

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

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

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

ADDRESS (number and street)

PO BOX 1131

☐Check if different
than previously
reported. (ACC)

ANDERSON

IN

46015

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00383927

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

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

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

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

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

07

01

2007

through

12

31

2007

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

Type or Print Name of Treasurer

Steve Ford

Signature of Treasurer

Electronically Filed by Steve Ford

Date

01

31

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

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

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

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2007		1203.91
(b) Cash on Hand at Beginning of Reporting Period	2849.42	
(c) Total Receipts (from Line 19)	66212.27	101789.86
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	69061.69	102993.77
7. Total Disbursements (from Line 31)	66824.41	100756.49
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	2237.28	2237.28
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

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

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

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	64802.24	80052.24
(i) Itemized (use Schedule A)		
(ii) Unitemized	300.00	1400.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➤	65102.24	81452.24
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	1000.00	19500.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➤	66102.24	100952.24
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	92.68	815.44
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	17.35	22.18
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))	66212.27	101789.86
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	66212.27	101789.86

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	20324.41	42256.49
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	20324.41	42256.49
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	46500.00	57500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	1000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	66824.41	100756.49
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	66824.41	100756.49

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)	66102.24	100952.24
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	66102.24	100952.24
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	20324.41	42256.49
37. Offsets to Operating Expenditures (from Line 15, page 3)	92.68	815.44
38. Net Operating Expenditures (subtract Line 37 from Line 36)	20231.73	41441.05

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

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

FOR LINE NUMBER: PAGE 6 / 47

(check only one)

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

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NAME OF COMMITTEE (In Full)

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

G. William Armstrong

Mailing Address 10654 Sunset Point Ln.

City

Fishers

State

IN

Zip Code

46037

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Real Estate Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11AI.5733

Amount of Each Receipt this Period

1000.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Mark Bailey

Mailing Address 1820 Box Elder Ct.

City

Indianapolis

State

IN

Zip Code

46260

FEC ID number of contributing
federal political committee.

C

Name of Employer
Stark Doninger and Smith

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 9 / 2 0 0 7

Transaction ID: SA11AI.5729

Amount of Each Receipt this Period

2000.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Susan Bradbury

Mailing Address 26 Shoreline

City

Newport Coast

State

CA

Zip Code

92657

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation

Homemaker

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 / 0 6 / 2 0 0 7

Transaction ID: SA11AI.5769

Amount of Each Receipt this Period

5000.00

Contribution

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)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 / 47

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

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NAME OF COMMITTEE (In Full)

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

E. Mark Deister

Mailing Address 13110 Aboite Center Rd.

City

Fort Wayne

State

IN

Zip Code

46814

FEC ID number of contributing
federal political committee.

C

Name of Employer
Deister Machine Inc.

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.5748

Amount of Each Receipt this Period

2000.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Alice Eshelman

Mailing Address 6755 E. 900 S.

City

Columbia City

State

IN

Zip Code

46725

FEC ID number of contributing
federal political committee.

C

Name of Employer
Joseph Decuis

Occupation
Restaurateur

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.5757

Amount of Each Receipt this Period

5000.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Peter Eshelman

Mailing Address 6755 E. 900 S.

City

Columbia City

State

IN

Zip Code

46725

FEC ID number of contributing
federal political committee.

C

Name of Employer
American Specialty

Occupation
Insurance Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3434.50

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.5758

Amount of Each Receipt this Period

3434.50

Contribution

SUBTOTAL of Receipts This Page (optional)

10434.50

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 8 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Peter Eshelman

Mailing Address 6755 E. 900 S.

City

Columbia City

State

IN

Zip Code

46725

FEC ID number of contributing
federal political committee.

C

Name of Employer
American Specialty

Occupation

Insurance Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.5905

Amount of Each Receipt this Period

1565.50

In-kind - Catering

B.

Full Name (Last, First, Middle Initial)

Janice Ball Fisher

Mailing Address P.O. Box 1408

City

Muncie

State

IN

Zip Code

47308

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.5767

Amount of Each Receipt this Period

500.00

Contribution

C.

Full Name (Last, First, Middle Initial)

John Fisher

Mailing Address P.O. Box 1408

City

Muncie

State

IN

Zip Code

47308

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.5768

Amount of Each Receipt this Period

500.00

Contribution

SUBTOTAL of Receipts This Page (optional)

2565.50

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 9 / 47

(check only one)

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

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NAME OF COMMITTEE (In Full)

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Richard Freeland

Mailing Address 7100 W. Jefferson Blvd.

City

Fort Wayne

State

IN

Zip Code

46804

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pizza Hut

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.5752

Amount of Each Receipt this Period

1000.00

Contributor

B.

Full Name (Last, First, Middle Initial)

Richard Freeland

Mailing Address 7100 W. Jefferson Blvd.

City

Fort Wayne

State

IN

Zip Code

46804

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pizza Hut

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

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

Transaction ID: SA11AI.5735

Amount of Each Receipt this Period

2000.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Robert Grand

Mailing Address 11 South Meridian St.

City

Indianapolis

State

IN

Zip Code

46204-3535

FEC ID number of contributing
federal political committee.

C

Name of Employer
Barnes & Thornburg

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.24

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 3 / 2 0 0 7

Transaction ID: SA11AI.5902

Amount of Each Receipt this Period

302.24

In-kind - Catering and Facility fees

SUBTOTAL of Receipts This Page (optional)

3302.24

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 10 / 47

(check only one)

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

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NAME OF COMMITTEE (In Full)

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

C. Perry Griffith, Jr.

Mailing Address 663 Forest Blvd.

City

Indianapolis

State

IN

Zip Code

46240

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dennison Parking LLC

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 0 7

Transaction ID: SA11AI.5759

Amount of Each Receipt this Period

1000.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Hart Hasten

Mailing Address 901 Roundtable Ct.

City

Indianapolis

State

IN

Zip Code

46260

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hasten Bancshares

Occupation
Chairman

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 / 1 0 / 2 0 0 7

Transaction ID: SA11AI.5775

Amount of Each Receipt this Period

5000.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Thomas Irmischer

Mailing Address 10401 Mohawk Court

City

Fort Wayne

State

IN

Zip Code

46804

FEC ID number of contributing
federal political committee.

C

Name of Employer
Irmischer, Inc.

Occupation
Contractor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.5751

Amount of Each Receipt this Period

1000.00

Contribution

SUBTOTAL of Receipts This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 11 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Naomi Jewett

Mailing Address 10932 Shiregreen Lane

City

Ft. Wayne

State

IN

Zip Code

46814

FEC ID number of contributing
federal political committee.

C

Name of Employer
Auto Collision Service

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.5749

Amount of Each Receipt this Period

1000.00

Contribution

B.

Full Name (Last, First, Middle Initial)

David Kirr

Mailing Address 3665 Woodside Dr.

City

Columbus

State

IN

Zip Code

47203

FEC ID number of contributing
federal political committee.

C

Name of Employer
KM & Co.

Occupation
Investment Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

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

Transaction ID: SA11AI.5764

Amount of Each Receipt this Period

3000.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Jane Lamm

Mailing Address 830 Mill Lake Rd.

City

Fort Wayne

State

IN

Zip Code

46845

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation
Homemaker

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 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.5727

Amount of Each Receipt this Period

1000.00

Contribution

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 47

(check only one)

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

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NAME OF COMMITTEE (In Full)

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Stephen Lowry

Mailing Address P.O. Box 36

City

Yorktown

State

IN

Zip Code

47396

FEC ID number of contributing
federal political committee.

C

Name of Employer
Wise Inc.

Occupation

Real Estate Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11AI.5777

Amount of Each Receipt this Period

500.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Ted Lucas

Mailing Address 1125 Constitution Dr.

City

Edinburgh

State

IN

Zip Code

46124

FEC ID number of contributing
federal political committee.

C

Name of Employer
Milestone

Occupation

Contractor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 0 / 2 0 0 7

Transaction ID: SA11AI.5741

Amount of Each Receipt this Period

1000.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Brian Martin

Mailing Address 25621 Dillon Rd.

City

Laguna Hills

State

CA

Zip Code

92653

FEC ID number of contributing
federal political committee.

C

Name of Employer
RSD

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11AI.5783

Amount of Each Receipt this Period

5000.00

Contribution

SUBTOTAL of Receipts This Page (optional)

6500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 13 / 47

(check only one)

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

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NAME OF COMMITTEE (In Full)

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Kathlyn Martin

Mailing Address 25621 Dillon Rd.

City

Laguna Hills

State

CA

Zip Code

92653

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation

Homemaker

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11AI.5785

Amount of Each Receipt this Period

5000.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Laurel Martin

Mailing Address 1690 Cielito Drive

City

Glendale

State

CA

Zip Code

91207

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

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 1 / 2 7 / 2 0 0 7

Transaction ID: SA11AI.5765

Amount of Each Receipt this Period

5000.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Donald McArdle

Mailing Address 3530 Rosewood Drive

City

Fort Wayne

State

IN

Zip Code

46804

FEC ID number of contributing
federal political committee.

C

Name of Employer
McArdle Realty & Consulting

Occupation

Consultant

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.5753

Amount of Each Receipt this Period

1000.00

Contribution

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: PAGE 14 / 47

(check only one)

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

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NAME OF COMMITTEE (In Full)

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Donald McArdle

Mailing Address 3530 Rosewood Drive

City

Fort Wayne

State

IN

Zip Code

46804

FEC ID number of contributing
federal political committee.

C

Name of Employer
McArdle Realty & Consulting

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.5754

Amount of Each Receipt this Period

1000.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Anne Ogle

Mailing Address 3557 Walnut Grove Ct.

City

Columbus

State

IN

Zip Code

47203

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cummins Inc.

Occupation
Engineer

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 / 1 0 / 2 0 0 7

Transaction ID: SA11AI.5780

Amount of Each Receipt this Period

1000.00

Contribution

C.

Full Name (Last, First, Middle Initial)

John Popp

Mailing Address 12316 Aboite Center Rd.

City

Fort Wayne

State

IN

Zip Code

46814

FEC ID number of contributing
federal political committee.

C

Name of Employer
Perfection Bakery Inc.

Occupation
Bakery Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.5747

Amount of Each Receipt this Period

2000.00

Contribution

SUBTOTAL of Receipts This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 15 / 47

(check only one)

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

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NAME OF COMMITTEE (In Full)

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Rolene Popp

Mailing Address 12316 Aboite Center Rd.

City

Fort Wayne

State

IN

Zip Code

46814

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.5746

Amount of Each Receipt this Period

2000.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Edward Probst

Mailing Address 1920 Franklin St.

City

Columbus

State

IN

Zip Code

47201

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

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 / 1 0 / 2 0 0 7

Transaction ID: SA11AI.5787

Amount of Each Receipt this Period

500.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Jeanette Quilhot

Mailing Address 9464 S. 700 East 92

City

Roanoke

State

IN

Zip Code

46783

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 9 / 2 0 0 7

Transaction ID: SA11AI.5744

Amount of Each Receipt this Period

2000.00

Contribution

SUBTOTAL of Receipts This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 16 / 47

(check only one)

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

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NAME OF COMMITTEE (In Full)

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Sidney Retsky

Mailing Address 145 Lakewood Pl.

City

Highland Park

State

IL

Zip Code

60035-5009

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 7

Transaction ID: SA11AI.5762

Amount of Each Receipt this Period

500.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Timothy Riffle

Mailing Address 2203 Deerwood Pkwy.

City

Greenwood

State

IN

Zip Code

46143

FEC ID number of contributing
federal political committee.

C

Name of Employer
Barnes & Thornburg

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.5779

Amount of Each Receipt this Period

250.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Timothy Riffle

Mailing Address 2203 Deerwood Pkwy.

City

Greenwood

State

IN

Zip Code

46143

FEC ID number of contributing
federal political committee.

C

Name of Employer
Barnes & Thornburg

Occupation
Attorney

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 / 1 2 / 2 0 0 7

Transaction ID: SA11AI.5737

Amount of Each Receipt this Period

750.00

Contribution

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 17 / 47

(check only one)

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

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NAME OF COMMITTEE (In Full)

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Harold Smith

Mailing Address 322 Coventry Dr.

City

Anderson

State

IN

Zip Code

46012

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11AI.5739

Amount of Each Receipt this Period

500.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Dianne Witwer

Mailing Address 300 S. State Rd. 201

City

Bluffton

State

IN

Zip Code

46714

FEC ID number of contributing
federal political committee.

C

Name of Employer
News Banner Publ.

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 7

Transaction ID: SA11AI.5745

Amount of Each Receipt this Period

500.00

Contribution

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

64802.24

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

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

FOR LINE NUMBER: PAGE 18 / 47

(check only one)

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

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NAME OF COMMITTEE (In Full)

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

ONEAMERICA FINANCIAL PARTNERS INC. PAC

Mailing Address One American Square
P.O. Box 368

City State Zip Code
Indianapolis IN 46206

FEC ID number of contributing
federal political committee.

C C00143164

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11C.5771

Amount of Each Receipt this Period

1000.00

Contribution

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

1000.00

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

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

FOR LINE NUMBER: PAGE 19 / 47

(check only one)

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

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NAME OF COMMITTEE (In Full)

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Advantage Payroll

Mailing Address 2905 E. 46th St

City

Indianapolis

State

IN

Zip Code

46205

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

815.44

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 6 / 2 0 0 7

Transaction ID: SA15.5791

Amount of Each Receipt this Period

92.68

001 payroll fee reimburse-
ment

SUBTOTAL of Receipts This Page (optional)

92.68

TOTAL This Period (last page this line number only)

92.68

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)

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

A.B. LLC

Mailing Address 21 West Eighth Street

City Anderson State IN Zip Code 46016

Purpose of Disbursement
office rent

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.5808

Date of Disbursement

07 / 17 / 2007

Amount of Each Disbursement this Period

200.00

B.

Full Name (Last, First, Middle Initial)

A.B. LLC

Mailing Address 21 West Eighth Street

City Anderson State IN Zip Code 46016

Purpose of Disbursement
Office Rent

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.5813

Date of Disbursement

09 / 05 / 2007

Amount of Each Disbursement this Period

200.00

C.

Full Name (Last, First, Middle Initial)

A.B. LLC

Mailing Address 21 West Eighth Street

City Anderson State IN Zip Code 46016

Purpose of Disbursement
Office Rent

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.5827

Date of Disbursement

10 / 03 / 2007

Amount of Each Disbursement this Period

600.00

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 21 / 47

<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)

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) ADP Payroll Services	Transaction ID: SB21B.5822 Date of Disbursement																				
Mailing Address 7030 Point Inverness Way	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	8		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	8		2	0	0	7												
City Ft. Wayne State IN Zip Code 46804	Amount of Each Disbursement this Period																				
Purpose of Disbursement payroll taxes Candidate Name	<table border="1"> <tr> <td colspan="10">1452.00</td> </tr> </table>	1452.00																			
1452.00																					
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) ADP Payroll Services	Transaction ID: SB21B.5830 Date of Disbursement																				
Mailing Address 7030 Point Inverness Way	<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>0</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	8		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	8		2	0	0	7												
City Ft. Wayne State IN Zip Code 46804	Amount of Each Disbursement this Period																				
Purpose of Disbursement payroll taxes Candidate Name	<table border="1"> <tr> <td colspan="10">552.02</td> </tr> </table>	552.02																			
552.02																					
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) ADP Payroll Services	Transaction ID: SB21B.5838 Date of Disbursement																				
Mailing Address 7030 Point Inverness Way	<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>1</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	7		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	7		2	0	0	7												
City Ft. Wayne State IN Zip Code 46804	Amount of Each Disbursement this Period																				
Purpose of Disbursement payroll taxes Candidate Name	<table border="1"> <tr> <td colspan="10">216.76</td> </tr> </table>	216.76																			
216.76																					
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)

2220.78

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)

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) ADP Payroll Services	Transaction ID: SB21B.5843 Date of Disbursement																				
Mailing Address 7030 Point Inverness Way	<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>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	3		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	3		2	0	0	7												
City State Zip Code Ft. Wayne IN 46804	Amount of Each Disbursement this Period																				
Purpose of Disbursement Payroll taxes Candidate Name	<table border="1"> <tr> <td colspan="10">556.49</td> </tr> </table>	556.49																			
556.49																					
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) ADP Payroll Services	Transaction ID: SB21B.5846 Date of Disbursement																				
Mailing Address 7030 Point Inverness Way	<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>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	1		2	0	0	7												
City State Zip Code Ft. Wayne IN 46804	Amount of Each Disbursement this Period																				
Purpose of Disbursement Payroll taxes Candidate Name	<table border="1"> <tr> <td colspan="10">541.56</td> </tr> </table>	541.56																			
541.56																					
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) ADP Payroll Services	Transaction ID: SB21B.5899 Date of Disbursement																				
Mailing Address 7030 Point Inverness Way	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	8		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	8		2	0	0	7												
City State Zip Code Ft. Wayne IN 46804	Amount of Each Disbursement this Period																				
Purpose of Disbursement Payroll Service Candidate Name	<table border="1"> <tr> <td colspan="10">53.45</td> </tr> </table>	53.45																			
53.45																					
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)

1151.50

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 23 / 47

<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)

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Advantage Payroll</p> <p>Mailing Address 2905 E. 46th St</p> <p>City Indianapolis State IN Zip Code 46205</p> <p>Purpose of Disbursement Payroll taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.5799</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="0.01"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Advantage Payroll</p> <p>Mailing Address 2905 E. 46th St</p> <p>City Indianapolis State IN Zip Code 46205</p> <p>Purpose of Disbursement payroll taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.5805</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="532.38"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Advantage Payroll</p> <p>Mailing Address 2905 E. 46th St</p> <p>City Indianapolis State IN Zip Code 46205</p> <p>Purpose of Disbursement payroll taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.5807</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="92.68"/></p>

SUBTOTAL of Disbursements This Page (optional)

625.07

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)

PAGE 24 / 47

<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)

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Advantage Payroll	Transaction ID: SB21B.5810 Date of Disbursement																				
Mailing Address 2905 E. 46th St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		3	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		3	1		2	0	0	7												
City Indianapolis State IN Zip Code 46205	Amount of Each Disbursement this Period																				
Purpose of Disbursement payroll taxes Candidate Name	<table border="1"> <tr> <td colspan="10">81.31</td> </tr> </table>	81.31																			
81.31																					
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) Ron Arnold	Transaction ID: SB21B.5800 Date of Disbursement																				
Mailing Address 3709 Tulip St.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	3		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	3		2	0	0	7												
City Anderson State IN Zip Code 46011	Amount of Each Disbursement this Period																				
Purpose of Disbursement payroll Candidate Name	<table border="1"> <tr> <td colspan="10">800.00</td> </tr> </table>	800.00																			
800.00																					
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) Ron Arnold	Transaction ID: SB21B.5811 Date of Disbursement																				
Mailing Address 3709 Tulip St.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	7		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	7		2	0	0	7												
City Anderson State IN Zip Code 46011	Amount of Each Disbursement this Period																				
Purpose of Disbursement Travel reimbursement Candidate Name	<table border="1"> <tr> <td colspan="10">134.78</td> </tr> </table>	134.78																			
134.78																					
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)

1016.09

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)

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Ron Arnold

Mailing Address 3709 Tulip St.

City
Anderson

State
IN

Zip Code
46011

Purpose of Disbursement
Payroll

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.5818

Date of Disbursement

09 / 14 / 2007

Amount of Each Disbursement this Period

800.00

B.

Full Name (Last, First, Middle Initial)

Ron Arnold

Mailing Address 3709 Tulip St.

City
Anderson

State
IN

Zip Code
46011

Purpose of Disbursement
payroll

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.5819

Date of Disbursement

09 / 21 / 2007

Amount of Each Disbursement this Period

800.00

C.

Full Name (Last, First, Middle Initial)

Ron Arnold

Mailing Address 3709 Tulip St.

City
Anderson

State
IN

Zip Code
46011

Purpose of Disbursement
Payroll

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.5826

Date of Disbursement

10 / 01 / 2007

Amount of Each Disbursement this Period

800.00

SUBTOTAL of Disbursements This Page (optional) ▶

2400.00

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)

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Ron Arnold

Mailing Address 3709 Tulip St.

City
Anderson

State
IN

Zip Code
46011

Purpose of Disbursement
Payroll

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.5837

Date of Disbursement

11 / 07 / 2007

Amount of Each Disbursement this Period

1308.29

B.

Full Name (Last, First, Middle Initial)

Ron Arnold

Mailing Address 3709 Tulip St.

City
Anderson

State
IN

Zip Code
46011

Purpose of Disbursement
payroll

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.5842

Date of Disbursement

12 / 03 / 2007

Amount of Each Disbursement this Period

800.00

C.

Full Name (Last, First, Middle Initial)

Ron Arnold

Mailing Address 3709 Tulip St.

City
Anderson

State
IN

Zip Code
46011

Purpose of Disbursement
Travel reimbursement

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.5847

Date of Disbursement

12 / 12 / 2007

Amount of Each Disbursement this Period

49.26

SUBTOTAL of Disbursements This Page (optional)

2157.55

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 27 / 47

<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)

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

David Cantwell

Mailing Address 1526

City
Indianapolis

State
IN

Zip Code
46260

Purpose of Disbursement
telephone

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.5812

Date of Disbursement

08 / 07 / 2007

Amount of Each Disbursement this Period

74.95

B.

Full Name (Last, First, Middle Initial)

David Cantwell

Mailing Address 1526

City
Indianapolis

State
IN

Zip Code
46260

Purpose of Disbursement
Telephone

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.5833

Date of Disbursement

10 / 12 / 2007

Amount of Each Disbursement this Period

374.75

C.

Full Name (Last, First, Middle Initial)

Eighth Street Rentals

Mailing Address 2 West 8th St.

City
Anderson

State
IN

Zip Code
46016

Purpose of Disbursement
Parking rental

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.5828

Date of Disbursement

10 / 03 / 2007

Amount of Each Disbursement this Period

75.00

SUBTOTAL of Disbursements This Page (optional)

524.70

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 28 / 47

<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)

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Peter Eshelman

Transaction ID: SB21B.5906

Date of Disbursement

09 / 21 / 2007

Mailing Address 6755 E. 900 S.

City
Columbia City

State
IN

Zip Code
46725

Amount of Each Disbursement this Period

1565.50

Purpose of Disbursement

In-kind - Catering

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

B.

Full Name (Last, First, Middle Initial)

Robert Grand

Transaction ID: SB21B.5903

Date of Disbursement

12 / 13 / 2007

Mailing Address 11 South Meridian St.

City
Indianapolis

State
IN

Zip Code
46204-3535

Amount of Each Disbursement this Period

302.24

Purpose of Disbursement

In-kind - Catering and Facility fees

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

C.

Full Name (Last, First, Middle Initial)

Huckaby Davis Lisker & Associates

Transaction ID: SB21B.5829

Date of Disbursement

10 / 03 / 2007

Mailing Address 228 South Washington Street
Suite 115

City
Alexandria

State
VA

Zip Code
22314

Amount of Each Disbursement this Period

125.00

Purpose of Disbursement

FEC Consulting

Candidate Name

001
Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional)

1992.74

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 29 / 47

<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)

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Indiana Department of Workforce Development	Transaction ID: SB21B.5809 Date of Disbursement								
Mailing Address 200 N. Senate Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 7</div> </div>								
<table border="1"> <tr> <td>City Indianapolis</td> <td>State IN</td> <td>Zip Code 46206</td> </tr> <tr> <td colspan="2">Purpose of Disbursement payroll taxes</td> <td rowspan="2"> <div>001</div> Category/ Type </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Indianapolis	State IN	Zip Code 46206	Purpose of Disbursement payroll taxes		<div>001</div> Category/ Type	Candidate Name		Amount of Each Disbursement this Period <div>111.78</div>
City Indianapolis	State IN	Zip Code 46206							
Purpose of Disbursement payroll taxes		<div>001</div> Category/ Type							
Candidate Name									
<table border="1"> <tr> <td>Office Sought:</td> <td>Disbursement For:</td> </tr> <tr> <td> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </td> <td> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </td> </tr> <tr> <td>State: District:</td> <td></td> </tr> </table>	Office Sought:	Disbursement For:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:				
Office Sought:	Disbursement For:								
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼								
State: District:									
B. Full Name (Last, First, Middle Initial) Master Productions	Transaction ID: SB21B.5832 Date of Disbursement								
Mailing Address 9419 West Constellation Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 1 2 / 2 0 0 7</div> </div>								
<table border="1"> <tr> <td>City Pendleton</td> <td>State IN</td> <td>Zip Code 46064</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Computer Consulting</td> <td rowspan="2"> <div>001</div> Category/ Type </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Pendleton	State IN	Zip Code 46064	Purpose of Disbursement Computer Consulting		<div>001</div> Category/ Type	Candidate Name		Amount of Each Disbursement this Period <div>600.00</div>
City Pendleton	State IN	Zip Code 46064							
Purpose of Disbursement Computer Consulting		<div>001</div> Category/ Type							
Candidate Name									
<table border="1"> <tr> <td>Office Sought:</td> <td>Disbursement For:</td> </tr> <tr> <td> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </td> <td> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </td> </tr> <tr> <td>State: District:</td> <td></td> </tr> </table>	Office Sought:	Disbursement For:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:				
Office Sought:	Disbursement For:								
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼								
State: District:									
C. Full Name (Last, First, Middle Initial) Paust Printers	Transaction ID: SB21B.5844 Date of Disbursement								
Mailing Address 14 N. 10th St.	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 4 / 2 0 0 7</div> </div>								
<table border="1"> <tr> <td>City Richmond</td> <td>State IN</td> <td>Zip Code 47374</td> </tr> <tr> <td colspan="2">Purpose of Disbursement PAC envelopes & Letterhead</td> <td rowspan="2"> <div>003</div> Category/ Type </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Richmond	State IN	Zip Code 47374	Purpose of Disbursement PAC envelopes & Letterhead		<div>003</div> Category/ Type	Candidate Name		Amount of Each Disbursement this Period <div>678.40</div>
City Richmond	State IN	Zip Code 47374							
Purpose of Disbursement PAC envelopes & Letterhead		<div>003</div> Category/ Type							
Candidate Name									
<table border="1"> <tr> <td>Office Sought:</td> <td>Disbursement For:</td> </tr> <tr> <td> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </td> <td> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </td> </tr> <tr> <td>State: District:</td> <td></td> </tr> </table>	Office Sought:	Disbursement For:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:				
Office Sought:	Disbursement For:								
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼								
State: District:									

SUBTOTAL of Disbursements This Page (optional)

1390.18

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)

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Postmaster

Mailing Address 1505 Raible Ave.

City Anderson State IN Zip Code 46011

Purpose of Disbursement
postage

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.5815

Date of Disbursement

09 / 13 / 2007

Amount of Each Disbursement this Period

205.00

B.

Full Name (Last, First, Middle Initial)

Postmaster

Mailing Address 1505 Raible Ave.

City Anderson State IN Zip Code 46011

Purpose of Disbursement
postage

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.5835

Date of Disbursement

11 / 06 / 2007

Amount of Each Disbursement this Period

92.00

C.

Full Name (Last, First, Middle Initial)

Postmaster

Mailing Address 1505 Raible Ave.

City Anderson State IN Zip Code 46011

Purpose of Disbursement
postage

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.5845

Date of Disbursement

12 / 05 / 2007

Amount of Each Disbursement this Period

164.00

SUBTOTAL of Disbursements This Page (optional)

461.00

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)

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Alan Siktberg

Mailing Address 9235 Bluestone Circle

City
Indianapolis

State
IN

Zip Code
46236

Purpose of Disbursement
payroll

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.5803

Date of Disbursement

07 / 13 / 2007

Amount of Each Disbursement this Period

400.00

B.

Full Name (Last, First, Middle Initial)

Alan Siktberg

Mailing Address 9235 Bluestone Circle

City
Indianapolis

State
IN

Zip Code
46236

Purpose of Disbursement
Payroll

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.5817

Date of Disbursement

09 / 14 / 2007

Amount of Each Disbursement this Period

800.00

C.

Full Name (Last, First, Middle Initial)

Alan Siktberg

Mailing Address 9235 Bluestone Circle

City
Indianapolis

State
IN

Zip Code
46236

Purpose of Disbursement
payroll

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.5821

Date of Disbursement

09 / 21 / 2007

Amount of Each Disbursement this Period

400.00

SUBTOTAL of Disbursements This Page (optional)

1600.00

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)

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Alan Siktberg

Mailing Address 9235 Bluestone Circle

City
Indianapolis

State
IN

Zip Code
46236

Purpose of Disbursement
payroll

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.5823

Date of Disbursement

10 / 01 / 2007

Amount of Each Disbursement this Period

400.00

B.

Full Name (Last, First, Middle Initial)

Alan Siktberg

Mailing Address 9235 Bluestone Circle

City
Indianapolis

State
IN

Zip Code
46236

Purpose of Disbursement
payroll

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.5839

Date of Disbursement

12 / 03 / 2007

Amount of Each Disbursement this Period

400.00

C.

Full Name (Last, First, Middle Initial)

Mikah Wilson

Mailing Address 12700 W. Arrowhead Drive

City
Daleville

State
IN

Zip Code
47334

Purpose of Disbursement
payroll

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.5802

Date of Disbursement

07 / 13 / 2007

Amount of Each Disbursement this Period

400.00

SUBTOTAL of Disbursements This Page (optional)

1200.00

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)

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mikah Wilson

Transaction ID: SB21B.5816

Date of Disbursement

09 / 14 / 2007

Mailing Address 12700 W. Arrowhead Drive

City Daleville State IN Zip Code 47334

Amount of Each Disbursement this Period

800.00

Purpose of Disbursement
payroll

001

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)

Mikah Wilson

Transaction ID: SB21B.5820

Date of Disbursement

09 / 21 / 2007

Mailing Address 12700 W. Arrowhead Drive

City Daleville State IN Zip Code 47334

Amount of Each Disbursement this Period

400.00

Purpose of Disbursement
payroll

001

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)

Mikah Wilson

Transaction ID: SB21B.5824

Date of Disbursement

10 / 01 / 2007

Mailing Address 12700 W. Arrowhead Drive

City Daleville State IN Zip Code 47334

Amount of Each Disbursement this Period

400.00

Purpose of Disbursement
Payroll

001

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

1600.00

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 PageFOR 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)

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mikah Wilson

Mailing Address 12700 W. Arrowhead Drive

City State Zip Code
Daleville IN 47334

Purpose of Disbursement

Payroll

Candidate Name

001

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.5840

Date of Disbursement

M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 7

Amount of Each Disbursement this Period

400.00

B.

Full Name (Last, First, Middle Initial)

Mikah Wilson

Mailing Address 12700 W. Arrowhead Drive

City State Zip Code
Daleville IN 47334

Purpose of Disbursement

Reimburse Paper, Printer and Ink

Candidate Name

001

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.5848

Date of Disbursement

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

Amount of Each Disbursement this Period

444.00

SUBTOTAL of Disbursements This Page (optional) ►

844.00

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

20183.61

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

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NAME OF COMMITTEE (In Full)

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
BACHMANN FOR CONGRESS

Mailing Address BOX 49756

City State Zip Code
BLAINE MN 55449

Purpose of Disbursement
Contribution

Candidate Name
MICHELE M BACHMANN

Office Sought: ☒ House
☐ Senate
☐ President

State: MN District: 06

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.5879

Date of Disbursement

12 / 12 / 2007

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
BOB SCHAFFER FOR SENATE

Mailing Address 22137 WOODSIDE DRIVE
PO BOX 928

City State Zip Code
BRISTOL IN 46507

Purpose of Disbursement
Contribution

Candidate Name
ROBERT W SCHAFFER

Office Sought: ☐ House
☒ Senate
☐ President

State: CO District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.5859

Date of Disbursement

10 / 08 / 2007

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)
DAN BURTON FOR CONGRESS COMMITTEE

Mailing Address P.O. Box 50593
P. O. BOX 50593

City State Zip Code
Indianapolis IN 46250

Purpose of Disbursement
Federal Contribution

Candidate Name
DANNY L BURTON

Office Sought: ☒ House
☐ Senate
☐ President

State: IN District: 05

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.5789

Date of Disbursement

09 / 26 / 2007

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
DAN BURTON FOR CONGRESS COMMITTEE

Mailing Address P.O. Box 50593
P. O. BOX 50593

City Indianapolis State IN Zip Code 46250

Purpose of Disbursement
contribution

Candidate Name
DANNY L BURTON

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: IN District: 05

Transaction ID: SB23.5866

Date of Disbursement

12 / 12 / 2007

Amount of Each Disbursement this Period

2000.00

B. Full Name (Last, First, Middle Initial)
FRIENDS OF DAVE REICHERT

Mailing Address P. O. Box 53322

City Bellevue State WA Zip Code 98015

Purpose of Disbursement
Contribution

Candidate Name
DAVE REICHERT

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: WA District: 08

Transaction ID: SB23.5877

Date of Disbursement

12 / 12 / 2007

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
FRIENDS OF MIKE FERGUSON

Mailing Address c/o Ron Gravino P.O. Box 225

City Colonia State NJ Zip Code 07067

Purpose of Disbursement
Contribution

Candidate Name
MIKE FERGUSON

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: NJ District: 07

Transaction ID: SB23.5852

Date of Disbursement

09 / 26 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ►

4000.00

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

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NAME OF COMMITTEE (In Full)

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

FRIENDS OF MIKE SODREL

Mailing Address 702 NORTH SHORE DRIVE SUITE 500

City State Zip Code
JEFFERSONVILLE IN 47130

Purpose of Disbursement
Contribution

Candidate Name
MICHAEL E SODREL

Office Sought: ☒ House
☐ Senate
☐ President

State: IN District: 09

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.5887

Date of Disbursement

12 / 12 / 2007

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

HAYES FOR CONGRESS

Mailing Address Post Office Box 2000

City State Zip Code
Concord NC 28026

Purpose of Disbursement
Contribution

Candidate Name
ROBERT C (ROBIN) HAYES

Office Sought: ☒ House
☐ Senate
☐ President

State: NC District: 08

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.5880

Date of Disbursement

12 / 12 / 2007

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

HOUSE CONSERVATIVES FUND

Mailing Address P. O. Box 2752

City State Zip Code
Washington DC 20013

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Transaction ID: SB23.5894

Date of Disbursement

12 / 12 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ►

7000.00

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

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NAME OF COMMITTEE (In Full)

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
JIM GERLACH FOR CONGRESS COMMITTEE

Mailing Address PO Box 87

City Uwchland State PA Zip Code 19480

Purpose of Disbursement
Contribution

Candidate Name
JIM GERLACH

Office Sought: ☒ House
☐ Senate
☐ President

State: PA District: 06

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.5893

Date of Disbursement

12 / 12 / 2007

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
JIM RYUN FOR CONGRESS

Mailing Address PO Box 826

City Topeka State KS Zip Code 66601

Purpose of Disbursement
Contribution

Candidate Name
JIM R RYUN

Office Sought: ☒ House
☐ Senate
☐ President

State: KS District: 02

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.5849

Date of Disbursement

09 / 26 / 2007

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
JIM RYUN FOR CONGRESS

Mailing Address PO Box 826

City Topeka State KS Zip Code 66601

Purpose of Disbursement
Contribution

Candidate Name
JIM R RYUN

Office Sought: ☒ House
☐ Senate
☐ President

State: KS District: 02

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.5888

Date of Disbursement

12 / 12 / 2007

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

JOHN SHADEGGS FRIENDS

Mailing Address PO BOX 45444

City
Phoenix

State
AZ

Zip Code
85064

Purpose of Disbursement
Contribution

Candidate Name
JOHN B. SHADEGG

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: AZ District: 03

Transaction ID: SB23.5895

Date of Disbursement

12 / 31 / 2007

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

KELLER FOR CONGRESS

Mailing Address P.O. Box 1453

City
Orlando

State
FL

Zip Code
32802

Purpose of Disbursement
Contribution

Candidate Name
RICHARD ANTHONY KELLER

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 08

Transaction ID: SB23.5857

Date of Disbursement

09 / 26 / 2007

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

KELLER FOR CONGRESS

Mailing Address P.O. Box 1453

City
Orlando

State
FL

Zip Code
32802

Purpose of Disbursement
Contribution

Candidate Name
RICHARD ANTHONY KELLER

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 08

Transaction ID: SB23.5870

Date of Disbursement

12 / 12 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

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

Mailing Address 31000 Telegraph Road #110

City Bingham Farms State MI Zip Code 48025

Purpose of Disbursement
Contribution

Candidate Name
JOSEPH K. KNOLLENBERG

Office Sought: ☒ House
☐ Senate
☐ President

State: MI District: 09

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5874

Date of Disbursement

12 / 12 / 2007

Amount of Each Disbursement this Period

1000.00

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

Mailing Address 10 GANESVOORT STREET
SUITE 101

City BATH State NY Zip Code 14810

Purpose of Disbursement
Contribution

Candidate Name
JOHN R JR KUHL

Office Sought: ☒ House
☐ Senate
☐ President

State: NY District: 29

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5881

Date of Disbursement

12 / 12 / 2007

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
LAMBORN FOR CONGRESS

Mailing Address 5170 NORTH UNION BLVD

City COLORADO SPRINGS State CO Zip Code 80918

Purpose of Disbursement
Contribution

Candidate Name
DOUGLAS L LAMBORN

Office Sought: ☒ House
☐ Senate
☐ President

State: CO District: 05

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5882

Date of Disbursement

12 / 12 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

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

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NAME OF COMMITTEE (In Full)

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

LATTA FOR CONGRESS

Mailing Address 300 North Main Street

City
Bowling Green

State
OH

Zip Code
43402

Purpose of Disbursement
Contribution

Candidate Name
ROBERT EDWARD LATTA

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☐ General
☒ Other (specify) ▼
Special-General

State: OH District: 05

Transaction ID: SB23.5862

Date of Disbursement

12 / 03 / 2007

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

LATTA FOR CONGRESS

Mailing Address 300 North Main Street

City
Bowling Green

State
OH

Zip Code
43402

Purpose of Disbursement
Contribution

Candidate Name
ROBERT EDWARD LATTA

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☐ General
☒ Other (specify) ▼
Special-General

State: OH District: 05

Transaction ID: SB23.5865

Date of Disbursement

12 / 05 / 2007

Amount of Each Disbursement this Period

1500.00

C.

Full Name (Last, First, Middle Initial)

MUSGRAVE FOR CONGRESS

Mailing Address 5401 STONE CREEK CIRCLE SUITE 777

City
LOVELAND

State
CO

Zip Code
80538

Purpose of Disbursement
Contribution

Candidate Name
MARILYN N MUSGRAVE

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: CO District: 04

Transaction ID: SB23.5856

Date of Disbursement

09 / 26 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MUSGRAVE FOR CONGRESS

Mailing Address 5401 STONE CREEK CIRCLE SUITE 777

City LOVELAND State CO Zip Code 80538

Purpose of Disbursement
Contribution

Candidate Name
MARILYN N MUSGRAVE

Office Sought: ☒ House
☐ Senate
☐ President

State: CO District: 04

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5873

Date of Disbursement

12 / 12 / 2007

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
PEOPLE WITH HART INC

Mailing Address P.O. Box 435

City Wexford State PA Zip Code 15090

Purpose of Disbursement
Contribution

Candidate Name
MELISSA A. HART

Office Sought: ☒ House
☐ Senate
☐ President

State: PA District: 04

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5851

Date of Disbursement

09 / 26 / 2007

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
PEOPLE WITH HART INC

Mailing Address P.O. Box 435

City Wexford State PA Zip Code 15090

Purpose of Disbursement
Contribution

Candidate Name
MELISSA A. HART

Office Sought: ☒ House
☐ Senate
☐ President

State: PA District: 04

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.5878

Date of Disbursement

12 / 12 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

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

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NAME OF COMMITTEE (In Full)

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

PORTER FOR CONGRESS

Mailing Address PO Box 26087

City
Las Vegas

State
NV

Zip Code
89126

Purpose of Disbursement
Contributor

Candidate Name
JON C SR PORTER

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: NV District: 03

Transaction ID: SB23.5876

Date of Disbursement

12 / 12 / 2007

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

ROSKAM FOR CONGRESS COMMITTEE

Mailing Address 423 W. Wesley Street

City
Wheaton

State
IL

Zip Code
60189

Purpose of Disbursement
Contributor

Candidate Name
PETER ROSKAM

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 06

Transaction ID: SB23.5875

Date of Disbursement

12 / 12 / 2007

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

SALI FOR CONGRESS

Mailing Address PO Box 71

City
KUNA

State
ID

Zip Code
83634

Purpose of Disbursement
Contribution

Candidate Name
WILLIAM T. SALI

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: ID District: 01

Transaction ID: SB23.5883

Date of Disbursement

12 / 12 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

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

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NAME OF COMMITTEE (In Full)

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Sam Graves for Congress	Transaction ID: SB23.5788 Date of Disbursement
Mailing Address 4701 NW 82nd Street	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 2 0 0 7</div> </div>
City Kansas City State MO Zip Code 64151	Amount of Each Disbursement this Period
Purpose of Disbursement Federal Contribution	<div>2000.00</div>
Candidate Name SAMUEL B (SAM) GRAVES	<div>011</div> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 06	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Sam Graves for Congress	Transaction ID: SB23.5867 Date of Disbursement
Mailing Address 4701 NW 82nd Street	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 2 / 2 0 0 7</div> </div>
City Kansas City State MO Zip Code 64151	Amount of Each Disbursement this Period
Purpose of Disbursement Contribuitor	<div>2000.00</div>
Candidate Name SAMUEL B (SAM) GRAVES	<div>011</div> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 06	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) SOUDER FOR CONGRESS INC.	Transaction ID: SB23.5868 Date of Disbursement
Mailing Address P.O. BOX 40233 P.O. BOX 40233	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 2 / 2 0 0 7</div> </div>
City FORT WAYNE State IN Zip Code 46804	Amount of Each Disbursement this Period
Purpose of Disbursement Contribuitor	<div>500.00</div>
Candidate Name MARK E SOUDER	<div>011</div> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 03	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
STEVE CHABOT FOR CONGRESS

Mailing Address 3339 Harrison Ave.
3014 Harrison Ave.

City Cincinnati State OH Zip Code 45211

Purpose of Disbursement
Contribution

Candidate Name
STEVE CHABOT

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 01

Transaction ID: SB23.5850

Date of Disbursement

09 / 26 / 2007

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
STEVE CHABOT FOR CONGRESS

Mailing Address 3339 Harrison Ave.
3014 Harrison Ave.

City Cincinnati State OH Zip Code 45211

Purpose of Disbursement
Contribution

Candidate Name
STEVE CHABOT

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 01

Transaction ID: SB23.5869

Date of Disbursement

12 / 12 / 2007

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
THELMA DRAKE FOR CONGRESS

Mailing Address P.O. Box 61480

City Virginia Beach State VA Zip Code 23466

Purpose of Disbursement
Contribution

Candidate Name
THELMA D DRAKE

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: VA District: 02

Transaction ID: SB23.5884

Date of Disbursement

12 / 12 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

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 PageFOR 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)

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
TIM BEE EXPLORATORY COMMITTEE

Mailing Address PO BOX 31985

City TUCSON State AZ Zip Code 85751

Purpose of Disbursement
ContributionCandidate Name
TIMOTHY BEE011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: AZ District: 08

Transaction ID: SB23.5889

Date of Disbursement

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

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
VERN BUCHANAN FOR CONGRESS

Mailing Address P. O. Box 48928

City Sarasota State FL Zip Code 34230

Purpose of Disbursement
ContributionCandidate Name
VERNON BUCHANAN011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 13

Transaction ID: SB23.5855

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	6	/	2	0	0	7

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
VERN BUCHANAN FOR CONGRESS

Mailing Address P. O. Box 48928

City Sarasota State FL Zip Code 34230

Purpose of Disbursement
ContributionCandidate Name
VERNON BUCHANAN011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 13

Transaction ID: SB23.5872

Date of Disbursement

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

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

WALBERG FOR CONGRESS

Mailing Address 6769 Teachout Road

City Tipton State MI Zip Code 49287

Purpose of Disbursement
Contribution

Candidate Name
TIMOTHY WALBERG

Office Sought: ☒ House
☐ Senate
☐ President

State: MI District: 07

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.5853

Date of Disbursement

09 / 26 / 2007

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

WALBERG FOR CONGRESS

Mailing Address 6769 Teachout Road

City Tipton State MI Zip Code 49287

Purpose of Disbursement
Contribution

Candidate Name
TIMOTHY WALBERG

Office Sought: ☒ House
☐ Senate
☐ President

State: MI District: 07

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.5871

Date of Disbursement

12 / 12 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

46500.00