

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
FREEDOM PROJECT; THE

Report Covering the Period: From:

M	M
1	2

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><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>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		119660.20
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	352273.45									
(c) Total Receipts (from Line 19)	164345.54	1357607.64								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	516618.99	1477267.84								
7. Total Disbursements (from Line 31)	202720.57	1163369.42								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	313898.42	313898.42								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
FREEDOM PROJECT; THE

Report Covering the Period: From:

M	M
1	2

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	53770.00	295320.00
(ii) Unitemized	65.00	10872.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	53835.00	306192.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	105000.00	986450.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	158835.00	1292642.00
12. Transfers From Affiliated/Other Party Committees	5510.54	19510.54
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	26479.50
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	18975.60
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	164345.54	1357607.64
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	164345.54	1357607.64

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	89920.57	708564.18
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	89920.57	708564.18
22. Transfers to Affiliated/Other Party Committees.....	0.00	8093.27
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	110000.00	383412.20
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	2900.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	2600.00	7600.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	2600.00	10500.00
29. Other Disbursements.....	200.00	52799.77
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))..	202720.57	1163369.42
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	202720.57	1163369.42

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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	158835.00	1292642.00
34. Total Contribution Refunds (from Line 28(d))	2600.00	10500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	156235.00	1282142.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	89920.57	708564.18
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	26479.50
38. Net Operating Expenditures (subtract Line 37 from Line 36)	89920.57	682084.68

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 / 58
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Rebecca Anderson	Date of Receipt MM / DD / YYYY 12 / 22 / 2009
	Mailing Address 3525 17th Street S	Transaction ID: SA11AI-6354-21563-c
	City State Zip Code Arlington VA 22204-5003	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Williams & Jensen, PLLC Principal	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

B.	Full Name (Last, First, Middle Initial) James Benson	Date of Receipt MM / DD / YYYY 12 / 18 / 2009
	Mailing Address 63 Winsor Way	Transaction ID: SA11AI-10324-21580-c
	City State Zip Code Weston MA 02493-2538	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Clark Benson, LLC Insurance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

C.	Full Name (Last, First, Middle Initial) Rhonda Bentz	Date of Receipt MM / DD / YYYY 12 / 10 / 2009
	Mailing Address 3532 S Stafford Street	Transaction ID: SA11AI-10412-21579-c
	City State Zip Code Arlington VA 22206-1812	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Bentz Strategies LLC President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	2500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 58
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

<p>A. Full Name (Last, First, Middle Initial) Michael J. Boland</p> <p>Mailing Address 2 Thompson Street</p> <p>City State Zip Code Annapolis MD 21401-2806</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Griffin, Johnson, Dover & Stewart</p> <p>Occupation Principal</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 5000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 2 / 2 0 0 9</p> <p>Transaction ID: SA11AI-5837-21553-c</p> <p>Amount of Each Receipt this Period 5000.00</p> <p>Contribution</p>
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<p>B. Full Name (Last, First, Middle Initial) Bruce Carnes</p> <p>Mailing Address 6015 Nassau Drive</p> <p>City State Zip Code Springfield VA 22152-1234</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer NCTA</p> <p>Occupation Sr. VP, Administration</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 2 / 2 0 0 9</p> <p>Transaction ID: SA11AI-11417-21564-c</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>Contribution</p>
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<p>C. Full Name (Last, First, Middle Initial) Robert Castellini</p> <p>Mailing Address 312 Elm Street Suite 2600</p> <p>City State Zip Code Cincinnati OH 45202-2728</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Castellini Group</p> <p>Occupation Chairman</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 5000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 3 / 2 0 0 9</p> <p>Transaction ID: SA11AI-11426-21581-c</p> <p>Amount of Each Receipt this Period 5000.00</p> <p>Contribution</p>
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SUBTOTAL of Receipts This Page (optional)	11000.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 58
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Susan Castellini	Date of Receipt MM / DD / YYYY 12 / 23 / 2009
	Mailing Address 312 Elm Street Suite 2600	Transaction ID: SA11AI-11427-21582-c
	City State Zip Code Cincinnati OH 45202-2728	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Self Occupation Volunteer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

B.	Full Name (Last, First, Middle Initial) Kirsten Chadwick	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 601 President Ford Lane	Transaction ID: SA11AI-6467-21534-c
	City State Zip Code Alexandria VA 22302-3033	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Fierce, Isakowitz & Blalock Occupation Government Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

C.	Full Name (Last, First, Middle Initial) Chris Christensen	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 39500 High Pointe Blvd. Suite 150	Transaction ID: SA11AI-10039-21524-c
	City State Zip Code Novi MI 48375	Amount of Each Receipt this Period 820.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Advanced Strategies Group Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 820.00	

SUBTOTAL of Receipts This Page (optional)	6320.00
TOTAL This Period (last page this line 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 9 / 58
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Glenn Creamer		Date of Receipt
	Mailing Address 107 Nayatt Road		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Barrington	RI	02806-3300
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI-11407-21522-c
Name of Employer Providence Equity Partners		Occupation Private Equity Investor	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="5000.00"/>
			Contribution

B.	Full Name (Last, First, Middle Initial) Frank Dinsmore		Date of Receipt
	Mailing Address 4030 Canonero Court		<input type="text" value="12"/> / <input type="text" value="08"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Fair Oaks	CA	95628-6418
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI-11425-21578-c
Name of Employer EDF Resource Capital, Inc.		Occupation CEO	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="5000.00"/>
			Contribution

C.	Full Name (Last, First, Middle Initial) Raissa Downs		Date of Receipt
	Mailing Address 1212 New York Avenue NW Suite 1050		<input type="text" value="12"/> / <input type="text" value="22"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Washington	DC	20005-6135
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI-11415-21550-c
Name of Employer Tarplin, Downs & Young, LLC		Occupation Partner	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="1000.00"/>
			Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="11000.00"/>
TOTAL 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 10 / 58
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)
Robert Hobart

Mailing Address 402 Ashford Lane

City State Zip Code
Alexandria VA 22304-7158

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

Name of Employer Occupation
McBee Strategies Exec. Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
MM / DD / YYYY
12 / 05 / 2009

Transaction ID: SA11AI-11104-21577-c

Amount of Each Receipt this Period
1000.00

Contribution

B.

Full Name (Last, First, Middle Initial)
H. Thomas Hollinger

Mailing Address 17 Quail Crossing Rd.

City State Zip Code
Wilmington DE 19807

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

Name of Employer Occupation
Newton One Advisors President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: SA11AI-11405-21520-c

Amount of Each Receipt this Period
600.00

Contribution

C.

Full Name (Last, First, Middle Initial)
Saginaw Chippewa Indian Tribe

Mailing Address 7070 E Broadway Road

City State Zip Code
Mt Pleasant MI 48858-8970

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

Name of Employer Occupation
Indian Tribe Indian Tribe

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: SA11AI-3817-21537-c

Amount of Each Receipt this Period
5000.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **6600.00**

TOTAL This Period (last page this line 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 11 / 58
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Mark Isakowitz		Date of Receipt
	Mailing Address 3198 Pond Mist Way		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Oak Hill	VA	20171-1905
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Fierce, Isakowitz & Blalock		Occupation Partner	Transaction ID: SA11AI-6318-21528-c
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="3500.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="1000.00"/>
		Contribution	

B.	Full Name (Last, First, Middle Initial) Jonathan Nelson		Date of Receipt
	Mailing Address 50 Kennedy Plaza		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Providence	RI	02903-2393
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Providence Equity Partners		Occupation Investor	Transaction ID: SA11AI-11408-21523-c
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="1000.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="1000.00"/>
		Contribution	

C.	Full Name (Last, First, Middle Initial) John O'Rourke		Date of Receipt
	Mailing Address 11028 Stanmore Drive		<input type="text" value="12"/> / <input type="text" value="22"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Potomac	MD	20854-1525
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Law offices of John O'Rourke		Occupation Attorney	Transaction ID: SA11AI-10124-21533-c
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="5000.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="2350.00"/>
		Contribution	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="4350.00"/>
TOTAL 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: (check only one)	PAGE 12 / 58
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) J. Stephen Rizley	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 24200 N Alma School Road Lot 20	Transaction ID: SA11AI-11409-21529-c
	City State Zip Code Scottsdale AZ 85255-3000	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Cox Communications Sr. VP & GM Arizona	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Christopher Ruddy	Date of Receipt MM / DD / YYYY 12 / 22 / 2009
	Mailing Address PO Box 20989	Transaction ID: SA11AI-11418-21565-c
	City State Zip Code West Palm Beach FL 33416-0989	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Newsmax Media, Inc. President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

C.	Full Name (Last, First, Middle Initial) Stephen Ruhlen	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 8309 Simsbury Place	Transaction ID: SA11AI-6422-21530-c
	City State Zip Code Alexandria VA 22308-1563	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Self Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2250.00	

SUBTOTAL of Receipts This Page (optional)	8000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 58
(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)
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial) Nicholas Ryan		Date of Receipt MM / DD / YYYY 12 / 04 / 2009
Mailing Address 400 Locust Street Suite 330		Transaction ID: SA11AI-11424-21576-c
City Des Moines	State Zip Code IA 50309-2450	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self	Occupation Entrepreneur	Contribution
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) Karl Schlenker		Date of Receipt MM / DD / YYYY 12 / 22 / 2009
Mailing Address 16 South Ave. Suite 159		Transaction ID: SA11AI-11416-21554-c
City Cranford	State Zip Code NJ 07016	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Minnesota Thermal Science-LLC	Occupation VP, Sales	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.

Full Name (Last, First, Middle Initial) Linda Tarplin		Date of Receipt MM / DD / YYYY 12 / 22 / 2009
Mailing Address 1212 New York Avenue NW Suite 1050		Transaction ID: SA11AI-5707-21552-c
City Washington	State Zip Code DC 20005-6135	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Tarplin, Downs & Young	Occupation Principal	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	2000.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 14 / 58	
	(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)
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Peter Wilde, Jr.		Date of Receipt																					
	Mailing Address 280 Warren Street		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	2		3	1		2	0	0	9														
	City	State	Zip Code		Transaction ID: SA11AI-11406-21521-c																			
	Brookline	MA	02445-5927																					
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>		Amount of Each Receipt this Period																				
Name of Employer Providence Equity Partners		Occupation Venture Capital		<input type="text" value="2000.00"/>																				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		Contribution																				
		<input type="text" value="2000.00"/>																						

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="2000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="53770.00"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 / 58
	(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"/> 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)
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Gregg Engles		Date of Receipt
	Mailing Address 2515 Mckinney Avenue Suite 1200		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Dallas	TX	75201-1945
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Dean Foods Co.		Occupation Chairman	Transaction ID: SA12-3986-21583-P
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="500.00"/>
		<input type="text" value="500.00"/>	[MEMO ITEM] Transfer Subitemization of JBPS Freedom Alliance

B.	Full Name (Last, First, Middle Initial) Al Hill		Date of Receipt
	Mailing Address 1601 Elm Street		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Dallas	TX	75201-4701
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Hill Development		Occupation Investor	Transaction ID: SA12-3978-21583-P
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="5000.00"/>
		<input type="text" value="5000.00"/>	[MEMO ITEM] Transfer Subitemization of JBPS Freedom Alliance

C.	Full Name (Last, First, Middle Initial) JBPS Freedom Alliance		Date of Receipt
	Mailing Address 1701 Esquire Lane		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Mclean	VA	22101-4755
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/> C00466003
Name of Employer		Occupation	Transaction ID: SA12-11248-21583-c
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="5510.54"/>
		<input type="text" value="19510.54"/>	Transfer from affiliated committee

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="5510.54"/>
TOTAL This Period (last page this line number only)	<input type="text" value="5510.54"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 58
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial) Allstate Insurance Company Pac		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address 2775 Sanders Road Suite A5		Transaction ID: SA11C-11410-21531-c
City Northbrook	State IL	Zip Code 60062-6110
FEC ID number of contributing federal political committee. C C00040253		Amount of Each Receipt this Period 1500.00
Name of Employer	Occupation	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

B.

Full Name (Last, First, Middle Initial) AMERICAN ASSOCIATION OF NURSE ANESTHETISTS SEPARATE SEGREGATED FUND (CRNA-PAC)		Date of Receipt MM / DD / YYYY 12 / 22 / 2009
Mailing Address 222 S Prospect Avenue # C		Transaction ID: SA11C-3818-21548-c
City Park Ridge	State IL	Zip Code 60068-4037
FEC ID number of contributing federal political committee. C C00173153		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

C.

Full Name (Last, First, Middle Initial) American College Of Cardiology Political Action Committee		Date of Receipt MM / DD / YYYY 12 / 22 / 2009
Mailing Address 2400 N Street NW		Transaction ID: SA11C-10162-21566-c
City Washington	State DC	Zip Code 20037-1153
FEC ID number of contributing federal political committee. C C00375360		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	▶	11500.00
TOTAL This Period (last page this line number 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 / 58
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

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

Mailing Address 1201 L Street NW

City Washington State DC Zip Code 20005-4024

FEC ID number of contributing federal political committee. **C** C00006080

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: SA11C-3965-21540-c
Amount of Each Receipt this Period: 2500.00
Contribution

B. Full Name (Last, First, Middle Initial)
American Hospital Association PAC

Mailing Address 325 7th Street NW

City Washington State DC Zip Code 20004-2818

FEC ID number of contributing federal political committee. **C** C00106146

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 12 / 22 / 2009
Transaction ID: SA11C-5307-21557-c
Amount of Each Receipt this Period: 5000.00
Contribution

C. Full Name (Last, First, Middle Initial)
AMERICAN MEAT INSTITUTE POLITICAL ACTION COMMITTEE

Mailing Address 1150 Connecticut Avenue NW
Floor 12

City Washington State DC Zip Code 20036-4104

FEC ID number of contributing federal political committee. **C** C00024281

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 12 / 22 / 2009
Transaction ID: SA11C-9248-21561-c
Amount of Each Receipt this Period: 2500.00
Contribution

SUBTOTAL of Receipts This Page (optional) ► 10000.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 58
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial)
CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Mailing Address 7000 Cardinal Place

City State Zip Code
Dublin OH 43017-1091

FEC ID number of contributing federal political committee. **C** C00332833

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 2 / 2 0 0 9

Transaction ID: SA11C-8305-21559-c

Amount of Each Receipt this Period
2500.00

Contribution

B. Full Name (Last, First, Middle Initial)
CAREER COLLEGE ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 10 G Street NE
Suite 750

City State Zip Code
Washington DC 20002-4258

FEC ID number of contributing federal political committee. **C** C00213066

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 2 / 2 0 0 9

Transaction ID: SA11C-3810-21555-c

Amount of Each Receipt this Period
2500.00

Contribution

C. Full Name (Last, First, Middle Initial)
CVS/Caremark Corporation Employees Pac

Mailing Address 9501 E Shea Boulevard

City State Zip Code
Scottsdale AZ 85260-6719

FEC ID number of contributing federal political committee. **C** C00384818

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 / 2 2 / 2 0 0 9

Transaction ID: SA11C-10387-21545-c

Amount of Each Receipt this Period
2500.00

Contribution

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

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

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

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

FOR LINE NUMBER: PAGE 19 / 58
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial)
DEALERS ELECTION ACTION COMMITTEE OF THE NATIONAL AUTOMOTIVE DEALERS ASSOCIATION

Mailing Address 8400 Westpark Drive

City Mclean State VA Zip Code 22102-5116

FEC ID number of contributing federal political committee. **C** C00040998

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 / 3 1 / 2 0 0 9

Transaction ID: SA11C-3967-21542-c

Amount of Each Receipt this Period
5000.00

Contribution

B. Full Name (Last, First, Middle Initial)
E.I. Du Pont De Nemours Company Good Government Fund (dupont Good Government Fund)

Mailing Address 1007 Market Street
BMP30

City Wilmington State DE Zip Code 19898-0001

FEC ID number of contributing federal political committee. **C** C00171926

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 / 3 1 / 2 0 0 9

Transaction ID: SA11C-11411-21538-c

Amount of Each Receipt this Period
2500.00

Contribution

C. Full Name (Last, First, Middle Initial)
Electrical Contractors Political Action Committee

Mailing Address 3 Bethesda Metro Center
Suite 1100

City Bethesda State MD Zip Code 20814-6302

FEC ID number of contributing federal political committee. **C** C00113811

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 / 3 1 / 2 0 0 9

Transaction ID: SA11C-11412-21539-c

Amount of Each Receipt this Period
2500.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► 10000.00

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

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

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

FOR LINE NUMBER: PAGE 20 / 58
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial)
Financial Services Roundtable PAC

Mailing Address 1001 Pennsylvania Avenue NW
Suite 500

City Washington State DC Zip Code 20004-2508

FEC ID number of contributing federal political committee. **C** C00193177

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 22 / 2009
Transaction ID: SA11C-8244-21571-c
 Amount of Each Receipt this Period 5000.00
 Contribution

B. Full Name (Last, First, Middle Initial)
FirstEnergy Political Action Committee

Mailing Address 76 S Main Street

City Akron State OH Zip Code 44308-1812

FEC ID number of contributing federal political committee. **C** C00140855

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 22 / 2009
Transaction ID: SA11C-7082-21558-c
 Amount of Each Receipt this Period 5000.00
 Contribution

C. Full Name (Last, First, Middle Initial)
GOLDMAN SACHS GROUP INC. POLITICAL ACTION COMMITTEE, THE

Mailing Address 101 Constitution Avenue, NW
Suite 1000E

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00350744

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 22 / 2009
Transaction ID: SA11C-2047-21568-c
 Amount of Each Receipt this Period 5000.00
 Contribution

SUBTOTAL of Receipts This Page (optional) ► 15000.00

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

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

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

FOR LINE NUMBER: PAGE 21 / 58
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial)
Greenberg, Traurig, PA Political Action Committee

Mailing Address 1221 Brickell Avenue

City State Zip Code
Miami FL 33131-3224

FEC ID number of contributing federal political committee. **C** C00266585

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt
MM / DD / YYYY
12 / 22 / 2009

Transaction ID: SA11C-7472-21547-c

Amount of Each Receipt this Period
2500.00

Contribution

B. Full Name (Last, First, Middle Initial)
Groom Law Group, Chartered PAC

Mailing Address 1701 Pennsylvania Avenue NW

City State Zip Code
Washington DC 20006-5805

FEC ID number of contributing federal political committee. **C** C00394775

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
12 / 22 / 2009

Transaction ID: SA11C-9611-21546-c

Amount of Each Receipt this Period
2500.00

Contribution

C. Full Name (Last, First, Middle Initial)
HSBC NORTH AMERICA POLITICAL ACTION COMMITTEE (H-PAC)

Mailing Address 2700 Sanders Road

City State Zip Code
Prospect Heights IL 60070-2701

FEC ID number of contributing federal political committee. **C** C00033423

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
12 / 22 / 2009

Transaction ID: SA11C-4365-21570-c

Amount of Each Receipt this Period
5000.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► 10000.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 58
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial)
Jim Beam Brands Co. PAC

Mailing Address 510 Lake Cook Road

City State Zip Code
Deerfield IL 60015-5610

FEC ID number of contributing federal political committee. **C** C00194126

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 2 / 2 0 0 9

Transaction ID: SA11C-7337-21573-c

Amount of Each Receipt this Period
2500.00

Contribution

B. Full Name (Last, First, Middle Initial)
Lockridge Grindal Nauen Political Fund

Mailing Address 100 Washington Avenue S
Suite 2200

City State Zip Code
Minneapolis MN 55401-2159

FEC ID number of contributing federal political committee. **C** C00167916

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 2 2 / 2 0 0 9

Transaction ID: SA11C-11414-21544-c

Amount of Each Receipt this Period
1000.00

Contribution

C. Full Name (Last, First, Middle Initial)
MillerCoors LLC PAC

Mailing Address 1501 M Street NW
Suite 330

City State Zip Code
Washington DC 20005-1700

FEC ID number of contributing federal political committee. **C** C00457697

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 / 3 1 / 2 0 0 9

Transaction ID: SA11C-11413-21543-c

Amount of Each Receipt this Period
5000.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **8500.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 58
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial)
MORTGAGE BANKERS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1919 Pennsylvania Avenue NW
Floor 8

City Washington State DC Zip Code 20006-3404

FEC ID number of contributing federal political committee. **C** C00004812

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 12 / 22 / 2009
Transaction ID: SA11C-4236-21549-c
 Amount of Each Receipt this Period: 5000.00
 Contribution

B. Full Name (Last, First, Middle Initial)
National Association of Health Underwriters Pac (HUPAC)

Mailing Address PO Box 20865

City Indianapolis State IN Zip Code 46220-0865

FEC ID number of contributing federal political committee. **C** C00283135

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: SA11C-10772-21532-c
 Amount of Each Receipt this Period: 2500.00
 Contribution

C. Full Name (Last, First, Middle Initial)
New York Stock Exchange PAC (NYSE PAC)

Mailing Address 1800 K Street NW

City Washington State DC Zip Code 20006-2202

FEC ID number of contributing federal political committee. **C** C00402974

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: SA11C-6946-21535-c
 Amount of Each Receipt this Period: 2500.00
 Contribution

SUBTOTAL of Receipts This Page (optional) ► 10000.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 58
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial)
PFIZER PAC

Mailing Address 235 E 42nd Street

City State Zip Code
New York NY 10017-5703

FEC ID number of contributing federal political committee. **C** C00016683

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 / 2 2 / 2 0 0 9

Transaction ID: SA11C-4017-21560-c

Amount of Each Receipt this Period
2500.00

Contribution

B. Full Name (Last, First, Middle Initial)
QWEST COMMUNICATIONS INTERNATIONAL INC POLITICAL ACTION COMMITTEE

Mailing Address 607 14th Street NW
Suite 950

City State Zip Code
Washington DC 20005-2030

FEC ID number of contributing federal political committee. **C** C00237156

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 / 3 1 / 2 0 0 9

Transaction ID: SA11C-9009-21536-c

Amount of Each Receipt this Period
2500.00

Contribution

C. Full Name (Last, First, Middle Initial)
Raytheon Company Political Action Committee

Mailing Address 1100 Wilson Boulevard
Suite 1500

City State Zip Code
Arlington VA 22209-2270

FEC ID number of contributing federal political committee. **C** C00097568

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 2 / 2 0 0 9

Transaction ID: SA11C-10623-21562-c

Amount of Each Receipt this Period
2500.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► 7500.00

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

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

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

FOR LINE NUMBER: PAGE 25 / 58
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial)
Seniors Housing PAC

Mailing Address 5100 Wisconsin Avenue NW
Suite 307

City Washington State DC Zip Code 20016-4130

FEC ID number of contributing federal political committee. **C** C00325332

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 12 / 22 / 2009
Transaction ID: SA11C-10160-21574-c
 Amount of Each Receipt this Period: 5000.00
 Contribution

B. Full Name (Last, First, Middle Initial)
Supervalu Inc Political Action Committee, (valupac)

Mailing Address PO Box 20

City Boise State ID Zip Code 83726-0020

FEC ID number of contributing federal political committee. **C** C00243220

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 12 / 22 / 2009
Transaction ID: SA11C-4154-21572-c
 Amount of Each Receipt this Period: 2500.00
 Contribution

C. Full Name (Last, First, Middle Initial)
Valero Energy Corporation Political Action Committee

Mailing Address 1 Valero Way

City San Antonio State TX Zip Code 78249-1616

FEC ID number of contributing federal political committee. **C** C00109546

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 12 / 22 / 2009
Transaction ID: SA11C-10384-21556-c
 Amount of Each Receipt this Period: 5000.00
 Contribution

SUBTOTAL of Receipts This Page (optional) ► 12500.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 58
(check only one)

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

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

NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)
WHOLESALE-DISTRIBUTOR PAC OF THE NATIONAL ASSOCIATION OF WHOLESALE-DISTRIBUTORS

Mailing Address 1325 G Street NW
Suite 1000

City State Zip Code
Washington DC 20005-3134

FEC ID number of contributing federal political committee. **C** C00109306

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
1 2 / 2 2 / 2 0 0 9

Transaction ID: SA11C-4016-21567-c

Amount of Each Receipt this Period
2500.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	2500.00
TOTAL This Period (last page this line number only)	▶	105000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Bogart Associates, Inc.	Transaction ID: SB21B-9972-21609-e
	Mailing Address 1200 Trinity Drive	Date of Disbursement MM / DD / YYYY 12 / 04 / 2009
	City Alexandria State VA Zip Code 22314-4724	Amount of Each Disbursement this Period 304.85
	Purpose of Disbursement Gen. fund. travel Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Cafe Recess	Transaction ID: SB21B-11443-21642-e
	Mailing Address 209 Pennsylvania Avenue SE	Date of Disbursement MM / DD / YYYY 12 / 21 / 2009
	City Washington State DC Zip Code 20003-1107	Amount of Each Disbursement this Period 660.00
	Purpose of Disbursement Gen. fund. food & bev. Candidate Name	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Capitol Hill Club	Transaction ID: SB21B-5501-21632-e
	Mailing Address 300 1st Street SE	Date of Disbursement MM / DD / YYYY 12 / 14 / 2009
	City Washington State DC Zip Code 20003-1801	Amount of Each Disbursement this Period 274.22
	Purpose of Disbursement Mtg. exp. food & bev. Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1239.07
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Chain Bridge Bank	Transaction ID: SB21B-10391-21595-e Date of Disbursement																			
	Mailing Address 1445 Laughlin Avenue Suite A	<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>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	5		2	0	0	9												
	City Mclean State VA Zip Code 22101-5737	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Payroll taxes	<table border="1"><tr><td>5450.70</td></tr></table>	5450.70																		
5450.70																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

B.	Full Name (Last, First, Middle Initial) Chain Bridge Bank	Transaction ID: SB21B-10391-21604-e Date of Disbursement																			
	Mailing Address 1445 Laughlin Avenue Suite A	<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>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		3	1		2	0	0	9												
	City Mclean State VA Zip Code 22101-5737	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Payroll taxes	<table border="1"><tr><td>1501.33</td></tr></table>	1501.33																		
1501.33																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

C.	Full Name (Last, First, Middle Initial) Chain Bridge Bank	Transaction ID: SB21B-10391-21605-e Date of Disbursement																			
	Mailing Address 1445 Laughlin Avenue Suite A	<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>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		3	1		2	0	0	9												
	City Mclean State VA Zip Code 22101-5737	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Bank fees	<table border="1"><tr><td>67.30</td></tr></table>	67.30																		
67.30																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>7019.33</td></tr></table>	7019.33
7019.33		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 29 / 58

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial) Chocolate Dog Studios Mailing Address 11870 Bean Road City Chardon State OH Zip Code 44024-9042 Purpose of Disbursement Printing, letterhead and envelopes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-11210-21613-e Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 9
	Amount of Each Disbursement this Period 1671.21
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Clark, Schaefer, Hackett & Company Mailing Address 160 N Breiel Boulevard City Middletown State OH Zip Code 45042-3806 Purpose of Disbursement Payroll processing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-6282-21541-e Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 9
	Amount of Each Disbursement this Period 65.00
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Clark, Schaefer, Hackett & Company Mailing Address 160 N Breiel Boulevard City Middletown State OH Zip Code 45042-3806 Purpose of Disbursement Payroll processing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-6282-21650-e Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 65.00
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

1801.21

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)

PAGE 30 / 58

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Commonwealth of Virginia	Transaction ID: SB21B-8564-21596-e Date of Disbursement																			
	Mailing Address PO Box 27264	<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>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		3	1		2	0	0	9												
	City Richmond State VA Zip Code 23261-7264	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Payroll taxes	<table border="1"><tr><td>595.80</td></tr></table>	595.80																		
595.80																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

B.	Full Name (Last, First, Middle Initial) Deluxe Business Systems	Transaction ID: SB21B-10945-21606-e Date of Disbursement																			
	Mailing Address 3680 Victoria Street N	<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>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	4		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	4		2	0	0	9												
	City Shoreview State MN Zip Code 55126-2906	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Bank supplies	<table border="1"><tr><td>37.87</td></tr></table>	37.87																		
37.87																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

C.	Full Name (Last, First, Middle Initial) Direct TV	Transaction ID: SB21B-11147-21636-e Date of Disbursement																			
	Mailing Address PO Box 60036	<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>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	1		2	0	0	9												
	City Los Angeles State CA Zip Code 90060-0036	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Utilities	<table border="1"><tr><td>72.14</td></tr></table>	72.14																		
72.14																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>705.81</td></tr></table>	705.81
705.81		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Disney Resort Destinations <hr/> Mailing Address PO Box 403411 <hr/> City Atlanta State GA Zip Code 30384-3411 <hr/> Purpose of Disbursement Gen. fund. food, bev. & lodging Candidate Name 003 Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB21B-3618-21633-e Date of Disbursement <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y 1 2 / 1 4 / 2 0 0 9 </div> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">12837.58</div>
B.	Full Name (Last, First, Middle Initial) EDONATION <hr/> Mailing Address 118 N. Asaph Street <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Website contribution processing Candidate Name 001 Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB21B-10939-21527-e Date of Disbursement <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 9 </div> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">4.00</div>
C.	Full Name (Last, First, Middle Initial) JMAC BBQ <hr/> Mailing Address 707 H Street NW <hr/> City Washington State DC Zip Code 20001-3792 <hr/> Purpose of Disbursement Gen.fund. food & bev. Candidate Name 001 Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB21B-11423-10825-V Date of Disbursement <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y 1 2 / 1 4 / 2 0 0 9 </div> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">1900.00</div> <p>[MEMO ITEM] Subitemization of Mastercard</p>

SUBTOTAL of Disbursements This Page (optional) ▶

12841.58

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial) Mears Transportation Mailing Address 324 W Gore Street City Orlando State FL Zip Code 32806-1037 Purpose of Disbursement Gen. fund. travel ground transport. Candidate Name	Transaction ID: SB21B-9012-10828-V Date of Disbursement 12 / 14 / 2009 Amount of Each Disbursement this Period 471.00

[MEMO ITEM]
Subitemization of Mastercard

B. Full Name (Last, First, Middle Initial) BLT Steak Mailing Address 1625 I Street, NW City Washington State DC Zip Code 20006 Purpose of Disbursement Gen. fund. food & bev. Candidate Name	Transaction ID: SB21B-10009-10815-V Date of Disbursement 12 / 14 / 2009 Amount of Each Disbursement this Period 750.00

[MEMO ITEM]
Subitemization of Mastercard

C. Full Name (Last, First, Middle Initial) 123 Together.com Mailing Address 111 S Bedford Street Suite 200 City Burlington State MA Zip Code 01803-5145 Purpose of Disbursement Internet Candidate Name	Transaction ID: SB21B-10075-10829-V Date of Disbursement 12 / 14 / 2009 Amount of Each Disbursement this Period 174.87

[MEMO ITEM]
Subitemization of Mastercard

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Dunkin Donuts	Transaction ID: SB21B-10272-10838-V
	Mailing Address 801 Pennsylvania Avenue SE	Date of Disbursement MM / DD / YYYY 12 / 14 / 2009
	City Washington State DC Zip Code 20003-2167	Amount of Each Disbursement this Period 52.89
	Purpose of Disbursement Mtg. exp. food & bev. Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] Subitemization of Mastercard

B.	Full Name (Last, First, Middle Initial) Google Inc., Advertising Programs	Transaction ID: SB21B-11085-10821-V
	Mailing Address 1600 Amphitheatre Parkway	Date of Disbursement MM / DD / YYYY 12 / 14 / 2009
	City Mountain View State CA Zip Code 94043-1351	Amount of Each Disbursement this Period 1077.61
	Purpose of Disbursement TFP Website advertising Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] Subitemization of Mastercard

C.	Full Name (Last, First, Middle Initial) Airtran Airways, Inc.	Transaction ID: SB21B-11095-10832-V
	Mailing Address 3490 Piedmont Road	Date of Disbursement MM / DD / YYYY 12 / 14 / 2009
	City Atlanta State GA Zip Code 30305-1743	Amount of Each Disbursement this Period 211.20
	Purpose of Disbursement Gen. fund. travel airfare Candidate Name	002 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] Subitemization of Mastercard

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial) Facebook Advertising Mailing Address 1601 S California Avenue City Palo Alto State CA Zip Code 94304-1111 Purpose of Disbursement TFP Website advertising Candidate Name	Transaction ID: SB21B-11148-10811-V Date of Disbursement 12 / 14 / 2009
	Amount of Each Disbursement this Period 3294.26 [MEMO ITEM] Subitemization of Mastercard
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

B. Full Name (Last, First, Middle Initial) Matchbox Mailing Address 713 H Street NW City Washington State DC Zip Code 20001-3733 Purpose of Disbursement Mtg. exp. food & bev. Candidate Name	Transaction ID: SB21B-11421-10816-V Date of Disbursement 12 / 14 / 2009
	Amount of Each Disbursement this Period 203.73 [MEMO ITEM] Subitemization of Mastercard
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

C. Full Name (Last, First, Middle Initial) Szechuan House Fusion Grill Mailing Address 515 8th Street SE City Washington State DC Zip Code 20003-2835 Purpose of Disbursement Mtg. exp. food & bev. Candidate Name	Transaction ID: SB21B-10221-10820-V Date of Disbursement 12 / 14 / 2009
	Amount of Each Disbursement this Period 261.65 [MEMO ITEM] Subitemization of Mastercard
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial) Mastercard Mailing Address PO Box 42070 City Middletown State OH Zip Code 45042-0070 Purpose of Disbursement Credit card (see memo entries) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-3605-21575-e Date of Disbursement 12 / 14 / 2009
	Amount of Each Disbursement this Period 27475.65
	001 Category/Type
	[MEMO ITEM] Subitemization of Mastercard

B. Full Name (Last, First, Middle Initial) US Airways Mailing Address 2345 Crystal Drive City Arlington State VA Zip Code 22227-0001 Purpose of Disbursement Gen. fund. travel airfare Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-3616-10830-V Date of Disbursement 12 / 14 / 2009
	Amount of Each Disbursement this Period 130.00
	002 Category/Type
	[MEMO ITEM] Subitemization of Mastercard

C. Full Name (Last, First, Middle Initial) Disney Resort Destinations Mailing Address PO Box 403411 City Atlanta State GA Zip Code 30384-3411 Purpose of Disbursement Gen. fund. food, bev. & lodging Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-3618-10827-V Date of Disbursement 12 / 14 / 2009
	Amount of Each Disbursement this Period 13515.26
	003 Category/Type
	[MEMO ITEM] Subitemization of Mastercard

SUBTOTAL of Disbursements This Page (optional) ▶	27475.65
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) FTD	Transaction ID: SB21B-4090-10831-V
	Mailing Address 3113 Woodcreek Drive	Date of Disbursement MM / DD / YYYY 12 / 14 / 2009
	City Downers Grove State IL Zip Code 60515-5412	Amount of Each Disbursement this Period 257.70
	Purpose of Disbursement Flowers Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] Subitemization of Mastercard

B.	Full Name (Last, First, Middle Initial) Robert Trent Jones Club	Transaction ID: SB21B-4359-10822-V
	Mailing Address 1 Turtle Point Drive	Date of Disbursement MM / DD / YYYY 12 / 14 / 2009
	City Gainesville State VA Zip Code 20155-2803	Amount of Each Disbursement this Period 750.00
	Purpose of Disbursement Gen. fund. golf Candidate Name	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] Subitemization of Mastercard

C.	Full Name (Last, First, Middle Initial) Capitol Hill Club	Transaction ID: SB21B-5501-10817-V
	Mailing Address 300 1st Street SE	Date of Disbursement MM / DD / YYYY 12 / 14 / 2009
	City Washington State DC Zip Code 20003-1801	Amount of Each Disbursement this Period 702.69
	Purpose of Disbursement Mtg. exp. food & bev. Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] Subitemization of Mastercard

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Congressional Liquors	Transaction ID: SB21B-6678-10818-V
	Mailing Address 404 1st Street SE	Date of Disbursement MM / DD / YYYY 12 / 14 / 2009
	City Washington State DC Zip Code 20003-1826	Amount of Each Disbursement this Period 427.57
	Purpose of Disbursement Gen. fund. beverage Candidate Name	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] Subitemization of Mastercard

B.	Full Name (Last, First, Middle Initial) MDC & Associates, Inc.	Transaction ID: SB21B-9144-21610-e
	Mailing Address 1701 Esquire Lane	Date of Disbursement MM / DD / YYYY 12 / 04 / 2009
	City Mclean State VA Zip Code 22101-4755	Amount of Each Disbursement this Period 7500.00
	Purpose of Disbursement Bookkeeping & compliance Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) New Media Communications	Transaction ID: SB21B-7123-21647-e
	Mailing Address 3046 Brecksville Road	Date of Disbursement MM / DD / YYYY 12 / 03 / 2009
	City Richfield State OH Zip Code 44286-9399	Amount of Each Disbursement this Period 140.00
	Purpose of Disbursement Website contribution processing Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	7640.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) New Media Communications	Transaction ID: SB21B-7123-21641-e
	Mailing Address 3046 Brecksville Road	Date of Disbursement MM / DD / YYYY 12 / 04 / 2009
	City Richfield State OH Zip Code 44286-9399	Amount of Each Disbursement this Period 250.00
	Purpose of Disbursement Website maintenance & development Candidate Name	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) New Media Communications	Transaction ID: SB21B-7123-21648-e
	Mailing Address 3046 Brecksville Road	Date of Disbursement MM / DD / YYYY 12 / 30 / 2009
	City Richfield State OH Zip Code 44286-9399	Amount of Each Disbursement this Period 70.00
	Purpose of Disbursement Website contribution processing Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) New Media Communications	Transaction ID: SB21B-7123-21649-e
	Mailing Address 3046 Brecksville Road	Date of Disbursement MM / DD / YYYY 12 / 31 / 2009
	City Richfield State OH Zip Code 44286-9399	Amount of Each Disbursement this Period 1050.00
	Purpose of Disbursement Website contribution processing Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1370.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial) Office of Tax and Revenue <hr/> Mailing Address PO Box 96385 <hr/> City Washington State DC Zip Code 20090-6385 <hr/> Purpose of Disbursement Payroll taxes Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-4077-21597-e Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 633.00
	Category/ Type 001
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Reflections Properties <hr/> Mailing Address 631 Pennsylvania Avenue SE <hr/> City Washington State DC Zip Code 20003-4303 <hr/> Purpose of Disbursement Office rent & parking Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-11115-21607-e Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 9
	Amount of Each Disbursement this Period 2235.00
	Category/ Type 001
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Ritz Carlton Naples <hr/> Mailing Address 280 Vanderbilt Beach Road <hr/> City Naples State FL Zip Code 34108-2371 <hr/> Purpose of Disbursement Gen. fund. event deposit food & bev. Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-10941-21635-e Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 4 / 2 0 0 9
	Amount of Each Disbursement this Period 3000.00
	Category/ Type 003
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

5868.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Verizon	Transaction ID: SB21B-8324-21611-e
	Mailing Address PO Box 17577	Date of Disbursement MM / DD / YYYY 12 / 04 / 2009
	City Baltimore State MD Zip Code 21297-0513	Amount of Each Disbursement this Period 834.87
	Purpose of Disbursement Telephone Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Verizon	Transaction ID: SB21B-8324-21637-e
	Mailing Address PO Box 17577	Date of Disbursement MM / DD / YYYY 12 / 21 / 2009
	City Baltimore State MD Zip Code 21297-0513	Amount of Each Disbursement this Period 896.83
	Purpose of Disbursement Telephone Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Washington Courier	Transaction ID: SB21B-9969-21612-e
	Mailing Address 5520 Cherokee Avenue Suite 120	Date of Disbursement MM / DD / YYYY 12 / 04 / 2009
	City Alexandria State VA Zip Code 22312-2319	Amount of Each Disbursement this Period 57.40
	Purpose of Disbursement Telephone Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	1789.10
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Wiley Rein LLP	Transaction ID: SB21B-3634-21634-e
	Mailing Address 1776 K Street NW	Date of Disbursement MM / DD / YYYY 12 / 14 / 2009
	City Washington State DC Zip Code 20006-2304	Amount of Each Disbursement this Period 3000.88
	Purpose of Disbursement Legal services Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Whitaker Askew	Transaction ID: SB21B-3802-21584-e
	Mailing Address 3044 R Street NW	Date of Disbursement MM / DD / YYYY 12 / 15 / 2009
	City Washington State DC Zip Code 20007-2962	Amount of Each Disbursement this Period 1762.56
	Purpose of Disbursement Salary Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Whitaker Askew	Transaction ID: SB21B-3802-21585-e
	Mailing Address 3044 R Street NW	Date of Disbursement MM / DD / YYYY 12 / 15 / 2009
	City Washington State DC Zip Code 20007-2962	Amount of Each Disbursement this Period 1377.57
	Purpose of Disbursement Salary Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	6141.01
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

<p>A. Full Name (Last, First, Middle Initial) Whitaker Askew</p> <p>Mailing Address 3044 R Street NW</p> <p>City Washington State DC Zip Code 20007-2962</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-3802-21598-e Date of Disbursement 12 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 1377.56</p> <p>001 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) John Boehner</p> <p>Mailing Address 7371 Charter Cup Lane</p> <p>City West Chester State OH Zip Code 45069-4676</p> <p>Purpose of Disbursement Reimb. gen. fund. food & bev. Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-515-21608-e Date of Disbursement 12 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 826.84</p> <p>003 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) John Criscuolo</p> <p>Mailing Address 1845 A Street SE</p> <p>City Washington State DC Zip Code 20003-1706</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-10858-21586-e Date of Disbursement 12 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 1730.67</p> <p>001 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3935.07

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) John Criscuolo	Transaction ID: SB21B-10858-21587-e
	Mailing Address 1845 A Street SE	Date of Disbursement 12 / 15 / 2009
	City Washington State DC Zip Code 20003-1706	Amount of Each Disbursement this Period 191.06
	Purpose of Disbursement Salary Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) John Criscuolo	Transaction ID: SB21B-10858-21599-e
	Mailing Address 1845 A Street SE	Date of Disbursement 12 / 31 / 2009
	City Washington State DC Zip Code 20003-1706	Amount of Each Disbursement this Period 191.07
	Purpose of Disbursement Salary Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Johnny DeStefano	Transaction ID: SB21B-10021-21588-e
	Mailing Address 1000 New Jersey Ave., SE #1011	Date of Disbursement 12 / 15 / 2009
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period 1730.67
	Purpose of Disbursement Salary Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2112.80
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

<p>A. Full Name (Last, First, Middle Initial) Johnny DeStefano</p> <p>Mailing Address 1000 New Jersey Ave., SE #1011</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-10021-21589-e Date of Disbursement 12 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 602.03</p> <p>001 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Johnny DeStefano</p> <p>Mailing Address 1000 New Jersey Ave., SE #1011</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-10021-21600-e Date of Disbursement 12 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 602.04</p> <p>001 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Curtis Isakson</p> <p>Mailing Address 1201 N Garfield Street Apt. 618</p> <p>City Arlington State VA Zip Code 22201-6812</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-11116-21590-e Date of Disbursement 12 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 443.54</p> <p>001 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1647.61

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial) Curtis Isakson <hr/> Mailing Address 1201 N Garfield Street Apt. 618 <hr/> City Arlington State VA Zip Code 22201-6812 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-11116-21601-e Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 443.54
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Kevin Mcgrann <hr/> Mailing Address 150 N Carolina Avenue SE <hr/> City Washington State DC Zip Code 20003-1841 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-4052-21591-e Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 9
	Amount of Each Disbursement this Period 1765.19
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Kevin Mcgrann <hr/> Mailing Address 150 N Carolina Avenue SE <hr/> City Washington State DC Zip Code 20003-1841 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-4052-21592-e Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 9
	Amount of Each Disbursement this Period 829.46
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

3038.19

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Kevin Mcgrann	Transaction ID: SB21B-4052-21602-e
	Mailing Address 150 N Carolina Avenue SE	Date of Disbursement 12 / 31 / 2009
	City Washington State DC Zip Code 20003-1841	Amount of Each Disbursement this Period 829.46
	Purpose of Disbursement Salary Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Donald Seymour	Transaction ID: SB21B-10022-21593-e
	Mailing Address 401 Holland Lane #609	Date of Disbursement 12 / 15 / 2009
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period 1800.58
	Purpose of Disbursement Salary Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Donald Seymour	Transaction ID: SB21B-10022-21594-e
	Mailing Address 401 Holland Lane #609	Date of Disbursement 12 / 15 / 2009
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period 1258.05
	Purpose of Disbursement Salary Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3888.09
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)
Donald Seymour

Transaction ID: SB21B-10022-21603-e
Date of Disbursement

Mailing Address 401 Holland Lane
#609

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

City Alexandria State VA Zip Code 22314

Amount of Each Disbursement this Period

1258.05

Purpose of Disbursement
Salary

001
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

1258.05

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

89770.57

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Andy Harris For Congress	Transaction ID: SB23-10241-21631-e
	Mailing Address PO Box 1527	Date of Disbursement 12 / 09 / 2009
	City Annapolis State MD Zip Code 21404-1527	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Contribution Candidate Name Andrew P Harris	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Brian Bilbray for Congress	Transaction ID: SB23-8035-21622-e
	Mailing Address 970 Seacoast Drive	Date of Disbursement 12 / 09 / 2009
	City Imperial Beach State CA Zip Code 91932-2402	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Contribution Candidate Name Brian P Bilbray	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 50	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Charlie Dent for Congress	Transaction ID: SB23-9423-21615-e
	Mailing Address PO Box 442	Date of Disbursement 12 / 09 / 2009
	City Allentown State PA Zip Code 18105-0442	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Contribution Candidate Name Charles W Dent	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 15	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	15000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial) Charlie Dent for Congress <hr/> Mailing Address PO Box 442 <hr/> City Allentown State PA Zip Code 18105-0442 <hr/> Purpose of Disbursement Contribution Candidate Name Charles W Dent Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 15 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-9423-21616-e Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 9 / 2 0 0 9
	Amount of Each Disbursement this Period 5000.00
	Category/Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Chris Lee For Congress <hr/> Mailing Address PO Box 15395 <hr/> City Rochester State NY Zip Code 14615-0395 <hr/> Purpose of Disbursement Contribution Candidate Name Christopher J. Lee Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 26 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-10468-21625-e Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 9 / 2 0 0 9
	Amount of Each Disbursement this Period 5000.00
	Category/Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Gibbs For Congress <hr/> Mailing Address 211 S 5th Street <hr/> City Columbus State OH Zip Code 43215-5203 <hr/> Purpose of Disbursement Contribution Candidate Name Robert Brian Gibbs Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 18 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-11438-21639-e Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 9
	Amount of Each Disbursement this Period 5000.00
	Category/Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

15000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Joseph Cao for Congress	Transaction ID: SB23-10918-21624-e
	Mailing Address PO Box 56156	Date of Disbursement 12 / 09 / 2009
	City New Orleans State LA Zip Code 70156-6156	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Contribution Candidate Name Joseph Cao	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 02	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Ken Calvert For Congress	Transaction ID: SB23-10877-21623-e
	Mailing Address PO Box 20123	Date of Disbursement 12 / 09 / 2009
	City Riverside State CA Zip Code 92516-0123	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Contribution Candidate Name Mr. Ken Calvert	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 44	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Lee Terry for Congress	Transaction ID: SB23-7002-21620-e
	Mailing Address 17225 Woolworth Avenue	Date of Disbursement 12 / 09 / 2009
	City Omaha State NE Zip Code 68130-1102	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Contribution Candidate Name Lee Terry	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 02	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	15000.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial) Lungren for Congress <hr/> Mailing Address 9321 Silverbend Lane <hr/> City Elk Grove State CA Zip Code 95624-3985 <hr/> Purpose of Disbursement Contribution Candidate Name Daniel Lungren <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 03 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-9887-21626-e Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 9 / 2 0 0 9
	Amount of Each Disbursement this Period 5000.00
	Category/Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Lynn Jenkins For Congress <hr/> Mailing Address PO Box 1441 <hr/> City Topeka State KS Zip Code 66601-1441 <hr/> Purpose of Disbursement Contribution Candidate Name Lynn Jenkins <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 02 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-10723-21617-e Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 9 / 2 0 0 9
	Amount of Each Disbursement this Period 5000.00
	Category/Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Mary Bono Mack Committee <hr/> Mailing Address PO Box 3370 <hr/> City Palm Springs State CA Zip Code 92263-3370 <hr/> Purpose of Disbursement Contribution Candidate Name Mary Bono <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 45 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-6682-21614-e Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 9 / 2 0 0 9
	Amount of Each Disbursement this Period 5000.00
	Category/Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Nunnelee For Congress	Transaction ID: SB23-11434-21630-e Date of Disbursement
	Mailing Address PO Box 7092	<input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/>
	City State Zip Code Tupelo MS 38802-7092	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution Candidate Name Patrick Alan Nunnelee	<input type="text" value="5000.00"/>
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) People For Pearce	Transaction ID: SB23-11445-21643-e Date of Disbursement
	Mailing Address PO Box 2696	<input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/>
	City State Zip Code Hobbs NM 88241-2696	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution Candidate Name Stevan E Pearce	<input type="text" value="5000.00"/>
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 02	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Robert Hurt For Congress	Transaction ID: SB23-11440-21640-e Date of Disbursement
	Mailing Address PO Box 2	<input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/>
	City State Zip Code Chatham VA 24531-0002	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution Candidate Name Robert Hurt	<input type="text" value="5000.00"/>
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 05	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial) Steve Chabot for Congress <hr/> Mailing Address 3014 Harrison Avenue <hr/> City Cincinnati State OH Zip Code 45211-5702 <hr/> Purpose of Disbursement Contribution Candidate Name Steve Chabot Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 01 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-9883-21627-e Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 9 / 2 0 0 9
	Amount of Each Disbursement this Period 5000.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Steve Fincher For Congress <hr/> Mailing Address PO Box 11153 <hr/> City Jackson State TN Zip Code 38308-0119 <hr/> Purpose of Disbursement Contribution Candidate Name Steve Fincher Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 08 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-11432-21629-e Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 9 / 2 0 0 9
	Amount of Each Disbursement this Period 5000.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Stivers For Congress <hr/> Mailing Address 81 S 5th Street <hr/> City Columbus State OH Zip Code 43215-4323 <hr/> Purpose of Disbursement Contribution Candidate Name Steve Stivers Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 15 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-10197-21628-e Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 9 / 2 0 0 9
	Amount of Each Disbursement this Period 5000.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	15000.00
TOTAL This Period (last page this line number only) ▶	(Empty)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Tiberi for Congress	Transaction ID: SB23-7994-21621-e Date of Disbursement
	Mailing Address 2021 E Dublin Granville Road Suite 2000	<input type="text" value="12"/> <input type="text" value="09"/> / <input type="text" value="2009"/>
	City Columbus State OH Zip Code 43229-3572	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="5000.00"/>
	Candidate Name Patrick J Tiberi	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 12	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Tom Rooney For Congress	Transaction ID: SB23-11379-21618-e Date of Disbursement
	Mailing Address 2336 SE Ocean Boulevard # 313	<input type="text" value="12"/> <input type="text" value="09"/> / <input type="text" value="2009"/>
	City Stuart State FL Zip Code 34996-3319	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="5000.00"/>
	Candidate Name Tom Rooney	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 16	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Tom Rooney For Congress	Transaction ID: SB23-11379-21619-e Date of Disbursement
	Mailing Address 2336 SE Ocean Boulevard # 313	<input type="text" value="12"/> <input type="text" value="09"/> / <input type="text" value="2009"/>
	City Stuart State FL Zip Code 34996-3319	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="5000.00"/>
	Candidate Name Tom Rooney	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 16	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)
Vaughn Ward For Congress

Transaction ID: SB23-11436-21638-e
Date of Disbursement

Mailing Address 324 E Stonewater Court

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

City Eagle State ID Zip Code 83616-3872

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement
Contribution

011
Category/ Type

Candidate Name
Vaughn L Ward

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: ID District: 01

SUBTOTAL of Disbursements This Page (optional) ►

5000.00

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

11000.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 57 / 58

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)
AMERICAN GAMING ASSOCIATION POLITICAL ACTION COMMITTEE

Transaction ID: SB28c-9312-21644-e
Date of Disbursement

Mailing Address 1299 Pennsylvania Ave NW
Suite 1175

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

City Washington State DC Zip Code 20004

Amount of Each Disbursement this Period

2600.00

Purpose of Disbursement
Contribution refund

010
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

2600.00

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

2600.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 58 / 58

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)
First Baptist Church Food Pantry

Mailing Address 111 S 7th Street

City State Zip Code
Muskogee OK 74401-7518

Purpose of Disbursement
Charitable donation

Candidate Name

012
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29-11447-21646-e
Date of Disbursement

1 2 / 1 4 / 2 0 0 9

Amount of Each Disbursement this Period

200.00

SUBTOTAL of Disbursements This Page (optional) ▶

200.00

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

200.00