



**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
FREEDOM PROJECT; THE

Report Covering the Period: From: 

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		313898.42
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	345219.60									
(c) Total Receipts (from Line 19) .....	358510.00	570390.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	703729.60	884288.42								
7. Total Disbursements (from Line 31) .....	260097.23	440656.05								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	443632.37	443632.37								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
FREEDOM PROJECT; THE

Report Covering the Period: From: 

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	51050.00	124800.00
(ii) Unitemized .....	5960.00	6590.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	57010.00	131390.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	301500.00	439000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	358510.00	570390.00
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) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	358510.00	570390.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	358510.00	570390.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	130097.23	205446.05
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	130097.23	205446.05
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	130000.00	235060.00
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	150.00
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))..	260097.23	440656.05
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	260097.23	440656.05

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	358510.00	570390.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	358510.00	570390.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	130097.23	205446.05
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	130097.23	205446.05

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 74  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

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

Mailing Address 6919 30th Street N

City State Zip Code  
Arlington VA 22213-1802

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

Name of Employer Occupation  
The Dutko Group Inc. Vice Chairman, Public Policy & Research

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
03 / 11 / 2010

**Transaction ID:** SA11AI-5491-21938-c

Amount of Each Receipt this Period  
5000.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Caesar Arredondo

Mailing Address 445 Grand Bay Drive

City State Zip Code  
Key Biscayne FL 33149-1905

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

Name of Employer Occupation  
Real Estate, Owner Arredondo & Co. LLC

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
03 / 19 / 2010

**Transaction ID:** SA11AI-11573-21916-c

Amount of Each Receipt this Period  
5000.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Daniel Butler

Mailing Address 225 Pierremont Road

City State Zip Code  
Shreveport LA 71105-4146

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

Name of Employer Occupation  
Self CPA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
03 / 23 / 2010

**Transaction ID:** SA11AI-11721-22110-c

Amount of Each Receipt this Period  
500.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **10500.00**

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

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

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

FOR LINE NUMBER: PAGE 7 / 74  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.** Full Name (Last, First, Middle Initial)  
John J. Castellani  
 Mailing Address 1600 30th Street NW  
 City State Zip Code  
 Washington DC 20007-2903  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 19 / 2010  
**Transaction ID:** SA11AI-9783-21972-c  
 Amount of Each Receipt this Period  
 1000.00  
 Contribution  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 The Business Roundtable President  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Kirsten Chadwick  
 Mailing Address 601 President Ford Lane  
 City State Zip Code  
 Alexandria VA 22302-3033  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 26 / 2010  
**Transaction ID:** SA11AI-6467-21979-c  
 Amount of Each Receipt this Period  
 1500.00  
 Contribution  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Fierce, Isakowitz & Blalock Government Relations  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1500.00

**C.** Full Name (Last, First, Middle Initial)  
Christopher Cox  
 Mailing Address 2205 Windsor Road  
 City State Zip Code  
 Alexandria VA 22307-1019  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2010  
**Transaction ID:** SA11AI-4039-22142-c  
 Amount of Each Receipt this Period  
 1000.00  
 Contribution  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Navigators Principal  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 74  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**FREEDOM PROJECT; THE**

**A.**

Full Name (Last, First, Middle Initial) Nancy Crowley		Date of Receipt MM / DD / YYYY <span style="border: 1px solid black; padding: 2px;">03 / 11 / 2010</span>
Mailing Address 8908 Waterside Circle		<b>Transaction ID:</b> SA11AI-11581-21964-c
City Indianapolis	State IN	Zip Code 46278-1158
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">500.00</span>
Name of Employer NA	Occupation Homemaker	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">500.00</span>	

**B.**

Full Name (Last, First, Middle Initial) Mark Dion		Date of Receipt MM / DD / YYYY <span style="border: 1px solid black; padding: 2px;">03 / 26 / 2010</span>
Mailing Address 238 12th Street SE		<b>Transaction ID:</b> SA11AI-5795-21978-c
City Washington	State DC	Zip Code 20003-1428
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">5000.00</span>
Name of Employer Revolution Media Group	Occupation Partner	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">5000.00</span>	

**C.**

Full Name (Last, First, Middle Initial) Gina Downs		Date of Receipt MM / DD / YYYY <span style="border: 1px solid black; padding: 2px;">03 / 19 / 2010</span>
Mailing Address 386 Emerald Bay Circle Apt. G2		<b>Transaction ID:</b> SA11AI-11571-21913-c
City Naples	State FL	Zip Code 34110-7615
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">250.00</span>
Name of Employer NA	Occupation Retired	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">250.00</span>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">5750.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 74		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b>	Full Name (Last, First, Middle Initial) Don Fierce		Date of Receipt	
	Mailing Address 600 New Hampshire Avenue NW Suite 1000		M M / D D / Y Y Y Y 03 / 31 / 2010	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI-6317-22139-c
	Washington	DC	20037-2401	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		2200.00	
	Name of Employer Fierce & Isakowitz		Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2200.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) John Fish		Date of Receipt	
	Mailing Address 306 A Street SE		M M / D D / Y Y Y Y 03 / 11 / 2010	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI-5650-21956-c
	Washington	DC	20003-3832	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		5000.00	
	Name of Employer ReynoldsAmerican		Occupation VP, Federal Gov't Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Sam Geduldig		Date of Receipt	
	Mailing Address 1519 Pathfinder Lane		M M / D D / Y Y Y Y 03 / 11 / 2010	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI-5472-21933-c
	Mclean	VA	22101-3509	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		5000.00	
	Name of Employer Clark, Lytle & Geduldig		Occupation Senior Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	12200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 74
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b>	Full Name (Last, First, Middle Initial) Ralph Hellmann	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 3310 Old Dominion Boulevard	<b>Transaction ID:</b> SA11AI-11751-22141-c
	City State Zip Code Alexandria VA 22305-1318	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	Contribution
Name of Employer Information Tech. Ind. Co-un.	Occupation Sr. VP, Govt. Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Richard Hunt	Date of Receipt MM / DD / YYYY 03 / 30 / 2010
	Mailing Address 913 Bernard Street	<b>Transaction ID:</b> SA11AI-9715-22132-c
	City State Zip Code Alexandria VA 22314-1209	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. <b>C</b>	Contribution
Name of Employer Hunt Group DC	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mark Isakowitz	Date of Receipt MM / DD / YYYY 03 / 19 / 2010
	Mailing Address 3198 Pond Mist Way	<b>Transaction ID:</b> SA11AI-6318-21906-c
	City State Zip Code Oak Hill VA 20171-1905	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. <b>C</b>	Contribution
Name of Employer Fierce, Isakowitz & Blalock	Occupation Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	8500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 74  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial) Linda Jacobs		Date of Receipt MM / DD / YYYY 03 / 21 / 2010
Mailing Address 1018 Mimosa Drive		Transaction ID: SA11AI-11711-22100-c
City Florence	State SC	
Zip Code 29501-5534		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Francis Marion Univ.	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

**B.**

Full Name (Last, First, Middle Initial) James Koons		Date of Receipt MM / DD / YYYY 03 / 11 / 2010
Mailing Address 8905 Abbey Terrace		Transaction ID: SA11AI-11583-21971-c
City Potomac	State MD	
Zip Code 20854-5434		Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Jim Koons Automotive Co.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

**C.**

Full Name (Last, First, Middle Initial) Marc Lampkin		Date of Receipt MM / DD / YYYY 03 / 11 / 2010
Mailing Address 1640 Davidson Road		Transaction ID: SA11AI-6540-21939-c
City Mclean	State VA	
Zip Code 22101-4306		Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Quinn Gillespie & Assoc.	Occupation Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	7500.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 74
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b>	Full Name (Last, First, Middle Initial) Tracy Louv	Date of Receipt MM / DD / YYYY 03 / 25 / 2010
	Mailing Address 617 5th Key Drive	<b>Transaction ID:</b> SA11AI-11734-22123-c
	City State Zip Code Fort Lauderdale FL 33304-3809	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	Contribution
Name of Employer NA	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Leigh Ann Pusey	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 1119 Alexandria Avenue	<b>Transaction ID:</b> SA11AI-5588-22140-c
	City State Zip Code Alexandria VA 22308-1015	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	Contribution
Name of Employer Amer. Insurance Assn.	Occupation Sr. Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Alana Quinn	Date of Receipt MM / DD / YYYY 03 / 11 / 2010
	Mailing Address 8580 Majorca Lane	<b>Transaction ID:</b> SA11AI-11582-21966-c
	City State Zip Code Naples FL 34114-6435	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	Contribution
Name of Employer NA	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 74  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)  
Steve Ratton

Mailing Address 965 Potter Avenue

City State Zip Code  
Rockwall TX 75087-2468

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

Name of Employer Occupation  
Emergency Medical Services Executive  
Corp

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
03 / 20 / 2010

**Transaction ID:** SA11AI-11700-22089-c

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
Myron Rowland

Mailing Address 1000 Royal Marco Way

City State Zip Code  
Marco Island FL 34145-1835

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

Name of Employer Occupation  
NA Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
MM / DD / YYYY  
03 / 11 / 2010

**Transaction ID:** SA11AI-10953-21965-c

Amount of Each Receipt this Period  
500.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
Myron Rowland

Mailing Address 1000 Royal Marco Way

City State Zip Code  
Marco Island FL 34145-1835

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

Name of Employer Occupation  
NA Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
MM / DD / YYYY  
03 / 19 / 2010

**Transaction ID:** SA11AI-10953-22057-c

Amount of Each Receipt this Period  
100.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **850.00**

**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 / 74	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b>	Full Name (Last, First, Middle Initial) Harry Thomas		Date of Receipt																					
	Mailing Address 284 Woodcock Lane		<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>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		1	1		2	0	1	0														
	City	State	Zip Code		<b>Transaction ID:</b> SA11AI-11584-21970-c																			
	Ambler	PA	19002-5414																					
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>		Amount of Each Receipt this Period																				
Name of Employer Private Client Group LLC		Occupation Chairman		<input type="text" value="250.00"/>																				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>		Contribution																				

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="250.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="51050.00"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 74
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b>	Full Name (Last, First, Middle Initial) ABBOTT LABORATORIES EMPLOYEE POLITICAL ACTION COMMITTEE		Date of Receipt
	Mailing Address 100 Abbott Park Road		<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Abbott Park	IL	60064-3502
	FEC ID number of contributing federal political committee.		Transaction ID: SA11C-4265-21983-c
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="5000.00"/>
		<input type="text" value="5000.00"/>	Contribution

<b>B.</b>	Full Name (Last, First, Middle Initial) Acpac Aca International Political Action Committee		Date of Receipt
	Mailing Address 4040 W 70th Street		<input type="text" value="03"/> / <input type="text" value="11"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Minneapolis	MN	55435-4104
	FEC ID number of contributing federal political committee.		Transaction ID: SA11C-10312-21958-c
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="5000.00"/>
		<input type="text" value="5000.00"/>	Contribution

<b>C.</b>	Full Name (Last, First, Middle Initial) AFLAC INCORPORATED POLITICAL ACTION COMMITTEE AFLAC PAC		Date of Receipt
	Mailing Address 1932 Wynnton Road		<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Columbus	GA	31999-0001
	FEC ID number of contributing federal political committee.		Transaction ID: SA11C-4140-21914-c
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="5000.00"/>
		<input type="text" value="5000.00"/>	Contribution

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 74  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.** Full Name (Last, First, Middle Initial)  
ALTRIA GROUP INC. POLITICAL ACTION COMMITTEE

Mailing Address 101 Constitution Avenue NW  
Suite 400W

City Washington State DC Zip Code 20001-2155

FEC ID number of contributing federal political committee. **C** C00089136

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 03 / 11 / 2010  
**Transaction ID:** SA11C-4041-21947-c  
Amount of Each Receipt this Period: 5000.00  
Contribution

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

Mailing Address 1120 Connecticut Avenue NW

City Washington State DC Zip Code 20036-3902

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 03 / 11 / 2010  
**Transaction ID:** SA11C-3632-21957-c  
Amount of Each Receipt this Period: 5000.00  
Contribution

**C.** Full Name (Last, First, Middle Initial)  
AMERICAN DENTAL POLITICAL ACTION CMTE.

Mailing Address 1111 14th Street NW  
Suite 1100

City Washington State DC Zip Code 20005-5627

FEC ID number of contributing federal political committee. **C** C00000729

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 03 / 26 / 2010  
**Transaction ID:** SA11C-3843-21989-c  
Amount of Each Receipt this Period: 5000.00  
Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 15000.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 74  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN EXPRESS COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 801 Pennsylvania Avenue NW  
Suite 650

City Washington State DC Zip Code 20004-2673

FEC ID number of contributing federal political committee. **C** C00040535

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 03 / 11 / 2010  
**Transaction ID:** SA11C-3849-21976-c  
Amount of Each Receipt this Period: 5000.00  
Contribution

**B.** Full Name (Last, First, Middle Initial)  
AMERICAN FINANCIAL SERVICES ASSOCIATION PAC (AFSA PAC)

Mailing Address 919 18th Street NW

City Washington State DC Zip Code 20006-5503

FEC ID number of contributing federal political committee. **C** C00038604

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 03 / 31 / 2010  
**Transaction ID:** SA11C-4241-22149-c  
Amount of Each Receipt this Period: 5000.00  
Contribution

**C.** Full Name (Last, First, Middle Initial)  
American Trucking Assn. PAC (TRUCK PAC)

Mailing Address 430 1st Street SE

City Washington State DC Zip Code 20003-1826

FEC ID number of contributing federal political committee. **C** C00002881

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 03 / 31 / 2010  
**Transaction ID:** SA11C-6898-22150-c  
Amount of Each Receipt this Period: 5000.00  
Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 15000.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 74  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.** Full Name (Last, First, Middle Initial)  
Amerisourcebergen Corporation Political Action Committee (abc Pac)

Mailing Address 1300 Morris Drive  
Suite 100

City State Zip Code  
Chesterbrook PA 19087-5559

FEC ID number of contributing federal political committee. **C** C00400929

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

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

**Transaction ID:** SA11C-10300-21975-c

Amount of Each Receipt this Period  
5000.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
AMGEN INC. POLITICAL ACTION COMMITTEE

Mailing Address 1 Amgen Center Drive

City State Zip Code  
Newbury Park CA 91320-1730

FEC ID number of contributing federal political committee. **C** C00251876

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

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

**Transaction ID:** SA11C-4003-21974-c

Amount of Each Receipt this Period  
5000.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Ascap Legislative Fund For The Arts, The

Mailing Address 1 Lincoln Plaza

City State Zip Code  
New York NY 10023-7129

FEC ID number of contributing federal political committee. **C** C00228296

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  

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

**Transaction ID:** SA11C-11578-21948-c

Amount of Each Receipt this Period  
1500.00

Contribution

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

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

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

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

FOR LINE NUMBER: PAGE 19 / 74  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.** Full Name (Last, First, Middle Initial)  
ASSOCIATED BUILDERS & CONTRACTORS PAC

Mailing Address 4250 Fairfax Drive

City State Zip Code  
Arlington VA 22203-1665

FEC ID number of contributing federal political committee. **C** C00010421

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

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

**Transaction ID:** SA11C-4008-21924-c

Amount of Each Receipt this Period  
5000.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
ASTRAZENECA POLITICAL ACTION COMMITTEE (AZ PAC)

Mailing Address PO Box 15438

City State Zip Code  
Wilmington DE 19850-5438

FEC ID number of contributing federal political committee. **C** C00279455

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

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

**Transaction ID:** SA11C-3744-22146-c

Amount of Each Receipt this Period  
5000.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)

Mailing Address 208 S Akard Street  
Front 3521

City State Zip Code  
Dallas TX 75202-4295

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	6	/	2	0	1	0

**Transaction ID:** SA11C-3829-21988-c

Amount of Each Receipt this Period  
5000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **15000.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 74  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.** Full Name (Last, First, Middle Initial)  
BANK OF AMERICA CORPORATION FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address 100 N Tryon Street

City State Zip Code  
Charlotte NC 28255-0001

FEC ID number of contributing federal political committee. **C** C00252866

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 11 / 2010

**Transaction ID:** SA11C-3837-21937-c

Amount of Each Receipt this Period  
5000.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Bipartisan Political Action Committee/the Bank Of New York Mellon Corporation Bipac/bnym

Mailing Address 1 Mellon Bank Center

City State Zip Code  
Pittsburgh PA 15258-0001

FEC ID number of contributing federal political committee. **C** C00017558

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 19 / 2010

**Transaction ID:** SA11C-11575-21920-c

Amount of Each Receipt this Period  
5000.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
BUILD POLITICAL ACTION COMMITTEE OF THE NATIONAL ASSOCIATION OF HOME BUILDERS

Mailing Address 1201 15th Street NW

City State Zip Code  
Washington DC 20005-2842

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 11 / 2010

**Transaction ID:** SA11C-3870-21961-c

Amount of Each Receipt this Period  
5000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **15000.00**

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

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

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

FOR LINE NUMBER: PAGE 21 / 74  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.** Full Name (Last, First, Middle Initial)  
CHUBB CORPORATION POLITICAL ACTION COMMITTEE-CHUBBPAC, THE

Mailing Address 15 Mountainview Road

City State Zip Code  
Warren NJ 07059-6711

FEC ID number of contributing federal political committee. **C** C00229203

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 11 / 2010

**Transaction ID:** SA11C-3823-21951-c

Amount of Each Receipt this Period  
2500.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
CITIGROUP INC. POLITICAL ACTION COMMITTEE-FEDERAL (CITIGROUP PAC-FEDERAL)

Mailing Address 1101 Pennsylvania Avenue NW  
Suite 1000

City State Zip Code  
Washington DC 20004-2524

FEC ID number of contributing federal political committee. **C** C00008474

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 19 / 2010

**Transaction ID:** SA11C-3966-21918-c

Amount of Each Receipt this Period  
5000.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
COCA-COLA ENTERPRISES INC EMPLOYEES PAC

Mailing Address 2500 Windy Ridge Parkway SE

City State Zip Code  
Atlanta GA 30339-5677

FEC ID number of contributing federal political committee. **C** C00250134

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 19 / 2010

**Transaction ID:** SA11C-3830-21908-c

Amount of Each Receipt this Period  
5000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 12500.00

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

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

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

FOR LINE NUMBER: PAGE 22 / 74  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.** Full Name (Last, First, Middle Initial)  
COLLEGE OF AMERICAN PATHOLOGISTS POLITICAL ACTION COMMITTEE

Mailing Address 1350 I Street NW  
Suite 590

City State Zip Code  
Washington DC 20005-3305

FEC ID number of contributing federal political committee. **C** C00274944

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 03 / 11 / 2010  
Transaction ID: SA11C-9693-21968-c  
Amount of Each Receipt this Period: 5000.00  
Contribution

**B.** Full Name (Last, First, Middle Initial)  
Consumer Bankers Assn. PAC (CBAPAC)

Mailing Address 1000 Wilson Boulevard  
Suite 3012

City State Zip Code  
Arlington VA 22209-3927

FEC ID number of contributing federal political committee. **C** C00035535

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 03 / 11 / 2010  
Transaction ID: SA11C-8442-21949-c  
Amount of Each Receipt this Period: 5000.00  
Contribution

**C.** Full Name (Last, First, Middle Initial)  
Corrections Corporation of America CCA-PAC

Mailing Address 10 Burton Hills Boulevard

City State Zip Code  
Nashville TN 37215-6105

FEC ID number of contributing federal political committee. **C** C00366468

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 03 / 19 / 2010  
Transaction ID: SA11C-10771-21912-c  
Amount of Each Receipt this Period: 5000.00  
Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 15000.00

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

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

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

FOR LINE NUMBER: PAGE 23 / 74  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.** Full Name (Last, First, Middle Initial)  
DAVITA INC POLITICAL ACTION COMMITTEE  
Mailing Address 1155 15th Street NW

City State Zip Code  
Washington DC 20005-2706

FEC ID number of contributing federal political committee. **C** C00340943

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 11 / 2010  
**Transaction ID:** SA11C-4295-21935-c  
 Amount of Each Receipt this Period 2500.00  
 Contribution

**B.** Full Name (Last, First, Middle Initial)  
DAVITA INC POLITICAL ACTION COMMITTEE  
Mailing Address 1155 15th Street NW

City State Zip Code  
Washington DC 20005-2706

FEC ID number of contributing federal political committee. **C** C00340943

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 26 / 2010  
**Transaction ID:** SA11C-4295-21981-c  
 Amount of Each Receipt this Period 2500.00  
 Contribution

**C.** Full Name (Last, First, Middle Initial)  
DELOITTE & TOUCHE FEDERAL POLITICAL ACTION COMMITTEE  
Mailing Address PO Box 365

City State Zip Code  
Washington DC 20044-0365

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 11 / 2010  
**Transaction ID:** SA11C-3714-21945-c  
 Amount of Each Receipt this Period 5000.00  
 Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 10000.00

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

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

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

FOR LINE NUMBER: PAGE 24 / 74  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.** Full Name (Last, First, Middle Initial)  
DELTA AIRLINES INC POLITICAL ACTION COMMITTEE

Mailing Address 1212 New York Avenue NW  
Suite 200

City State Zip Code  
Washington DC 20005-6609

FEC ID number of contributing federal political committee. **C** C00076133

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 19 / 2010

**Transaction ID:** SA11C-3702-21907-c

Amount of Each Receipt this Period  
2500.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Duke Energy Corp. PAC

Mailing Address 422 S Church Street  
# PBO5D

City State Zip Code  
Charlotte NC 28242-0900

FEC ID number of contributing federal political committee. **C** C00083535

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 11 / 2010

**Transaction ID:** SA11C-8670-21973-c

Amount of Each Receipt this Period  
5000.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Eads North America Americans For Competition In Aerospace Pac

Mailing Address 1616 Fort Myer Drive  
Suite 1600

City State Zip Code  
Arlington VA 22209-3104

FEC ID number of contributing federal political committee. **C** C00421230

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 19 / 2010

**Transaction ID:** SA11C-11063-21909-c

Amount of Each Receipt this Period  
2500.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **10000.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 74
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b>	Full Name (Last, First, Middle Initial) Ehealth Political Action Committee (ehealth Pac)	Date of Receipt
	Mailing Address 1615 L Street NW Suite 650	<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City State Zip Code Washington DC 20036-5606	<b>Transaction ID:</b> SA11C-11574-21919-c
	FEC ID number of contributing federal political committee. <input type="text" value="C00459289"/>	Amount of Each Receipt this Period <input type="text" value="1000.00"/>
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	Contribution

<b>B.</b>	Full Name (Last, First, Middle Initial) Emergent Biosolutions Employees PAC	Date of Receipt
	Mailing Address 2273 Research Boulevard	<input type="text" value="03"/> / <input type="text" value="11"/> / <input type="text" value="2010"/>
	City State Zip Code Rockville MD 20850-3264	<b>Transaction ID:</b> SA11C-4398-21932-c
	FEC ID number of contributing federal political committee. <input type="text" value="C00380303"/>	Amount of Each Receipt this Period <input type="text" value="2500.00"/>
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>	Contribution

<b>C.</b>	Full Name (Last, First, Middle Initial) ERNST & YOUNG POLITICAL ACTION COMMITTEE	Date of Receipt
	Mailing Address 1225 Connecticut Avenue NW Suite 800	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City State Zip Code Washington DC 20036-2604	<b>Transaction ID:</b> SA11C-4240-21984-c
	FEC ID number of contributing federal political committee. <input type="text" value="C00227744"/>	Amount of Each Receipt this Period <input type="text" value="5000.00"/>
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="8500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 74
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b>	Full Name (Last, First, Middle Initial) FARMERS GROUP INC POLITICAL ACTION COMMITTEE	Date of Receipt MM / DD / YYYY 03 / 11 / 2010
	Mailing Address 2350 Kerner Boulevard Suite 250	<b>Transaction ID:</b> SA11C-3626-21967-c
	City San Rafael State CA Zip Code 94901-5596	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. <b>C</b> C00135681	Contribution
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00

<b>B.</b>	Full Name (Last, First, Middle Initial) FEDERATION OF AMERICAN HOSPITALS PAC (FEDPAC); (FKA AMERICAN HEALTH SYSTEMS PAC)	Date of Receipt MM / DD / YYYY 03 / 11 / 2010
	Mailing Address 801 Pennsylvania Avenue NW Suite 245	<b>Transaction ID:</b> SA11C-3824-21977-c
	City Washington State DC Zip Code 20004-2697	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. <b>C</b> C00002261	Contribution
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Financial Services Roundtable PAC	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 1001 Pennsylvania Avenue NW Suite 500	<b>Transaction ID:</b> SA11C-8244-22147-c
	City Washington State DC Zip Code 20004-2508	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. <b>C</b> C00193177	Contribution
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	10000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 74
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b>	Full Name (Last, First, Middle Initial) Generic Pharmaceutical Association Political Action Committee	Date of Receipt
	Mailing Address 2300 Clarendon Boulevard Suite 400	<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City State Zip Code Arlington VA 22201-3367	<b>Transaction ID:</b> SA11C-11576-21926-c
	FEC ID number of contributing federal political committee. <input type="text" value="C00383463"/>	Amount of Each Receipt this Period <input type="text" value="2000.00"/>
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text" value="2000.00"/>	Contribution

<b>B.</b>	Full Name (Last, First, Middle Initial) GOLDMAN SACHS GROUP INC. POLITICAL ACTION COMMITTEE, THE	Date of Receipt
	Mailing Address 101 Constitution Avenue, NW Suite 1000E	<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>
	City State Zip Code Washington DC 20001	<b>Transaction ID:</b> SA11C-2047-22148-c
	FEC ID number of contributing federal political committee. <input type="text" value="C00350744"/>	Amount of Each Receipt this Period <input type="text" value="5000.00"/>
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	Contribution

<b>C.</b>	Full Name (Last, First, Middle Initial) Hilton Worldwide Political Action Committee	Date of Receipt
	Mailing Address 7930 Jones Branch Drive Suite 1100	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City State Zip Code McLean VA 22102-3313	<b>Transaction ID:</b> SA11C-11586-21987-c
	FEC ID number of contributing federal political committee. <input type="text" value="C00213074"/>	Amount of Each Receipt this Period <input type="text" value="2500.00"/>
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>	Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="9500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 28 / 74  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.** Full Name (Last, First, Middle Initial)  
HOLLAND & KNIGHT COMMITTEE FOR EFFECTIVE GOVERNMENT

Mailing Address 2099 Pennsylvania Avenue NW

City State Zip Code  
Washington DC 20006-6800

FEC ID number of contributing federal political committee. **C** C00171330

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 3 / 1 1 / 2 0 1 0

**Transaction ID:** SA11C-3820-21942-c

Amount of Each Receipt this Period  
5000.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Home Depot Inc. Political Action Committee

Mailing Address 101 Constitution Avenue NW  
Suite 800W

City State Zip Code  
Washington DC 20001-2127

FEC ID number of contributing federal political committee. **C** C00284885

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 3 / 1 1 / 2 0 1 0

**Transaction ID:** SA11C-9086-21946-c

Amount of Each Receipt this Period  
5000.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
INTERNATIONAL PAPER POLITICAL ACTION COMMITTEE

Mailing Address 1101 Pennsylvania Avenue NW  
Suite 200

City State Zip Code  
Washington DC 20004-2514

FEC ID number of contributing federal political committee. **C** C00034405

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 3 / 1 1 / 2 0 1 0

**Transaction ID:** SA11C-4183-21950-c

Amount of Each Receipt this Period  
2500.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **12500.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 74  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)  
J. P. Morgan Chase & Co. PAC

Mailing Address 10 S Dearborn Street

City State Zip Code  
Chicago IL 60603-2300

FEC ID number of contributing federal political committee. **C** C00128512

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
03 / 19 / 2010

**Transaction ID:** SA11C-8433-21917-c

Amount of Each Receipt this Period  
5000.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
JACOBS GOOD GOVERNMENT FUND OF JACOBS ENGINEERING GROUP INC.

Mailing Address 1111 S Arroyo Parkway

City State Zip Code  
Pasadena CA 91105-3254

FEC ID number of contributing federal political committee. **C** C00142299

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
03 / 19 / 2010

**Transaction ID:** SA11C-4118-21922-c

Amount of Each Receipt this Period  
5000.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
Jones Walker Waechter Poitevent Carrere & Denegre Political Action Committee

Mailing Address 201 Saint Charles Avenue  
Floor 49

City State Zip Code  
New Orleans LA 70170-1000

FEC ID number of contributing federal political committee. **C** C00111534

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
MM / DD / YYYY  
03 / 11 / 2010

**Transaction ID:** SA11C-10954-21959-c

Amount of Each Receipt this Period  
1500.00

Contribution

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

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

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

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

FOR LINE NUMBER: PAGE 30 / 74  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.** Full Name (Last, First, Middle Initial)  
LOCKHEED MARTIN EMPLOYEES' POLITICAL ACTION COMMITTEE

Mailing Address 1550 Crystal Drive  
Suite 300

City Arlington State VA Zip Code 22202-4135

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 03 / 26 / 2010  
**Transaction ID:** SA11C-3742-21985-c  
 Amount of Each Receipt this Period: 5000.00  
 Contribution

**B.** Full Name (Last, First, Middle Initial)  
Loews Corporation Public Affairs Committee

Mailing Address 667 Madison Avenue

City New York State NY Zip Code 10065-8029

FEC ID number of contributing federal political committee. **C** C00416495

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 03 / 19 / 2010  
**Transaction ID:** SA11C-11572-21915-c  
 Amount of Each Receipt this Period: 5000.00  
 Contribution

**C.** Full Name (Last, First, Middle Initial)  
Marathon Oil Company Employees Political Action Committee (mepac)

Mailing Address 539 S Main Street

City Findlay State OH Zip Code 45840-3229

FEC ID number of contributing federal political committee. **C** C00040568

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 03 / 26 / 2010  
**Transaction ID:** SA11C-9691-21982-c  
 Amount of Each Receipt this Period: 5000.00  
 Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 15000.00

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

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

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

FOR LINE NUMBER: PAGE 31 / 74  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)  
Medco Health PAC

Mailing Address 2350 Kerner Boulevard  
Suite 250

City San Rafael State CA Zip Code 94901-5596

FEC ID number of contributing federal political committee. **C** C00384362

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 3 / 1 9 / 2 0 1 0

**Transaction ID:** SA11C-9785-21928-c

Amount of Each Receipt this Period  
5000.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
Merck & Co. Inc. Employees Political Action Committee (Merck Pac)

Mailing Address 601 Pennsylvania Avenue NW

City Washington State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. **C** C00097485

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 3 / 3 1 / 2 0 1 0

**Transaction ID:** SA11C-9996-22144-c

Amount of Each Receipt this Period  
5000.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
METLIFE INC. EMPLOYEES' POLITICAL PARTICIPATION FUND A

Mailing Address 1620 L Street NW  
Suite 800

City Washington State DC Zip Code 20036-5629

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 3 / 2 6 / 2 0 1 0

**Transaction ID:** SA11C-7279-21980-c

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: <span style="float: right;">PAGE 32 / 74</span>
	(check only one)
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b>	Full Name (Last, First, Middle Initial) MGM MIRAGE PAC	Date of Receipt MM / DD / YYYY 03 / 19 / 2010
	Mailing Address 2350 Kerner Boulevard Suite 250	<b>Transaction ID:</b> SA11C-4157-21921-c
	City San Rafael State CA Zip Code 94901-5596	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. <b>C</b> C00299321	Contribution
	Name of Employer Occupation	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00

<b>B.</b>	Full Name (Last, First, Middle Initial) MORTGAGE BANKERS ASSOCIATION POLITICAL ACTION COMMITTEE	Date of Receipt MM / DD / YYYY 03 / 11 / 2010
	Mailing Address 1919 Pennsylvania Avenue NW Floor 8	<b>Transaction ID:</b> SA11C-4236-21934-c
	City Washington State DC Zip Code 20006-3404	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. <b>C</b> C00004812	Contribution
	Name of Employer Occupation	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Mutual Of Omaha Companies Pac (impac)	Date of Receipt MM / DD / YYYY 03 / 19 / 2010
	Mailing Address 1700 Pennsylvania Avenue Suite 500	<b>Transaction ID:</b> SA11C-7569-21927-c
	City Washington State DC Zip Code 20006-4725	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. <b>C</b> C00103572	Contribution
	Name of Employer Occupation	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>10000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 33 / 74  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.** Full Name (Last, First, Middle Initial)  
NATIONAL ASSOCIATION OF REAL ESTATE INVESTMENT TRUSTS INC. POLITICAL ACTION COMMITTEE

Mailing Address 1875 I Street NW  
Suite 600

City Washington State DC Zip Code 20006-5413

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 03 / 11 / 2010  
**Transaction ID:** SA11C-9217-21936-c  
 Amount of Each Receipt this Period: 5000.00  
 Contribution

**B.** Full Name (Last, First, Middle Initial)  
National Community Pharmacists Association - Pac

Mailing Address 100 Daingerfield Road

City Alexandria State VA Zip Code 22314-6302

FEC ID number of contributing federal political committee. **C** C00030809

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 03 / 11 / 2010  
**Transaction ID:** SA11C-11396-21940-c  
 Amount of Each Receipt this Period: 5000.00  
 Contribution

**C.** Full Name (Last, First, Middle Initial)  
NATIONAL VENTURE CAPITAL ASSOCIATION VENTUREPAC

Mailing Address 1655 Fort Myer Drive

City Arlington State VA Zip Code 22209-3113

FEC ID number of contributing federal political committee. **C** C00150367

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 03 / 11 / 2010  
**Transaction ID:** SA11C-4115-21941-c  
 Amount of Each Receipt this Period: 5000.00  
 Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 15000.00

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

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

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

FOR LINE NUMBER: PAGE 34 / 74  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.** Full Name (Last, First, Middle Initial)  
Novartis Political Action Committee

Mailing Address 701 Pennsylvania Avenue NW  
Suite 725

City Washington State DC Zip Code 20004-2608

FEC ID number of contributing federal political committee. **C** C00033969

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 03 / 11 / 2010  
**Transaction ID:** SA11C-10157-21952-c  
 Amount of Each Receipt this Period: 5000.00  
 Contribution

**B.** Full Name (Last, First, Middle Initial)  
OSI RESTAURANT PARTNERS, LLC POLITICAL ACTION COMMITTEE

Mailing Address 2202 N West Shore Boulevard  
Floor 5

City Tampa State FL Zip Code 33607-5747

FEC ID number of contributing federal political committee. **C** C00253153

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 03 / 19 / 2010  
**Transaction ID:** SA11C-9062-21925-c  
 Amount of Each Receipt this Period: 5000.00  
 Contribution

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

Mailing Address 235 E 42nd Street

City New York State NY Zip Code 10017-5703

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 03 / 19 / 2010  
**Transaction ID:** SA11C-4017-21930-c  
 Amount of Each Receipt this Period: 5000.00  
 Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 15000.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 74  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.** Full Name (Last, First, Middle Initial)  
POLITICAL ACTION COMMITTEE OF THE AMERICAN ASSOCIATION OF ORTHOPAEDIC SURGEONS

Mailing Address 317 Massachusetts Avenue NE

City Washington State DC Zip Code 20002-5769

FEC ID number of contributing federal political committee. **C** C00343137

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: M M / D D / Y Y Y Y Y  
03 / 11 / 2010

Transaction ID: SA11C-10190-21969-c

Amount of Each Receipt this Period: 5000.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
PRINTPAC Printing Industries of America

Mailing Address 601 13th Street NW Suite 360N

City Washington State DC Zip Code 20005-3849

FEC ID number of contributing federal political committee. **C** C00018028

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: M M / D D / Y Y Y Y Y  
03 / 11 / 2010

Transaction ID: SA11C-10225-21943-c

Amount of Each Receipt this Period: 5000.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
QUALCOMM INCORPORATED POLITICAL ACTION COMMITTEE (QPAC)

Mailing Address 2001 Pennsylvania Avenue NW Suite 650

City Washington State DC Zip Code 20006-1878

FEC ID number of contributing federal political committee. **C** C00339085

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: M M / D D / Y Y Y Y Y  
03 / 19 / 2010

Transaction ID: SA11C-3846-21929-c

Amount of Each Receipt this Period: 2500.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **12500.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 74
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b>	Full Name (Last, First, Middle Initial) Retail Industry Leaders Association Political Action Committee Aka Retail Leaders Pac		Date of Receipt
	Mailing Address 1700 N Moore Street Suite 2250		<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Arlington	VA	22209-1933
	FEC ID number of contributing federal political committee. <b>C</b> C00112763		<b>Transaction ID:</b> SA11C-11587-21990-c
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="2000.00"/>
		<input type="text" value="2000.00"/>	Contribution

<b>B.</b>	Full Name (Last, First, Middle Initial) Safeway Inc. Political Action Committee (Safe PAC)		Date of Receipt
	Mailing Address 5918 Stoneridge Mall Road		<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Pleasanton	CA	94588-3229
	FEC ID number of contributing federal political committee. <b>C</b> C00194084		<b>Transaction ID:</b> SA11C-9753-21923-c
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="2500.00"/>
		<input type="text" value="2500.00"/>	Contribution

<b>C.</b>	Full Name (Last, First, Middle Initial) Seniors Housing PAC		Date of Receipt
	Mailing Address 5100 Wisconsin Avenue NW Suite 307		<input type="text" value="03"/> / <input type="text" value="11"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Washington	DC	20016-4130
	FEC ID number of contributing federal political committee. <b>C</b> C00325332		<b>Transaction ID:</b> SA11C-10160-21954-c
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="5000.00"/>
		<input type="text" value="5000.00"/>	Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="9500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 74  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.** Full Name (Last, First, Middle Initial)  
SWISHER INTERNATIONAL INC PAC FUND  
Mailing Address 459 E 16th Street  
City Jacksonville State FL Zip Code 32206-3025  
FEC ID number of contributing federal political committee. **C** C00312785  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00  
Date of Receipt 03 / 11 / 2010  
Transaction ID: SA11C-4123-21960-c  
Amount of Each Receipt this Period 5000.00  
Contribution

**B.** Full Name (Last, First, Middle Initial)  
THE TRAVELERS COMPANIES INC. POLITICAL ACTION COMMITTEE (STA PAC), THE  
Mailing Address One Tower Square  
City Hartford State CT Zip Code 06183  
FEC ID number of contributing federal political committee. **C** C00376376  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00  
Date of Receipt 03 / 26 / 2010  
Transaction ID: SA11C-4014-21986-c  
Amount of Each Receipt this Period 5000.00  
Contribution

**C.** Full Name (Last, First, Middle Initial)  
UNITED SERVICES AUTOMOBILE ASSOCIATION EMPLOYEE PAC - USAA EMPLOYEE PAC  
Mailing Address 9800 Fredericksburg Road  
City San Antonio State TX Zip Code 78288-0001  
FEC ID number of contributing federal political committee. **C** C00164145  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00  
Date of Receipt 03 / 11 / 2010  
Transaction ID: SA11C-4234-21953-c  
Amount of Each Receipt this Period 5000.00  
Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 15000.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 38 / 74  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.** Full Name (Last, First, Middle Initial)  
UNITED STATES STEEL CORPORATION PAC

Mailing Address 600 Grant Street  
Room 675

City State Zip Code  
Pittsburgh PA 15219-2702

FEC ID number of contributing federal political committee. **C** C00030676

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 11 / 2010

**Transaction ID:** SA11C-4006-21944-c

Amount of Each Receipt this Period  
5000.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
UNITEDHEALTH GROUP INCORPORATED PAC (UNITED FOR HEALTH)

Mailing Address 9900 Bren Road E

City State Zip Code  
Minnetonka MN 55343-9664

FEC ID number of contributing federal political committee. **C** C00274431

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 19 / 2010

**Transaction ID:** SA11C-5443-21910-c

Amount of Each Receipt this Period  
2500.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
WAL-MART STORES INC. PAC FOR RESPONSIBLE GOVERNMENT

Mailing Address 702 SW 8th Street

City State Zip Code  
Bentonville AR 72716-0150

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 19 / 2010

**Transaction ID:** SA11C-7978-21931-c

Amount of Each Receipt this Period  
5000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **12500.00**

**TOTAL** This Period (last page this line number only) ..... ► **301500.00**

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 39 / 74

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Chain Bridge Bank	Transaction ID: SB21B-10391-21898-e Date of Disbursement
	Mailing Address 1445 Laughlin Avenue Suite A	<input type="text" value="03"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>
	City Mclean State VA Zip Code 22101-5737	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll taxes	<input type="text" value="1525.30"/>
	Candidate Name	<input type="text" value="001"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Chain Bridge Bank	Transaction ID: SB21B-10391-21900-e Date of Disbursement
	Mailing Address 1445 Laughlin Avenue Suite A	<input type="text" value="03"/> / <input type="text" value="17"/> / <input type="text" value="2010"/>
	City Mclean State VA Zip Code 22101-5737	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank fee	<input type="text" value="25.00"/>
	Candidate Name	<input type="text" value="001"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Chain Bridge Bank	Transaction ID: SB21B-10391-21899-e Date of Disbursement
	Mailing Address 1445 Laughlin Avenue Suite A	<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>
	City Mclean State VA Zip Code 22101-5737	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll taxes	<input type="text" value="1525.29"/>
	Candidate Name	<input type="text" value="001"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="3075.59"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 40 / 74

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b>	Full Name (Last, First, Middle Initial) Chain Bridge Bank  Mailing Address 1445 Laughlin Avenue Suite A  City Mclean State VA Zip Code 22101-5737  Purpose of Disbursement Bank fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-10391-22151-e <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 1 0	<b>Amount of Each Disbursement this Period</b> 66.80
<b>B.</b>	Full Name (Last, First, Middle Initial) Clark, Schaefer, Hackett & Company  Mailing Address 160 N Breiel Boulevard  City Middletown State OH Zip Code 45042-3806  Purpose of Disbursement Payroll processing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-6282-21901-e <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 1 0	<b>Amount of Each Disbursement this Period</b> 65.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Clark, Schaefer, Hackett & Company  Mailing Address 160 N Breiel Boulevard  City Middletown State OH Zip Code 45042-3806  Purpose of Disbursement Payroll processing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-6282-21902-e <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 1 0	<b>Amount of Each Disbursement this Period</b> 65.00

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

196.80

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) Commonwealth of Virginia <hr/> Mailing Address PO Box 27264 <hr/> City Richmond State VA Zip Code 23261-7264 Purpose of Disbursement Payroll taxes Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-8564-21897-e Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2010
	Amount of Each Disbursement this Period 348.58
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Direct TV <hr/> Mailing Address PO Box 60036 <hr/> City Los Angeles State CA Zip Code 90060-0036 Purpose of Disbursement Utility Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-11147-21852-e Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2010
	Amount of Each Disbursement this Period 72.58
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Mastercard <hr/> Mailing Address PO Box 42070 <hr/> City Middletown State OH Zip Code 45042-0070 Purpose of Disbursement Credit card (see memo entries) Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-3605-21903-e Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2010
	Amount of Each Disbursement this Period 13559.12
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	13980.28
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 42 / 74

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b>	Full Name (Last, First, Middle Initial) USPS <hr/> Mailing Address 1200 Pennsylvania Avenue NW <hr/> City Washington State DC Zip Code 20004-2403 <hr/> Purpose of Disbursement Postage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-3727-10888-V Date of Disbursement 03 / 10 / 2010 <hr/> Amount of Each Disbursement this Period 132.00 <hr/> [MEMO ITEM] Subitemization of Mastercard	001 Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Federal Express <hr/> Mailing Address PO Box 693 <hr/> City Memphis State TN Zip Code 38101-0693 <hr/> Purpose of Disbursement Shipping Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-5079-10904-V Date of Disbursement 03 / 10 / 2010 <hr/> Amount of Each Disbursement this Period 85.96 <hr/> [MEMO ITEM] Subitemization of Mastercard	001 Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Delta Air Lines <hr/> Mailing Address PO Box 20706 <hr/> City Atlanta State GA Zip Code 30320-6001 <hr/> Purpose of Disbursement Gen. fund. travel airfare Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-5296-10896-V Date of Disbursement 03 / 10 / 2010 <hr/> Amount of Each Disbursement this Period 512.90 <hr/> [MEMO ITEM] Subitemization of Mastercard	002 Category/ Type

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Amazon.com	Transaction ID: SB21B-7436-10906-V
	Mailing Address PO Box 81226	Date of Disbursement MM / DD / YYYY 03 / 10 / 2010
	City Seattle State WA Zip Code 98108-1300	Amount of Each Disbursement this Period 517.48
	Purpose of Disbursement Camera equipment Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> Subitemization of Mastercard

B.	Full Name (Last, First, Middle Initial) La Lomita Restaurant	Transaction ID: SB21B-8100-10893-V
	Mailing Address 1330 Pennsylvania Avenue SE	Date of Disbursement MM / DD / YYYY 03 / 10 / 2010
	City Washington State DC Zip Code 20003-3037	Amount of Each Disbursement this Period 91.45
	Purpose of Disbursement Mtg. exp. food & bev. Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> Subitemization of Mastercard

C.	Full Name (Last, First, Middle Initial) The Caucus Room	Transaction ID: SB21B-8358-10902-V
	Mailing Address 401 9th Street NW	Date of Disbursement MM / DD / YYYY 03 / 10 / 2010
	City Washington State DC Zip Code 20004-2128	Amount of Each Disbursement this Period 750.00
	Purpose of Disbursement Gen. fund. event dep. food & bev. Candidate Name	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> Subitemization of Mastercard

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b>	Full Name (Last, First, Middle Initial) Minuteman Press  Mailing Address 555 New Jersey Avenue NW  City Washington State DC Zip Code 20001-2029  Purpose of Disbursement Printing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-10169-10889-V <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 1 0 / 2 0 1 0	Amount of Each Disbursement this Period 292.56
			[MEMO ITEM] Subitemization of Mastercard
<b>B.</b>	Full Name (Last, First, Middle Initial) 123 Together.com  Mailing Address 111 S Bedford Street Suite 200  City Burlington State MA Zip Code 01803-5145  Purpose of Disbursement Internet Candidate Name  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>Transaction ID:</b> SB21B-10075-10899-V <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 1 0 / 2 0 1 0	Amount of Each Disbursement this Period 189.86
			[MEMO ITEM] Subitemization of Mastercard
<b>C.</b>	Full Name (Last, First, Middle Initial) The Gasparilla Inn  Mailing Address 500 Palm Avenue  City Boca Grande State FL Zip Code 33921  Purpose of Disbursement Gen. fund. travel lodging Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-10334-10891-V <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 1 0 / 2 0 1 0	Amount of Each Disbursement this Period 1292.87
			[MEMO ITEM] Subitemization of Mastercard

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.** Full Name (Last, First, Middle Initial)  
Google Inc., Advertising Programs

Mailing Address 1600 Amphitheatre Parkway

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement TFP Website advertising

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** SB21B-11085-10901-V  
**Date of Disbursement:** 03 / 10 / 2010

Amount of Each Disbursement this Period: 542.74

**[MEMO ITEM]**  
Subitemization of Mastercard

**B.** Full Name (Last, First, Middle Initial)  
Facebook Advertising

Mailing Address 1601 S California Avenue

City Palo Alto State CA Zip Code 94304-1111

Purpose of Disbursement TFP Website advertising

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** SB21B-11148-10887-V  
**Date of Disbursement:** 03 / 10 / 2010

Amount of Each Disbursement this Period: 1648.48

**[MEMO ITEM]**  
Subitemization of Mastercard

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

Mailing Address 4036 28th Street S

City Arlington State VA Zip Code 22206-2202

Purpose of Disbursement Mtg. exp. food & bev.

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** SB21B-10172-10898-V  
**Date of Disbursement:** 03 / 10 / 2010

Amount of Each Disbursement this Period: 284.45

**[MEMO ITEM]**  
Subitemization of Mastercard

**SUBTOTAL** of Disbursements This Page (optional) ..... ► 0.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b>	Full Name (Last, First, Middle Initial) Harris Teeter  Mailing Address 4250 Campbell Avenue  City Arlington State VA Zip Code 22206-3426  Purpose of Disbursement Mtg. exp. food & bev. Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-11430-10894-V Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 0 / 2 0 1 0  Amount of Each Disbursement this Period 250.16  <b>[MEMO ITEM]</b> Subitemization of Mastercard
<b>B.</b>	Full Name (Last, First, Middle Initial) Randy's Fish Market  Mailing Address 10395 Tamiami Trail N  City Naples State FL Zip Code 34108-1902  Purpose of Disbursement Gen. fund. travel food & bev. Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-11462-10905-V Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 0 / 2 0 1 0  Amount of Each Disbursement this Period 229.45  <b>[MEMO ITEM]</b> Subitemization of Mastercard
<b>C.</b>	Full Name (Last, First, Middle Initial) Renaissance Hotel  Mailing Address 202 E Pratt Street  City Baltimore State MD Zip Code 21202-6101  Purpose of Disbursement Mtg exp., food & bev. Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-11568-10890-V Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 0 / 2 0 1 0  Amount of Each Disbursement this Period 2981.63  <b>[MEMO ITEM]</b> Subitemization of Mastercard

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<p><b>A.</b> Full Name (Last, First, Middle Initial) Jordan's Grill</p> <p>Mailing Address 523th Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Mtg. exp. food &amp; bev. Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-11281-10895-V <b>Date of Disbursement:</b> 03 / 10 / 2010</p> <p>Amount of Each Disbursement this Period 220.40</p> <p><b>[MEMO ITEM]</b> Subitemization of Mastercard</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Roys</p> <p>Mailing Address 475 Bayfront Place</p> <p>City Naples State FL Zip Code 34102-6454</p> <p>Purpose of Disbursement Gen. fund. food &amp; bev. Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-11092-10907-V <b>Date of Disbursement:</b> 03 / 10 / 2010</p> <p>Amount of Each Disbursement this Period 3371.30</p> <p><b>[MEMO ITEM]</b> Subitemization of Mastercard</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Central Michel Richard</p> <p>Mailing Address 1001 Pennsylvania Avenue NW</p> <p>City Washington State DC Zip Code 20004-2505</p> <p>Purpose of Disbursement Gen. fund. food &amp; bev. Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-11428-10923-V <b>Date of Disbursement:</b> 03 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 1936.90</p> <p><b>[MEMO ITEM]</b> Subitemization of Mastercard</p>

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<p><b>A.</b> Full Name (Last, First, Middle Initial) The Chefs Express</p> <p>Mailing Address 176 Royal Palm Drive</p> <p>City Marco Island State FL Zip Code 34145-2010</p> <p>Purpose of Disbursement Gen. fund. food &amp; bev.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-11748-10919-V</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>2</td><td>6</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">3042.80</td> </tr> </table> <p><b>[MEMO ITEM]</b> Subitemization of Mastercard</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	2	6	/	2	0	1	0	3042.80
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	2	6	/	2	0	1	0													
3042.80																						
<p><b>B.</b> Full Name (Last, First, Middle Initial) Southern Republican Leadership Conference</p> <p>Mailing Address 12232 Industriplex Boulevard</p> <p>City Baton Rouge State LA Zip Code 70809-7104</p> <p>Purpose of Disbursement Exhibit fee for conference</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-11750-10931-V</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>2</td><td>6</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">3500.00</td> </tr> </table> <p><b>[MEMO ITEM]</b> Subitemization of Mastercard</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	2	6	/	2	0	1	0	3500.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	2	6	/	2	0	1	0													
3500.00																						
<p><b>C.</b> Full Name (Last, First, Middle Initial) Facebook Advertising</p> <p>Mailing Address 1601 S California Avenue</p> <p>City Palo Alto State CA Zip Code 94304-1111</p> <p>Purpose of Disbursement TFP website advertising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-11148-10910-V</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>2</td><td>6</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">2029.04</td> </tr> </table> <p><b>[MEMO ITEM]</b> Subitemization of Mastercard</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	2	6	/	2	0	1	0	2029.04
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	2	6	/	2	0	1	0													
2029.04																						

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

0.00
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**TOTAL** This Period (last page this line number only) ..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<p><b>A.</b> Full Name (Last, First, Middle Initial) Mortons</p> <p>Mailing Address 1050 Connecticut Avenue NW</p> <p>City Washington State DC Zip Code 20036-5303</p> <p>Purpose of Disbursement Gen. fund. food &amp; bev.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-11278-10929-V</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">971.96</td> </tr> </table> <p><b>[MEMO ITEM]</b> Subitemization of Mastercard</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	1	0	971.96
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		2	6		2	0	1	0													
971.96																						
<p><b>B.</b> Full Name (Last, First, Middle Initial) Google Inc., Advertising Programs</p> <p>Mailing Address 1600 Amphitheatre Parkway</p> <p>City Mountain View State CA Zip Code 94043-1351</p> <p>Purpose of Disbursement TFP website advertising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-11085-10920-V</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">2198.53</td> </tr> </table> <p><b>[MEMO ITEM]</b> Subitemization of Mastercard</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	1	0	2198.53
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		2	6		2	0	1	0													
2198.53																						
<p><b>C.</b> Full Name (Last, First, Middle Initial) Best Buy Co., Inc.</p> <p>Mailing Address PO Box 9312</p> <p>City Minneapolis State MN Zip Code 55440-9312</p> <p>Purpose of Disbursement Camera equipment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-8558-10928-V</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">503.97</td> </tr> </table> <p><b>[MEMO ITEM]</b> Subitemization of Mastercard</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	1	0	503.97
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		2	6		2	0	1	0													
503.97																						

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 50 / 74

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) Ritz Carlton Naples Mailing Address 280 Vanderbilt Beach Road City Naples State FL Zip Code 34108-2371 Purpose of Disbursement Gen. fund. food, bev & greens fees Candidate Name	Transaction ID: SB21B-10941-10927-V Date of Disbursement 03 / 26 / 2010 Amount of Each Disbursement this Period 32928.66 [MEMO ITEM] Subitemization of Mastercard

<b>B.</b> Full Name (Last, First, Middle Initial) 123 Together.com Mailing Address 111 S Bedford Street Suite 200 City Burlington State MA Zip Code 01803-5145 Purpose of Disbursement Internet Candidate Name	Transaction ID: SB21B-10075-10925-V Date of Disbursement 03 / 26 / 2010 Amount of Each Disbursement this Period 189.86 [MEMO ITEM] Subitemization of Mastercard

<b>C.</b> Full Name (Last, First, Middle Initial) Trattoria Alberto Mailing Address 506 8th Street SE City Washington State DC Zip Code 20003-2834 Purpose of Disbursement Mtg. exp. food & bev. Candidate Name	Transaction ID: SB21B-10171-10912-V Date of Disbursement 03 / 26 / 2010 Amount of Each Disbursement this Period 127.20 [MEMO ITEM] Subitemization of Mastercard

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) Capitol Hill Club Mailing Address 300 1st Street SE City Washington State DC Zip Code 20003-1801 Purpose of Disbursement Mtg. exp. food & bev. Candidate Name	Transaction ID: SB21B-5501-10918-V Date of Disbursement 03 / 26 / 2010 Amount of Each Disbursement this Period 468.39

**[MEMO ITEM]**  
Subitemization of Mastercard

<b>B.</b> Full Name (Last, First, Middle Initial) Szechuan House Fusion Grill Mailing Address 515 8th Street SE City Washington State DC Zip Code 20003-2835 Purpose of Disbursement Mtg. exp. food & bev. Candidate Name	Transaction ID: SB21B-10221-10930-V Date of Disbursement 03 / 26 / 2010 Amount of Each Disbursement this Period 77.20

**[MEMO ITEM]**  
Subitemization of Mastercard

<b>C.</b> Full Name (Last, First, Middle Initial) The Caucus Room Mailing Address 401 9th Street NW City Washington State DC Zip Code 20004-2128 Purpose of Disbursement Gen. fund. food & bev. Candidate Name	Transaction ID: SB21B-8358-10926-V Date of Disbursement 03 / 26 / 2010 Amount of Each Disbursement this Period 4308.13

**[MEMO ITEM]**  
Subitemization of Mastercard

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Mastercard	Transaction ID: SB21B-3605-21904-e Date of Disbursement																			
	Mailing Address PO Box 42070	<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>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	6		2	0	1	0												
	City Middletown State OH Zip Code 45042-0070	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Credit card (see memo entries) Candidate Name	<table border="1"><tr><td>59080.44</td></tr></table>	59080.44																		
59080.44																					
	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) ▼																			
		001 Category/Type																			

B.	Full Name (Last, First, Middle Initial) Dell Business Credit	Transaction ID: SB21B-9781-10917-V Date of Disbursement																			
	Mailing Address PO Box 5275	<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>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	6		2	0	1	0												
	City Carol Stream State IL Zip Code 60197-5275	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Computer equipment Candidate Name	<table border="1"><tr><td>438.98</td></tr></table>	438.98																		
438.98																					
	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) ▼																			
		001 Category/Type																			
		<b>[MEMO ITEM]</b> Subitemization of Mastercard																			

C.	Full Name (Last, First, Middle Initial) Congressional Liquors	Transaction ID: SB21B-6678-10924-V Date of Disbursement																			
	Mailing Address 404 1st Street SE	<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>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	6		2	0	1	0												
	City Washington State DC Zip Code 20003-1826	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Gen. fund. beverage Candidate Name	<table border="1"><tr><td>601.03</td></tr></table>	601.03																		
601.03																					
	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) ▼																			
		003 Category/Type																			
		<b>[MEMO ITEM]</b> Subitemization of Mastercard																			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>59080.44</td></tr></table>	59080.44
59080.44		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<p><b>A.</b> Full Name (Last, First, Middle Initial) Delta Air Lines</p> <p>Mailing Address PO Box 20706</p> <p>City Atlanta State GA Zip Code 30320-6001</p> <p>Purpose of Disbursement Gen. fund. travel airfare</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-5296-10914-V</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="757.40"/></p> <p><b>[MEMO ITEM]</b> Subitemization of Mastercard</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Capital Grille</p> <p>Mailing Address 601 Pennsylvania Avenue NW</p> <p>City Washington State DC Zip Code 20004-2601</p> <p>Purpose of Disbursement Gen. fund. food &amp; bev.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-5298-10915-V</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="4816.55"/></p> <p><b>[MEMO ITEM]</b> Subitemization of Mastercard</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Federal Express</p> <p>Mailing Address PO Box 693</p> <p>City Memphis State TN Zip Code 38101-0693</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-5079-10916-V</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="24.49"/></p> <p><b>[MEMO ITEM]</b> Subitemization of Mastercard</p>

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b>	Full Name (Last, First, Middle Initial) MDC & Associates, Inc. <hr/> Mailing Address 1701 Esquire Lane <hr/> City Mclean State VA Zip Code 22101-4755 <hr/> Purpose of Disbursement Bookkeeping & compliance Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-9144-21875-e Date of Disbursement <table border="1" style="width: 100%;"> <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>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td>2500.00</td> </tr> </table> <hr/> Category/Type <table border="1" style="width: 100%; text-align: center;"> <tr> <td>001</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	1	0	2500.00	001
M	M	/	D	D	/	Y	Y	Y	Y															
0	3		2	6		2	0	1	0															
2500.00																								
001																								
<b>B.</b>	Full Name (Last, First, Middle Initial) Naples National Golf Club <hr/> Mailing Address 9325 Collier Boulevard <hr/> City Naples State FL Zip Code 34114-2543 <hr/> Purpose of Disbursement Gen. fund. event greens fees & catering Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-11546-21856-e Date of Disbursement <table border="1" style="width: 100%;"> <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>3</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td>2700.40</td> </tr> </table> <hr/> Category/Type <table border="1" style="width: 100%; text-align: center;"> <tr> <td>003</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	9		2	0	1	0	2700.40	003
M	M	/	D	D	/	Y	Y	Y	Y															
0	3		1	9		2	0	1	0															
2700.40																								
003																								
<b>C.</b>	Full Name (Last, First, Middle Initial) National Republican Congressional Committee <hr/> Mailing Address 320 1st Street SE <hr/> City Washington State DC Zip Code 20003-1838 <hr/> Purpose of Disbursement Gen. fund. travel Candidate Name National Republican Congressional Committee <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-7991-21858-e Date of Disbursement <table border="1" style="width: 100%;"> <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>3</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td>939.36</td> </tr> </table> <hr/> Category/Type <table border="1" style="width: 100%; text-align: center;"> <tr> <td>001</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	9		2	0	1	0	939.36	001
M	M	/	D	D	/	Y	Y	Y	Y															
0	3		1	9		2	0	1	0															
939.36																								
001																								

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<table border="1" style="width: 100%;"> <tr> <td style="font-size: 1.2em;"><b>6139.76</b></td> </tr> </table>	<b>6139.76</b>
<b>6139.76</b>		
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<table border="1" style="width: 100%; height: 20px;"> <tr> <td> </td> </tr> </table>	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 55 / 74

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) NJI New Media, LLC <hr/> Mailing Address 201 King Street <hr/> City Alexandria State VA Zip Code 22314-6600 <hr/> Purpose of Disbursement Website hosting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-11448-21859-e Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2010
	Amount of Each Disbursement this Period 250.00
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) NJI New Media, LLC <hr/> Mailing Address 201 King Street <hr/> City Alexandria State VA Zip Code 22314-6600 <hr/> Purpose of Disbursement Website maintenance and development Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-11448-21860-e Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2010
	Amount of Each Disbursement this Period 9350.00
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) NJI New Media, LLC <hr/> Mailing Address 201 King Street <hr/> City Alexandria State VA Zip Code 22314-6600 <hr/> Purpose of Disbursement Website maintenance and development Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-11448-21861-e Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2010
	Amount of Each Disbursement this Period 9350.00
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

18950.00

**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 56 / 74

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

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

NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b>	Full Name (Last, First, Middle Initial) NJI New Media, LLC <hr/> Mailing Address 201 King Street <hr/> City Alexandria State VA Zip Code 22314-6600 <hr/> Purpose of Disbursement Website maintenance and development Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-11448-21862-e Date of Disbursement MM / DD / YYYY 03 / 19 / 2010 <hr/> Amount of Each Disbursement this Period 9350.00
<b>B.</b>	Full Name (Last, First, Middle Initial) NJI New Media, LLC <hr/> Mailing Address 201 King Street <hr/> City Alexandria State VA Zip Code 22314-6600 <hr/> Purpose of Disbursement Website contribution processing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-11448-22137-e Date of Disbursement MM / DD / YYYY 03 / 31 / 2010 <hr/> Amount of Each Disbursement this Period 1223.50
<b>C.</b>	Full Name (Last, First, Middle Initial) Office of Tax and Revenue <hr/> Mailing Address PO Box 96385 <hr/> City Washington State DC Zip Code 20090-6385 <hr/> Purpose of Disbursement Payroll taxes Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-4077-21894-e Date of Disbursement MM / DD / YYYY 03 / 31 / 2010 <hr/> Amount of Each Disbursement this Period 165.00

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

**10738.50**

**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 57 / 74

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Reflections Properties	Transaction ID: SB21B-11115-21905-e Date of Disbursement
	Mailing Address 631 Pennsylvania Avenue SE	<input type="text" value="03"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>
	City Washington State DC Zip Code 20003-4303	Amount of Each Disbursement this Period
	Purpose of Disbursement Office rent and parking	<input type="text" value="2235.00"/>
	Candidate Name	<input type="text" value="001"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Reflections Properties	Transaction ID: SB21B-11115-21873-e Date of Disbursement
	Mailing Address 631 Pennsylvania Avenue SE	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City Washington State DC Zip Code 20003-4303	Amount of Each Disbursement this Period
	Purpose of Disbursement Office rent and parking	<input type="text" value="2235.00"/>
	Candidate Name	<input type="text" value="001"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Verizon	Transaction ID: SB21B-8324-21853-e Date of Disbursement
	Mailing Address PO Box 17577	<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City Baltimore State MD Zip Code 21297-0513	Amount of Each Disbursement this Period
	Purpose of Disbursement Telephone	<input type="text" value="836.09"/>
	Candidate Name	<input type="text" value="001"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Washington Courier	Transaction ID: SB21B-9969-21854-e Date of Disbursement
	Mailing Address 5520 Cherokee Avenue Suite 120	<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City Alexandria State VA Zip Code 22312-2319	Amount of Each Disbursement this Period
	Purpose of Disbursement Courier	<input type="text" value="20.74"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Washington Courier	Transaction ID: SB21B-9969-21874-e Date of Disbursement
	Mailing Address 5520 Cherokee Avenue Suite 120	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City Alexandria State VA Zip Code 22312-2319	Amount of Each Disbursement this Period
	Purpose of Disbursement Courier	<input type="text" value="20.74"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Wiley Rein LLP	Transaction ID: SB21B-3634-21857-e Date of Disbursement
	Mailing Address 1776 K Street NW	<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City Washington State DC Zip Code 20006-2304	Amount of Each Disbursement this Period
	Purpose of Disbursement Legal services	<input type="text" value="3000.00"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Whitaker Askew	Transaction ID: SB21B-3802-21884-e
	Mailing Address 3044 R Street NW	Date of Disbursement MM / DD / YYYY 03 / 15 / 2010
	City Washington State DC Zip Code 20007-2962	Amount of Each Disbursement this Period 1372.28
	Purpose of Disbursement Salary Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Whitaker Askew	Transaction ID: SB21B-3802-21885-e
	Mailing Address 3044 R Street NW	Date of Disbursement MM / DD / YYYY 03 / 31 / 2010
	City Washington State DC Zip Code 20007-2962	Amount of Each Disbursement this Period 1372.28
	Purpose of Disbursement Salary Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) John Criscuolo	Transaction ID: SB21B-10858-21886-e
	Mailing Address 1845 A Street SE	Date of Disbursement MM / DD / YYYY 03 / 15 / 2010
	City Washington State DC Zip Code 20003-1706	Amount of Each Disbursement this Period 190.72
	Purpose of Disbursement Salary Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2935.28
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) John Criscuolo	Transaction ID: SB21B-10858-21855-e Date of Disbursement																			
	Mailing Address 1845 A Street SE	<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>3</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	9		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	9		2	0	1	0												
	City Washington State DC Zip Code 20003-1706	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Mtg. exp. food & bev. Candidate Name	<table border="1"><tr><td>51.50</td></tr></table>	51.50																		
51.50																					
	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) ▼	<table border="1"><tr><td>001</td></tr><tr><td>Category/Type</td></tr></table>	001	Category/Type																	
001																					
Category/Type																					

B.	Full Name (Last, First, Middle Initial) John Criscuolo	Transaction ID: SB21B-10858-21887-e Date of Disbursement																			
	Mailing Address 1845 A Street SE	<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>3</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	1		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	1		2	0	1	0												
	City Washington State DC Zip Code 20003-1706	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Salary Candidate Name	<table border="1"><tr><td>190.73</td></tr></table>	190.73																		
190.73																					
	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) ▼	<table border="1"><tr><td>001</td></tr><tr><td>Category/Type</td></tr></table>	001	Category/Type																	
001																					
Category/Type																					

C.	Full Name (Last, First, Middle Initial) Johnny DeStefano	Transaction ID: SB21B-10021-21888-e Date of Disbursement																			
	Mailing Address 1000 New Jersey Ave., SE #1011	<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>3</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	5		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	5		2	0	1	0												
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Salary Candidate Name	<table border="1"><tr><td>597.05</td></tr></table>	597.05																		
597.05																					
	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) ▼	<table border="1"><tr><td>001</td></tr><tr><td>Category/Type</td></tr></table>	001	Category/Type																	
001																					
Category/Type																					

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>839.28</td></tr></table>	839.28
839.28		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 61 / 74

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Johnny DeStefano	Transaction ID: SB21B-10021-21889-e Date of Disbursement
	Mailing Address 1000 New Jersey Ave., SE #1011	<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement Salary Candidate Name	<input type="text" value="597.06"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Curtis Isakson	Transaction ID: SB21B-11116-21890-e Date of Disbursement
	Mailing Address 1201 N Garfield Street Apt. 618	<input type="text" value="03"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>
	City Arlington State VA Zip Code 22201-6812	Amount of Each Disbursement this Period
	Purpose of Disbursement Salary Candidate Name	<input type="text" value="438.84"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Curtis Isakson	Transaction ID: SB21B-11116-21891-e Date of Disbursement
	Mailing Address 1201 N Garfield Street Apt. 618	<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>
	City Arlington State VA Zip Code 22201-6812	Amount of Each Disbursement this Period
	Purpose of Disbursement Salary Candidate Name	<input type="text" value="438.84"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1474.74"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

PAGE 62 / 74

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Kevin Mcgrann	Transaction ID: SB21B-4052-21892-e Date of Disbursement
	Mailing Address 150 N Carolina Avenue SE	<input type="text" value="03"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>
	City Washington State DC Zip Code 20003-1841	Amount of Each Disbursement this Period
	Purpose of Disbursement Salary Candidate Name	<input type="text" value="824.64"/>
	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) ▼
		<input type="text" value="001"/> Category/Type

B.	Full Name (Last, First, Middle Initial) Kevin Mcgrann	Transaction ID: SB21B-4052-21893-e Date of Disbursement
	Mailing Address 150 N Carolina Avenue SE	<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>
	City Washington State DC Zip Code 20003-1841	Amount of Each Disbursement this Period
	Purpose of Disbursement Salary Candidate Name	<input type="text" value="824.64"/>
	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) ▼
		<input type="text" value="001"/> Category/Type

C.	Full Name (Last, First, Middle Initial) Donald Seymour	Transaction ID: SB21B-10022-21895-e Date of Disbursement
	Mailing Address 401 Holland Lane #609	<input type="text" value="03"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement Salary Candidate Name	<input type="text" value="1253.39"/>
	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) ▼
		<input type="text" value="001"/> Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2902.67"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 63 / 74

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.

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

Transaction ID: SB21B-10022-21896-e  
Date of Disbursement

Mailing Address 401 Holland Lane  
#609

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

City Alexandria State VA Zip Code 22314

Amount of Each Disbursement this Period

1253.38
---------

Purpose of Disbursement  
Salary

001
Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

1253.38
---------

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

129914.29
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)  
BASS VICTORY COMMITTEE

Transaction ID: SB23-4152-21843-e  
Date of Disbursement

Mailing Address PO Box 3451

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

City State Zip Code  
Concord NH 03302-3451

Amount of Each Disbursement this Period

Purpose of Disbursement  
Contribution

011  
Category/  
Type

5000.00
---------

Candidate Name  
Charles F. Bass

Office Sought:  House  Senate  President  
Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼  
State: NH District: 02

B.

Full Name (Last, First, Middle Initial)  
Berg for Congress

Transaction ID: SB23-11746-22136-e  
Date of Disbursement

Mailing Address PO Box 9394

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

City State Zip Code  
Fargo ND 58106-9394

Amount of Each Disbursement this Period

Purpose of Disbursement  
Contribution

011  
Category/  
Type

5000.00
---------

Candidate Name  
Richard Berg

Office Sought:  House  Senate  President  
Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼  
State: ID District:

C.

Full Name (Last, First, Middle Initial)  
Bucshon For Congress

Transaction ID: SB23-11556-21876-e  
Date of Disbursement

Mailing Address PO Box 250

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	1	0

City State Zip Code  
Newburgh IN 47629-0250

Amount of Each Disbursement this Period

Purpose of Disbursement  
Contribution

011  
Category/  
Type

5000.00
---------

Candidate Name  
Larry D Bucshon

Office Sought:  House  Senate  President  
Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼  
State: IN District: 08

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

15000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) Castle Campaign Fund <hr/> Mailing Address PO Box 133 <hr/> City Wilmington State DE Zip Code 19899-0133 <hr/> Purpose of Disbursement Contribution Candidate Name Michael N Castle Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: DE District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-11567-21883-e <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 1 0
	Amount of Each Disbursement this Period 5000.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Djou For Hawaii <hr/> Mailing Address PO Box 235280 <hr/> City Honolulu State HI Zip Code 96823-3504 <hr/> Purpose of Disbursement Special General Candidate Name Charles Kong Djou Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: HI District: 01 Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special	<b>Transaction ID:</b> SB23-11550-21864-e <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 1 0
	Amount of Each Disbursement this Period 5000.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special
<b>C.</b> Full Name (Last, First, Middle Initial) Dold For Congress <hr/> Mailing Address PO Box 8145 <hr/> City Northfield State IL Zip Code 60093-8145 <hr/> Purpose of Disbursement Contribution Candidate Name Robert James Dold, Jr. Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-11470-21877-e <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 1 0
	Amount of Each Disbursement this Period 5000.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

15000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) Fitzpatrick for Congress <hr/> Mailing Address 115 N Broad Street <hr/> City Doylestown State PA Zip Code 18901-3748 <hr/> Purpose of Disbursement Contribution Candidate Name Michael G Fitzpatrick Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 08 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-3910-21868-e Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 1 0
	Amount of Each Disbursement this Period 5000.00 Category/Type: 011
<b>B.</b> Full Name (Last, First, Middle Initial) Friends Of Frank Guinta <hr/> Mailing Address PO Box 877 <hr/> City Manchester State NH Zip Code 03105-0877 <hr/> Purpose of Disbursement Contribution Candidate Name Frank Guinta Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 01 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-11745-22135-e Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 1 0
	Amount of Each Disbursement this Period 5000.00 Category/Type: 011
<b>C.</b> Full Name (Last, First, Middle Initial) Friends of Roy Blunt <hr/> Mailing Address PO Box 50100 <hr/> City Springfield State MO Zip Code 65805-0100 <hr/> Purpose of Disbursement Contribution Candidate Name Roy Blunt Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-11066-21870-e Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 1 0
	Amount of Each Disbursement this Period 5000.00 Category/Type: 011

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	15000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Griffith For Congress	Transaction ID: SB23-11560-21880-e Date of Disbursement																			
	Mailing Address PO Box 2916	<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>3</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	1		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	1		2	0	1	0												
	City Huntsville State AL Zip Code 35804-2916	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution	<table border="1"><tr><td>5000.00</td></tr></table>	5000.00																		
5000.00																					
	Candidate Name Dr. Parker Griffith	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 05	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) House Conservatives Fund	Transaction ID: SB23-9779-21847-e Date of Disbursement																			
	Mailing Address 324 2nd Street SE	<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>3</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	9		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	9		2	0	1	0												
	City Washington State DC Zip Code 20003-1901	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution	<table border="1"><tr><td>5000.00</td></tr></table>	5000.00																		
5000.00																					
	Candidate Name	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) JIM GERLACH FOR CONGRESS COMMITTEE	Transaction ID: SB23-3912-21848-e Date of Disbursement																			
	Mailing Address PO Box 87	<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>3</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	9		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	9		2	0	1	0												
	City Uwchland State PA Zip Code 19480-0087	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution	<table border="1"><tr><td>5000.00</td></tr></table>	5000.00																		
5000.00																					
	Candidate Name Jim Gerlach	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 06	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>15000.00</td></tr></table>	15000.00
15000.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 68 / 74

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) Jim Renacci For Congress <hr/> Mailing Address 150 Smokerise Drive <hr/> City Wadsworth State OH Zip Code 44281-8701 <hr/> Purpose of Disbursement Contribution Candidate Name James B Renacci <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 16 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-11565-21882-e Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2010
	Amount of Each Disbursement this Period 5000.00
	Category/Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Jon Barela For Congress <hr/> Mailing Address PO Box 92413 <hr/> City Albuquerque State NM Zip Code 87199-2413 <hr/> Purpose of Disbursement Contribution Candidate Name Jon Barela <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 01 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-11552-21865-e Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2010
	Amount of Each Disbursement this Period 5000.00
	Category/Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Latham for Congress <hr/> Mailing Address PO Box 71 <hr/> City Clarion State IA Zip Code 50525-0071 <hr/> Purpose of Disbursement Contribution Candidate Name Thomas P Latham <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 04 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-8616-21867-e Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2010
	Amount of Each Disbursement this Period 5000.00
	Category/Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

15000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) McHenry for Congress	Transaction ID: SB23-9488-21869-e Date of Disbursement
	Mailing Address PO Box 360	<input type="text" value="03"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City Cherryville State NC Zip Code 28021-0360	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="5000.00"/>
	Candidate Name Timothy McHenry	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 10	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Morgan Griffith for Congress	Transaction ID: SB23-11557-21878-e Date of Disbursement
	Mailing Address PO Box 361	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City Christiansburg State VA Zip Code 24068-0361	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="5000.00"/>
	Candidate Name Morgan Griffith	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 09	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Republican Main Street Partnership PAC	Transaction ID: SB23-10195-21846-e Date of Disbursement
	Mailing Address 2201 Wisconsin Avenue NW Suite 320	<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City Washington State DC Zip Code 20007-4105	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="5000.00"/>
	Candidate Name	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Richard Hanna for Congress	Transaction ID: SB23-10735-21849-e
	Mailing Address 2308 Genesee Street	Date of Disbursement 03 / 19 / 2010
	City Utica State NY Zip Code 13502-5810	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Contribution	011 Category/Type
	Candidate Name Richard Hanna	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 24	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Richard Hanna for Congress	Transaction ID: SB23-10735-21879-e
	Mailing Address 2308 Genesee Street	Date of Disbursement 03 / 19 / 2010
	City Utica State NY Zip Code 13502-5810	Amount of Each Disbursement this Period -5000.00
	Purpose of Disbursement Void lost check, 2/2010	011 Category/Type
	Candidate Name Richard Hanna	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 24	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Scott Garrett for Congress	Transaction ID: SB23-9886-21844-e
	Mailing Address PO Box 905	Date of Disbursement 03 / 19 / 2010
	City Newton State NJ Zip Code 07860-0905	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Contribution	011 Category/Type
	Candidate Name Scott Garrett	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 05	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Tim Burns For Congress	Transaction ID: SB23-11548-21863-e Date of Disbursement
	Mailing Address PO Box 4483	<input type="text" value="03"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City Eighty Four State PA Zip Code 15330-0483	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="5000.00"/>
	Candidate Name Timothy Raymond Burns	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 12	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special

B.	Full Name (Last, First, Middle Initial) Tim Burns For Congress	Transaction ID: SB23-11548-21871-e Date of Disbursement
	Mailing Address PO Box 4483	<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2010"/>
	City Eighty Four State PA Zip Code 15330-0483	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="5000.00"/>
	Candidate Name Timothy Raymond Burns	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 12	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Tim Burns For Congress	Transaction ID: SB23-11548-21872-e Date of Disbursement
	Mailing Address PO Box 4483	<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2010"/>
	City Eighty Four State PA Zip Code 15330-0483	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="5000.00"/>
	Candidate Name Timothy Raymond Burns	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 12	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Tom Ganley for Congress	Transaction ID: SB23-11563-21881-e Date of Disbursement																			
	Mailing Address PO Box 41331	<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>3</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	1		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	1		2	0	1	0												
	City Brecksville State OH Zip Code 44141-0331	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution	<table border="1"><tr><td>5000.00</td></tr></table>	5000.00																		
5000.00																					
	Candidate Name Thomas D Ganley	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 13	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) Tom Reed For Congress	Transaction ID: SB23-11554-21866-e Date of Disbursement																			
	Mailing Address 99 W 1st Street	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	3		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	3		2	0	1	0												
	City Corning State NY Zip Code 14830-2557	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution	<table border="1"><tr><td>5000.00</td></tr></table>	5000.00																		
5000.00																					
	Candidate Name Thomas W Reed, II	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 29	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) Tuesday Group Political Action Committee	Transaction ID: SB23-10095-21845-e Date of Disbursement																			
	Mailing Address PO Box 40385	<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>3</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	9		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	9		2	0	1	0												
	City Washington State DC Zip Code 20016-0385	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution	<table border="1"><tr><td>5000.00</td></tr></table>	5000.00																		
5000.00																					
	Candidate Name	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>15000.00</td></tr></table>	15000.00
15000.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td> </td></tr></table>	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 73 / 74

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

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

NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.

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

Transaction ID: SB23-11436-22134-e  
Date of Disbursement

Mailing Address 324 E Stonewater Court

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

City Eagle State ID Zip Code 83616-3872

Amount of Each Disbursement this Period

5000.00
---------

Purpose of Disbursement  
Contribution

011
Category/ Type

Candidate Name  
Vaughn L Ward

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: ID District: 01

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

5000.00
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TOTAL This Period (last page this line number only) ..... ►

13000.00
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**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 74 / 74

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

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) KPMG PARTNERS/PRINCIPALS & EMPLOYEES PAC Mailing Address PO Box 18254 City Washington State DC Zip Code 20036-8254 Purpose of Disbursement Void lost check, 6/2009 Candidate Name	Transaction ID: SB28c-7213-21850-e Date of Disbursement 03 / 19 / 2010 Amount of Each Disbursement this Period -5000.00
<b>B.</b> Full Name (Last, First, Middle Initial) KPMG PARTNERS/PRINCIPALS & EMPLOYEES PAC Mailing Address PO Box 18254 City Washington State DC Zip Code 20036-8254 Purpose of Disbursement Recut of 2009 contribution refund Candidate Name	Transaction ID: SB28c-7213-21851-e Date of Disbursement 03 / 19 / 2010 Amount of Each Disbursement this Period 5000.00

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

0.00

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

0.00