

# FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED  
FEC MAIL CENTER

2007 MAR -6 AM 11:54

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

LIBERTY COMMITTEE, THE

ADDRESS (number and street)

4337 WEST ANDERSON ROAD

☐ Check if different  
than previously  
reported. (ACC)

SOUTH EUCLID

OH 44181-3574

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C 00324871

3. IS THIS  
REPORT



NEW  
(N)

OR



AMENDED  
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15  
Quarterly Report (Q1)
- ☐ July 15  
Quarterly Report (Q2)
- ☐ October 15  
Quarterly Report (Q3)
- ☐ January 31  
Year-End Report (YE)
- ☒ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)
- ☐ Termination Report  
(TER)

(b) Monthly  
Report  
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)  
(Non-Election  
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)  
(Non-Election  
Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

\_\_\_\_ / \_\_\_\_ / \_\_\_\_

in the  
State of

\_\_\_\_

(d) 30-Day  
POST-Election  
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

\_\_\_\_ / \_\_\_\_ / \_\_\_\_

in the  
State of

\_\_\_\_

5. Covering Period

01' 01' 2007

through

06' 30' 2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

MARILYN L. WEHLING

Signature of Treasurer

Marilyn L. Wehling

Date

07' 30' 2007

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

Office  
Use  
Only

FEC FORM 3X  
Rev. 12/2004

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

LIBERTY COMMITTEE, THE C00324871

Report Covering the Period:

From:

01 01 2007

To:

08 30 2007

**COLUMN A  
This Period**

**COLUMN B  
Calendar Year-to-Date**

6. (a) Cash on Hand  
January 1,

2007

2179.66

- (b) Cash on Hand at  
Beginning of Reporting Period.....

2179.66

- (c) Total Receipts (from Line 19) .....

972.00

972.00

- (d) Subtotal (add Lines 6(b) and  
6(c) for Column A and Lines  
6(a) and 6(c) for Column B) .....

3151.66

3151.66

7. Total Disbursements (from Line 31) .....

1207.66

1207.66

8. Cash on Hand at Close of  
Reporting Period  
(subtract Line 7 from Line 6(d)) .....

1944.00

1944.00

9. Debts and Obligations Owed TO  
the Committee (Itemize all on  
Schedule C and/or Schedule D) .....

0

10. Debts and Obligations Owed BY  
the Committee (Itemize all on  
Schedule C and/or Schedule D) .....

0



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

**For further information contact:**

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

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

# DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**LIBERTY COMMITTEE, THE C00324871**

Report Covering the Period:

From:

**01 ' 01 ' 2007**

To:

**06 ' 30 ' 2007**

## 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).....

**562.00**

**562.00**

(ii) Unitemized.....

**410.00**

**410.00**

(iii) TOTAL (add  
Lines 11(a)(i) and (ii).....▶

**972.00**

**972.00**

(b) Political Party Committees.....

(c) Other Political Committees  
(such as PACs).....

(d) Total Contributions (add Lines  
11(a)(iii), (b), and (c)) (Carry  
Totals to Line 33, page 5).....▶

**972.00**

**972.00**

**12. Transfers From Affiliated/Other  
Party Committees.....**

**13. All Loans Received.....**

**14. Loan Repayments Received.....**

**15. Offsets To Operating Expenditures  
(Refunds, Rebates, etc.)  
(Carry Totals to Line 37, page 5).....**

**16. Refunds of Contributions Made  
to Federal Candidates and Other  
Political Committees.....**

**17. Other Federal Receipts  
(Dividends, Interest, etc.).....**

**18. Transfers from Non-Federal and Levin Funds**

(a) Non-Federal Account  
(from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

**19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c)).....▶**

**972.00**

**972.00**

**20. Total Federal Receipts  
(subtract Line 18(c) from Line 19).....▶**

**972.00**

**972.00**

# DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

**II. Disbursements**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**
**21. Operating Expenditures:**

(a) Allocated Federal/Non-Federal Activity (from Schedule H4)

(i) Federal Share .....

(ii) Non-Federal Share .....

(b) Other Federal Operating Expenditures .....

(c) Total Operating Expenditures

(add 21(a)(i), (a)(ii), and (b)) .....

**22. Transfers to Affiliated/Other Party**

Committees .....

**23. Contributions to Federal Candidates/Committees and Other Political Committees .....****24. Independent Expenditures**

(use Schedule E) .....

**25. Coordinated Party Expenditures**

(2 U.S.C. §441a(d))

(use Schedule F) .....

**26. Loan Repayments Made .....****27. Loans Made .....****28. Refunds of Contributions To:**

(a) Individuals/Persons Other Than Political Committees .....

(b) Political Party Committees .....

(c) Other Political Committees (such as PACs) .....

(d) Total Contribution Refunds

(add Lines 28(a), (b), and (c)) .....

**29. Other Disbursements .....****30. Federal Election Activity (2 U.S.C. §431(20))**

(a) Allocated Federal Election Activity (from Schedule H6)

(i) Federal Share .....

(ii) "Levin" Share .....

(b) Federal Election Activity Paid Entirely With Federal Funds .....

(c) Total Federal Election Activity (add ... Lines 30(a)(i), 30(a)(ii) and 30(b)) .....

**31. Total Disbursements (add Lines 21(c), 22,****23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..****32. Total Federal Disbursements**

(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) .....

DETAILED SUMMARY PAGE  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	97200	97200
34. Total Contribution Refunds (from Line 28(d)) .....	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	97200	97200
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	120766	120766
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	120766	120766

27039501605

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

**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:		PAGE / OF 2	
(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)

**LIBERTY COMMITTEE, THE C00324871**

Full Name (Last, First, Middle Initial)

A. **TAYLOR, CHRISTINE**

Mailing Address

**4864 MYRTLE AVE NW**

City

State

Zip Code

**CHAMPION TOWNSHIP OH 44483**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

**HOMEMAKER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**562.00**

Date of Receipt

**02 09 2007**

Amount of Each Receipt this Period

**110.00**

Full Name (Last, First, Middle Initial)

B. **TAYLOR, CHRISTINE**

Mailing Address

**4864 MYRTLE AVE NW**

City

State

Zip Code

**CHAMPION TOWNSHIP OH 44483**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

**HOMEMAKER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**562.00**

Date of Receipt

**03 08 2007**

Amount of Each Receipt this Period

**115.00**

Full Name (Last, First, Middle Initial)

C. **TAYLOR, CHRISTINE**

Mailing Address

**4864 MYRTLE AVE NW**

City

State

Zip Code

**CHAMPION TOWNSHIP OH 44483**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

**HOMEMAKER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**562.00**

Date of Receipt

**04 23 2007**

Amount of Each Receipt this Period

**111.00**

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

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

**336.00**

**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 2 OF 2

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

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NAME OF COMMITTEE (In Full)

**LIBERTY COMMITTEE, THE C00324871**

Full Name (Last, First, Middle Initial)

A. **TAYLOR, CHRISTINE**

Mailing Address

**4864 MYRTLE AVE NW**

City

**CHAMPION TOWNSHIP OH 44483**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

**HOMEMAKER**

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

**562.00**

Date of Receipt

**05 01 2007**

Amount of Each Receipt this Period

**115.00**

Full Name (Last, First, Middle Initial)

B. **TAYLOR, CHRISTINE**

Mailing Address

**4864 MYRTLE AVE NW**

City

**CHAMPION TOWNSHIP OH 44483**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

**HOMEMAKER**

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

**562.00**

Date of Receipt

**06 30 2007**

Amount of Each Receipt this Period

**111.00**

Full Name (Last, First, Middle Initial)

C. **TAYLOR, CHRISTINE**

Mailing Address

**4864 MYRTLE AVE NW**

City

**CHAMPION TOWNSHIP OH 44483**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

**HOMEMAKER**

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

**X**

Amount of Each Receipt this Period

**X**

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

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

**226.00**

**562.00**

27039501607

**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)

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

PAGE 1 OF 9

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NAME OF COMMITTEE (In Full)

**LIBERTY COMMITTEE, THE** **000324871**

Full Name (Last, First, Middle Initial)

A. **INNOVATIVE MERCHANT SOLUTIONS**

Date of Disbursement

Mailing Address

**26541 AGOURA RD #200**

**01 03 2007**

City

**CALABASAS CA 91302**

Purpose of Disbursement

**CREDIT CARD PROCESSING**

**001**

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

**3795**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. **INNOVATIVE MERCHANT SOLUTIONS**

Date of Disbursement

Mailing Address

**26541 AGOURA RD #200**

**02 05 2007**

City

**CALABASAS CA 91302**

Purpose of Disbursement

**CREDIT CARD PROCESSING**

**001**

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

**3795**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. **INNOVATIVE MERCHANT SOLUTIONS**

Date of Disbursement

Mailing Address

**26541 AGOURA RD #200**

**03 05 2007**

City

**CALABASAS CA 91302**

Purpose of Disbursement

**CREDIT CARD PROCESSING**

**001**

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

**3795**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

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

**11385**



**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)

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

PAGE 2 OF 9

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NAME OF COMMITTEE (In Full)

LIBERTY COMMITTEE, THE CD0324871

Full Name (Last, First, Middle Initial)

A. INNOVATIVE MERCHANT SOLUTIONS

Date of Disbursement

Mailing Address

26541 AGOURA RD #200

04 03 2007

City

State

Zip Code

CALABASAS CA 91302

Purpose of Disbursement

CREDIT CARD PROCESSING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

3795

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. INNOVATIVE MERCHANT SOLUTIONS

Date of Disbursement

Mailing Address

26541 AGOURA RD #200

05 03 2007

City

State

Zip Code

CALABASAS CA 91302

Purpose of Disbursement

CREDIT CARD PROCESSING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

3793

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. INNOVATIVE MERCHANT SOLUTIONS

Date of Disbursement

Mailing Address

26541 AGOURA RD #200

06 04 2007

City

State

Zip Code

CALABASAS CA 91302

Purpose of Disbursement

CREDIT CARD PROCESSING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

3778

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

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

11366

1

**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 **3** OF **9**

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**LIBERTY COMMITTEE, THE** **000324871**

Full Name (Last, First, Middle Initial)

A. **BANK OF AMERICA**

Date of Disbursement

**06** **17** **2007**

Mailing Address

**PO BOX 60073**

City

**CITY OF INDUSTRY CA**

State

Zip Code

**91716**

Purpose of Disbursement

**CREDIT CARD PAYMENT**

Amount of Each Disbursement this Period

**257.50**

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. **SHELL OIL**

Date of Disbursement

**05** **18** **2007**

Mailing Address

**57424554905**

City

**HURON**

State

Zip Code

**OH 44839**

Purpose of Disbursement

**GASOLINE**

Amount of Each Disbursement this Period

**002** **(25.03)**

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. **GODADDY.COM**

Date of Disbursement

**05** **16** **2007**

Mailing Address

**14455 HAYDEN #219**

City

**SCOTTSDALE**

State

Zip Code

**AZ 85260**

Purpose of Disbursement

**DOMAIN NAME RENEWAL**

Amount of Each Disbursement this Period

**001** **(49.76)**

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

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

**257.50**

**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 4 OF 9

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
27 28a 28b 28c 29 30b

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NAME OF COMMITTEE (In Full)

LIBERTY COMMITTEE, THE C00324871

Full Name (Last, First, Middle Initial)

Date of Disbursement

A.

INTUIT SUPPLIES

05 04 2007

Mailing Address

PO BOX 34328

City

SEATTLE

State

WA

Zip Code

98124

Purpose of Disbursement

QUICKBOOKS SOFTWARE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

(182.71)

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

MEMO  
(BANK OF AM DISE)

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Amount of Each Disbursement this Period

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

MEMO OF AM DISE

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Amount of Each Disbursement this Period

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

MEMO  
(BANK OF AM DISE)

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

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

MEMO 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 **5** OF **9**

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**LIBERTY COMMITTEE, THE** **000324871**

Full Name (Last, First, Middle Initial)

A. **BANK OF AMERICA**

Date of Disbursement

**04** **13** **2007**

Mailing Address

**PO BOX 60073**

City

State

Zip Code

**CITY OF INDUSTRY CA 91716**

Purpose of Disbursement

**CREDIT CARD PAYMENT**

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

**256.6**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. **SHELL OIL**

Date of Disbursement

**04** **12** **2007**

Mailing Address

**57424534905**

City

State

Zip Code

**HURON OH 44839**

Purpose of Disbursement

**GASOLINE**

Candidate Name

**002**  
Category/  
Type

Amount of Each Disbursement this Period

**(25.66)**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

**MEMO**  
**(BANK OF AM. DISB)**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

**MEMO**  
**(BANK OF AM. DISB)**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

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

**256.6**

**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 **6** OF **9**

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**LIBERTY COMMITTEE, THE @00324871**

Full Name (Last, First, Middle Initial)

Date of Disbursement

A. **BANK OF AMERICA**

**02' 20' 2007**

Mailing Address

**PO BOX 60073**

City

State

Zip Code

**CITY OF INDUSTRY CA 91716**

Purpose of Disbursement

**CREDIT CARD PAYMENT**

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

**3823**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

B. **BANK OF AMERICA**

**02' 14' 2007**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

**FINANCE FEE**

**001**

Category/  
Type

Amount of Each Disbursement this Period

**(10.00)**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

C. **WOODWARD DELI 1/2**

**02' 14' 2007**

Mailing Address

City

State

Zip Code

**STRONGSVILLE OH 44149**

Purpose of Disbursement

**INEAL**

**002**

Category/  
Type

Amount of Each Disbursement this Period

**(21.95)**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

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

**3823**

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

Use separate schedule(s)  
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 Detailed Summary Page

FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

**LIBERTY COMMITTEE, THE CO 0324871**

Full Name (Last, First, Middle Initial)

Date of Disbursement

A. **MEIJER INC #142**

**02 / 12 / 2007**

Mailing Address

**4702 MILAN RD**

City **SANDUSKY** State **OH** Zip Code **44870**

Purpose of Disbursement

**GASOLINE**

Amount of Each Disbursement this Period

Candidate Name

**002**

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**MEMO (BANK OF AM DISB)**

Full Name (Last, First, Middle Initial)

Date of Disbursement

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Amount of Each Disbursement this Period

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Amount of Each Disbursement this Period

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

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

**MEMO 0**

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

Use separate schedule(s)  
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Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

**LIBERTY COMMITTEE, THE 00324871**

Full Name (Last, First, Middle Initial)

A. **BANK OF AMERICA**

Date of Disbursement

**01/24/2007**

Mailing Address

**PO BOX 60073**

City

State

Zip Code

**CITY OF INDUSTRY CA 91716**

Purpose of Disbursement

**CREDIT CARD PAYMENT**

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

**5626**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. **BANK OF AMERICA**

Date of Disbursement

**12/27/2006**

Mailing Address

**PO BOX 60073**

City

State

Zip Code

**CITY OF INDUSTRY CA 91716**

Purpose of Disbursement

**FINANCE CHARGE**

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

**(5626)**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

**MEMO**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**(BANK OF AM. DISB)**

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

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

**5626**

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

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

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(check only one)

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NAME OF COMMITTEE (In Full)

**LIBERTY COMMITTEE, THE C00324871**

Full Name (Last, First, Middle Initial)

A. **MATTSON, MARK CPA**

Mailing Address

**PO BOX 40562**

City

**BAY VILLAGE OH 44140**

Purpose of Disbursement

**ACCOUNTING**

Candidate Name

**001**

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

**01/05/2007**

Amount of Each Disbursement this Period

**300.00**

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

Amount of Each Disbursement this Period

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

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**300.00**

**905.16**



Federal Election Commission  
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