHIPPING EXPENSE

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	105.01
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)  
Rely on Your Beliefs Fund

<p><b>A.</b> Full Name (Last, First, Middle Initial) Visa</p> <p>Mailing Address PO Box 77042</p> <p>City Madison State WI Zip Code 53707-1042</p> <p>Purpose of Disbursement Credit Card Charges: See Below</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 71212.E1142 <b>Date of Disbursement:</b> 12 / 06 / 2007</p> <p>Amount of Each Disbursement this Period 447.06</p> <p><b>CREDIT CARD CHARGES: SEE BELOW</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Occidental Grill</p> <p>Mailing Address 1475 Pennsylvania Ave NW</p> <p>City Washington State DC Zip Code 20004-1046</p> <p>Purpose of Disbursement PAC Meeting Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 71212.E1144 <b>Date of Disbursement:</b> 12 / 06 / 2007</p> <p>Amount of Each Disbursement this Period 237.35</p> <p><b>[MEMO ITEM]</b> MEMO: PAC MEETING EXPENSE</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Visa</p> <p>Mailing Address PO Box 77042</p> <p>City Madison State WI Zip Code 53707-1042</p> <p>Purpose of Disbursement Credit Card Charges: See Below</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 71212.E1131 <b>Date of Disbursement:</b> 12 / 06 / 2007</p> <p>Amount of Each Disbursement this Period 8671.00</p> <p><b>CREDIT CARD CHARGES: SEE BELOW</b></p>

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

9118.06

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

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)  
Rely on Your Beliefs Fund

A.	Full Name (Last, First, Middle Initial) Washington Post	Transaction ID: 71212.E1137 Date of Disbursement 12 / 06 / 2007
	Mailing Address 1150 15th St NW	Amount of Each Disbursement this Period 30.46
	City Washington State DC Zip Code 20071-0001	
	Purpose of Disbursement PAC Subscription Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> MEMO: PAC SUBSCRIPTION

B.	Full Name (Last, First, Middle Initial) US Airways	Transaction ID: 71212.E1132 Date of Disbursement 12 / 06 / 2007
	Mailing Address 4000 E Sky Harbor Blvd	Amount of Each Disbursement this Period 2849.59
	City Phoenix State AZ Zip Code 85034-3802	
	Purpose of Disbursement PAC Airfare Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> MEMO: PAC AIRFARE

C.	Full Name (Last, First, Middle Initial) Nashville Wraps LLC	Transaction ID: 71212.E1138 Date of Disbursement 12 / 06 / 2007
	Mailing Address 242 Molly Walton Dr	Amount of Each Disbursement this Period 69.97
	City Hendersonville State TN Zip Code 37075-2154	
	Purpose of Disbursement PAC Event Supplies Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> MEMO: PAC EVENT SUPPLIES

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

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)  
Rely on Your Beliefs Fund

A.	Full Name (Last, First, Middle Initial) Delta Airlines	Transaction ID: 71212.E1134 Date of Disbursement 12 / 06 / 2007
	Mailing Address 1030 Delta Blvd	Amount of Each Disbursement this Period 1155.22
	City Atlanta State GA Zip Code 30354-1989	
	Purpose of Disbursement PAC Airfare Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> MEMO: PAC AIRFARE

B.	Full Name (Last, First, Middle Initial) Enterprise Rent-A- Car	Transaction ID: 71212.E1141 Date of Disbursement 12 / 06 / 2007
	Mailing Address 398 Meeting St	Amount of Each Disbursement this Period 393.33
	City Charleston State SC Zip Code 29403-6233	
	Purpose of Disbursement PAC Car Rental Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> MEMO: PAC CAR RENTAL

C.	Full Name (Last, First, Middle Initial) Alaska Airlines	Transaction ID: 71212.E1139 Date of Disbursement 12 / 06 / 2007
	Mailing Address 19300 International Blvd	Amount of Each Disbursement this Period 2474.81
	City Seatac State WA Zip Code 98188-5304	
	Purpose of Disbursement PAC Airfare Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> MEMO: PAC AIRFARE

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

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)  
Rely on Your Beliefs Fund

A.	Full Name (Last, First, Middle Initial) Visa	Transaction ID: 71212.E1162 Date of Disbursement 12 / 06 / 2007
	Mailing Address PO Box 77042	Amount of Each Disbursement this Period 1231.66
	City Madison State WI Zip Code 53707-1042	
	Purpose of Disbursement Credit Card Charges: See Below	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		CREDIT CARD CHARGES: SEE BELOW

B.	Full Name (Last, First, Middle Initial) American Air	Transaction ID: 71212.E1164 Date of Disbursement 12 / 06 / 2007
	Mailing Address 4255 Amon Carter Blvd # 2400	Amount of Each Disbursement this Period 387.40
	City Fort Worth State TX Zip Code 76155-2603	
	Purpose of Disbursement PAC Airfare Expense	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: PAC AIRFARE EXPENSE

C.	Full Name (Last, First, Middle Initial) Westin Hotels	Transaction ID: 71212.E1165 Date of Disbursement 12 / 06 / 2007
	Mailing Address 13340 Dallas Pkwy	Amount of Each Disbursement this Period 844.26
	City Dallas State TX Zip Code 75240-6603	
	Purpose of Disbursement PAC Travel Expense	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: PAC TRAVEL EXPENSE

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1231.66
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)  
Rely on Your Beliefs Fund

<p><b>A.</b> Full Name (Last, First, Middle Initial) Visa</p> <p>Mailing Address PO Box 77042</p> <p>City Madison State WI Zip Code 53707-1042</p> <p>Purpose of Disbursement Credit Card Charges: See Below</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 71212.E1163 <b>Date of Disbursement:</b> 12 / 06 / 2007</p> <p>Amount of Each Disbursement this Period 869.40</p> <p><b>CREDIT CARD CHARGES: SEE BELOW</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Delta Airlines</p> <p>Mailing Address 1030 Delta Blvd</p> <p>City Atlanta State GA Zip Code 30354-1989</p> <p>Purpose of Disbursement PAC Airfare</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 71212.E1166 <b>Date of Disbursement:</b> 12 / 06 / 2007</p> <p>Amount of Each Disbursement this Period 869.40</p> <p><b>[MEMO ITEM]</b> MEMO: PAC AIRFARE</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Visa</p> <p>Mailing Address PO Box 77042</p> <p>City Madison State WI Zip Code 53707-1042</p> <p>Purpose of Disbursement Credit Card Charges: See Below</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 71212.E1145 <b>Date of Disbursement:</b> 12 / 06 / 2007</p> <p>Amount of Each Disbursement this Period 8749.48</p> <p><b>CREDIT CARD CHARGES: SEE BELOW</b></p>

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

9618.88

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<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)  
Rely on Your Beliefs Fund

<p><b>A.</b> Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 2135 E Independence St</p> <p>City Springfield State MO Zip Code 65804-3749</p> <p>Purpose of Disbursement PAC Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 71212.E1152</p> <p>Date of Disbursement 12 / 06 / 2007</p> <p>Amount of Each Disbursement this Period 36.50</p> <p><b>[MEMO ITEM]</b> MEMO: PAC OFFICE SUPPLIES</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) US Airways</p> <p>Mailing Address 4000 E Sky Harbor Blvd</p> <p>City Phoenix State AZ Zip Code 85034-3802</p> <p>Purpose of Disbursement PAC Airfare</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 71212.E1148</p> <p>Date of Disbursement 12 / 06 / 2007</p> <p>Amount of Each Disbursement this Period 3002.10</p> <p><b>[MEMO ITEM]</b> MEMO: PAC AIRFARE</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) SCI*Stamps.com</p> <p>Mailing Address 12959 Coral Tree Pl</p> <p>City Los Angeles State CA Zip Code 90066-7020</p> <p>Purpose of Disbursement PAC Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 71212.E1155</p> <p>Date of Disbursement 12 / 06 / 2007</p> <p>Amount of Each Disbursement this Period 31.98</p> <p><b>[MEMO ITEM]</b> MEMO: PAC POSTAGE</p>

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

0.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 27 / 38

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<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)  
Rely on Your Beliefs Fund

A.	Full Name (Last, First, Middle Initial) Delta Airlines	Transaction ID: 71212.E1149 Date of Disbursement 12 / 06 / 2007
	Mailing Address 1030 Delta Blvd	Amount of Each Disbursement this Period 849.41
	City Atlanta State GA Zip Code 30354-1989	
	Purpose of Disbursement PAC Airfare	[MEMO ITEM] MEMO: PAC AIRFARE
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Alaska Airlines	Transaction ID: 71212.E1153 Date of Disbursement 12 / 06 / 2007
	Mailing Address 19300 International Blvd	Amount of Each Disbursement this Period 314.80
	City Seatac State WA Zip Code 98188-5304	
	Purpose of Disbursement PAC Airfare	[MEMO ITEM] MEMO: PAC AIRFARE
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Heges Kiawah	Transaction ID: 71212.E1154 Date of Disbursement 12 / 06 / 2007
	Mailing Address 275 Gardners Cir	Amount of Each Disbursement this Period 314.80
	City Johns Island State SC Zip Code 29455-5471	
	Purpose of Disbursement PAC Meeting Expense	[MEMO ITEM] MEMO: PAC MEETING EXPENSE
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)  
Rely on Your Beliefs Fund

A.	Full Name (Last, First, Middle Initial) LL Bean  Mailing Address 95 Main St  City Freeport State ME Zip Code 04033-0001  Purpose of Disbursement PAC Event Supplies 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: 71212.E1150 Date of Disbursement 12 / 06 / 2007	Amount of Each Disbursement this Period  1858.85  <b>[MEMO ITEM]</b> MEMO: PAC EVENT SUPPLIES
B.	Full Name (Last, First, Middle Initial) Northwest Airlines  Mailing Address 5101 Northwest Drive  City Saint Paul State MN Zip Code 55121-  Purpose of Disbursement PAC Airfare Expense Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71212.E1146 Date of Disbursement 12 / 06 / 2007	Amount of Each Disbursement this Period  1713.63  <b>[MEMO ITEM]</b> MEMO: PAC AIRFARE EXPENSE
C.	Full Name (Last, First, Middle Initial) Visa  Mailing Address PO Box 77042  City Madison State WI Zip Code 53707-1042  Purpose of Disbursement Credit Card Charges: See Below 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: 80130.E1193 Date of Disbursement 12 / 28 / 2007	Amount of Each Disbursement this Period  430.70  CREDIT CARD CHARGES: SEE BELOW

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	430.70
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 29 / 38

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<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)  
Rely on Your Beliefs Fund

A.	Full Name (Last, First, Middle Initial) Visa	Transaction ID: 80130.E1195 Date of Disbursement 12 / 28 / 2007
	Mailing Address PO Box 77042	Amount of Each Disbursement this Period 1015.80
	City Madison State WI Zip Code 53707-1042	
	Purpose of Disbursement Credit Card Charges: See Below	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	CREDIT CARD CHARGES: SEE BELOW
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) American Air	Transaction ID: 80130.E1197 Date of Disbursement 12 / 28 / 2007
	Mailing Address 4255 Amon Carter Blvd # 2400	Amount of Each Disbursement this Period 1015.80
	City Fort Worth State TX Zip Code 76155-2603	
	Purpose of Disbursement PAC Airfare Expense	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: PAC AIRFARE EXPENSE
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) GMD Technologies	Transaction ID: 71212.E1171 Date of Disbursement 12 / 11 / 2007
	Mailing Address 3210 S 28th St Apt 302	Amount of Each Disbursement this Period 292.79
	City Alexandria State VA Zip Code 22302-1326	
	Purpose of Disbursement PAC Technology Services	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	PAC TECHNOLOGY SERVICES
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1308.59
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)  
Rely on Your Beliefs Fund

A.	Full Name (Last, First, Middle Initial) McKenna Long & Aldridge <hr/> Mailing Address 303 Peachtree St NE Suite 5300 <hr/> City Atlanta State GA Zip Code 30308-3265 <hr/> Purpose of Disbursement PAC Compliance Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71212.E1172 Date of Disbursement 12 / 11 / 2007 <hr/> Amount of Each Disbursement this Period 13000.00 <hr/> PAC COMPLIANCE SERVICES
B.	Full Name (Last, First, Middle Initial) Thompson Communications <hr/> Mailing Address P.O. Box 5 <hr/> City Marshfield State MO Zip Code 65706-0005 <hr/> Purpose of Disbursement PAC Staffing Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71212.E1157 Date of Disbursement 12 / 06 / 2007 <hr/> Amount of Each Disbursement this Period 13169.71 <hr/> PAC STAFFING SERVICES
C.	Full Name (Last, First, Middle Initial) Pacific Cigar Company <hr/> Mailing Address PO Box 669 <hr/> City Lemont State IL Zip Code 60439-0669 <hr/> Purpose of Disbursement PAC Event Expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71212.E1156 Date of Disbursement 12 / 06 / 2007 <hr/> Amount of Each Disbursement this Period 360.50 <hr/> PAC EVENT EXPENSE

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

**26530.21**

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

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)  
Rely on Your Beliefs Fund

A.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: 71212.E1158 Date of Disbursement 12 / 06 / 2007
	Mailing Address 1000 Samoset Dr	Amount of Each Disbursement this Period 528.00
	City Wilmington State DE Zip Code 19884-2211	
	Purpose of Disbursement Credit Card Charges: See Below	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		CREDIT CARD CHARGES: SEE BELOW

B.	Full Name (Last, First, Middle Initial) Capital Grille	Transaction ID: 71212.E1159 Date of Disbursement 12 / 06 / 2007
	Mailing Address 601 Pennsylvania Ave NW	Amount of Each Disbursement this Period 54.00
	City Washington State DC Zip Code 20004-2601	
	Purpose of Disbursement PAC Meeting Expense	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: PAC MEETING EXPENSE

C.	Full Name (Last, First, Middle Initial) Daniels Broiler Belle	Transaction ID: 71212.E1160 Date of Disbursement 12 / 06 / 2007
	Mailing Address 10500 NE 8th St Fl 21	Amount of Each Disbursement this Period 474.00
	City Bellevue State WA Zip Code 98004-4345	
	Purpose of Disbursement PAC Meeting Expense	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: PAC MEETING EXPENSE

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	528.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)  
Rely on Your Beliefs Fund

A.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: 80130.E1189 Date of Disbursement 12 / 20 / 2007
	Mailing Address 1000 Samoset Dr	Amount of Each Disbursement this Period 235.20
	City Wilmington State DE Zip Code 19884-2211	
	Purpose of Disbursement Credit Card Charges: See Below	CREDIT CARD CHARGES: SEE BELOW
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Oceanaire Restaurant	Transaction ID: 80130.E1190 Date of Disbursement 12 / 20 / 2007
	Mailing Address 1201 F St NW	Amount of Each Disbursement this Period 235.20
	City Washington State DC Zip Code 20004-1217	
	Purpose of Disbursement PAC Meeting Expense	[MEMO ITEM] MEMO: PAC MEETING EXPENSE
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Roy Blunt	Transaction ID: 80130.E1191 Date of Disbursement 12 / 20 / 2007
	Mailing Address PO Box 50100	Amount of Each Disbursement this Period 147.70
	City Springfield State MO Zip Code 65805-0100	
	Purpose of Disbursement PAC Travel Reimbursement	PAC TRAVEL REIMBURSEMENT
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>382.90</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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)  
Rely on Your Beliefs Fund

<p><b>A.</b> Full Name (Last, First, Middle Initial) Keri Ann Hayes</p> <p>Mailing Address 202 11th St NE</p> <p>City Washington State DC Zip Code 20002-6218</p> <p>Purpose of Disbursement PAC Travel Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80130.E1188 <b>Date of Disbursement</b> 12 / 20 / 2007</p> <p>Amount of Each Disbursement this Period 91.00</p> <p>PAC TRAVEL EXPENSE</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Jay Perron</p> <p>Mailing Address 1441 Constitution Ave NE</p> <p>City Washington State DC Zip Code 20002-6421</p> <p>Purpose of Disbursement PAC Travel Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 71212.E1161 <b>Date of Disbursement</b> 12 / 06 / 2007</p> <p>Amount of Each Disbursement this Period 210.58</p> <p>PAC TRAVEL EXPENSE</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Jay Perron</p> <p>Mailing Address 1441 Constitution Ave NE</p> <p>City Washington State DC Zip Code 20002-6421</p> <p>Purpose of Disbursement PAC Travel Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80130.E1184 <b>Date of Disbursement</b> 12 / 20 / 2007</p> <p>Amount of Each Disbursement this Period 83.23</p> <p>PAC TRAVEL EXPENSE</p>

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

384.81

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

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

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

FOR LINE NUMBER: (check only one)

PAGE 34 / 38

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<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)  
Rely on Your Beliefs Fund

**A.**

Full Name (Last, First, Middle Initial)  
Professional Data Services, Inc.

**Transaction ID:** 80130.E1185

Date of Disbursement

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

Mailing Address 337 S Milledge Ave Ste 101

Amount of Each Disbursement this Period

1570.92
---------

City Athens State GA Zip Code 30605-1083

Purpose of Disbursement  
Compliance Consulting

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

COMPLIANCE CONSULTING

State: District:

**B.**

Full Name (Last, First, Middle Initial)  
Dan Williams

**Transaction ID:** 71212.E1169

Date of Disbursement

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

Mailing Address 209 Pennsylvania Ave SE

Amount of Each Disbursement this Period

112.09
--------

City Washington State DC Zip Code 20003-1107

Purpose of Disbursement  
PAC Office Telephone

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

PAC OFFICE TELEPHONE

State: District:

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

1683.01
---------

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

51321.83
----------

# SCHEDULE 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

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)  
Rely on Your Beliefs Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) Tim Murphy for Congress  Mailing Address PO Box 24551  City Pittsburgh State PA Zip Code 15234-4551  Purpose of Disbursement  Candidate Name TIM MURPHY  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 18  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80130.E1187 Date of Disbursement 12 / 20 / 2007  Amount of Each Disbursement this Period 5000.00  Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Geoff Davis for Congress  Mailing Address 3161 Dixie Hwy Ste F  City Erlanger State KY Zip Code 41018-1841  Purpose of Disbursement  Candidate Name GEOFFREY C DAVIS  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 04  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71212.E1167 Date of Disbursement 12 / 11 / 2007  Amount of Each Disbursement this Period 4189.75  Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Delta Airlines  Mailing Address 1030 Delta Blvd  City Atlanta State GA Zip Code 30354-1989  Purpose of Disbursement IN-KIND: AIRFARE SEE VISA 12-6-07  Candidate Name THOMAS EDMUNDS PRICE  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 06  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80130.E1218 Date of Disbursement 12 / 06 / 2007  Amount of Each Disbursement this Period 924.40  Category/ Type  <b>[MEMO ITEM]</b> MEMO: IN-KIND: AIRFARE SEE VISA 12-6-07

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

9189.75

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 36 / 38

<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

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)  
Rely on Your Beliefs Fund

A.	Full Name (Last, First, Middle Initial) Alaska Airlines	Transaction ID: 80130.E1216 Date of Disbursement 12 / 06 / 2007
	Mailing Address 19300 International Blvd	Amount of Each Disbursement this Period 182.40
	City Seatac State WA Zip Code 98188-5304	
	Purpose of Disbursement IN-KIND: AIRFARE-SEE VISA 12-6-07	
	Candidate Name GREGORY PAUL WALDEN	Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 02	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> MEMO: IN-KIND: AIRFARE-S-EE VISA 12-6-07

B.	Full Name (Last, First, Middle Initial) Alaska Airlines	Transaction ID: 80130.E1219 Date of Disbursement 12 / 06 / 2007
	Mailing Address 19300 International Blvd	Amount of Each Disbursement this Period 67.20
	City Seatac State WA Zip Code 98188-5304	
	Purpose of Disbursement IN-KIND: AIRFARE-SEE VISA 12-6-07	
	Candidate Name MIKE ERICKSON	Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 05	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> MEMO: IN-KIND: AIRFARE-S-EE VISA 12-6-07

C.	Full Name (Last, First, Middle Initial) Steve Austria for Congress	Transaction ID: 80130.E1192 Date of Disbursement 12 / 21 / 2007
	Mailing Address 2537 Obetz Dr	Amount of Each Disbursement this Period 5000.00
	City Dayton State OH Zip Code 45434-6956	
	Purpose of Disbursement	
	Candidate Name STEVE C AUSTRIA	Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 07	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

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

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

FOR LINE NUMBER: (check only one)

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

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)  
Rely on Your Beliefs Fund

A.	Full Name (Last, First, Middle Initial) The Brown Hotel	Transaction ID: 80130.E1214 Date of Disbursement 12 / 10 / 2007
	Mailing Address 321 17th St	Amount of Each Disbursement this Period 430.70
	City Denver State CO Zip Code 80202-4003	
	Purpose of Disbursement IN-KIND: LODGING SEE VISA 12-28-07	[MEMO ITEM] MEMO: IN-KIND: LODGING SEE VISA 12-28-07
	Candidate Name ROBERT W SCHAFFER	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 00	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Friends of Erik Paulsen	Transaction ID: 80130.E1183 Date of Disbursement 12 / 20 / 2007
	Mailing Address PO Box 44369	Amount of Each Disbursement this Period 5000.00
	City Eden Prairie State MN Zip Code 55344-1369	
	Purpose of Disbursement	[MEMO ITEM] MEMO: IN-KIND: LODGING-S-EE VISA 12-6-07
	Candidate Name ERIK PAULSEN	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 03	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Hilton Hotels	Transaction ID: 80130.E1217 Date of Disbursement 12 / 06 / 2007
	Mailing Address 921 SW 6th Ave	Amount of Each Disbursement this Period 233.83
	City Portland State OR Zip Code 97204-1202	
	Purpose of Disbursement IN-KIND: LODGING-SEE VISA 12-6-07	[MEMO ITEM] MEMO: IN-KIND: LODGING-S-EE VISA 12-6-07
	Candidate Name GREGORY PAUL WALDEN	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 02	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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)  
Rely on Your Beliefs Fund

**A.** Full Name (Last, First, Middle Initial)  
National Republican Senatorial Committee

Mailing Address 425 2nd St NW

City Washington State DC Zip Code 20001-2003

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 80130.E1180  
Date of Disbursement

12 / 18 / 2007

Amount of Each Disbursement this Period

15000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
Steve Stivers for Congress

Mailing Address 211 S 5th St

City Columbus State OH Zip Code 43215-5203

Purpose of Disbursement

Candidate Name  
STEVE STIVERS

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: OH District: 15

Transaction ID: 71213.E1179  
Date of Disbursement

12 / 04 / 2007

Amount of Each Disbursement this Period

5000.00

**C.** Full Name (Last, First, Middle Initial)  
Darren White for Congress

Mailing Address PO Box 16601

City Albuquerque State NM Zip Code 87191-6601

Purpose of Disbursement

Candidate Name  
DARREN P WHITE

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: NM District: 01

Transaction ID: 71212.E1168  
Date of Disbursement

12 / 11 / 2007

Amount of Each Disbursement this Period

5000.00

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

25000.00

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

44189.75