

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
FREEDOM PROJECT; THE

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	4

D	D
3	0

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	443632.37									
(c) Total Receipts (from Line 19)	63964.36	634354.36								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	507596.73	948252.78								
7. Total Disbursements (from Line 31)	44169.02	484825.07								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	463427.71	463427.71								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
FREEDOM PROJECT; THE

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	4

D	D
3	0

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)	22250.00	147050.00
(ii) Unitemized	952.31	7542.31
(iii) TOTAL (add Lines 11(a)(i) and (ii)	23202.31	154592.31
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	39500.00	478500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	62702.31	633092.31
12. Transfers From Affiliated/Other Party Committees	1262.05	1262.05
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))	63964.36	634354.36
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	63964.36	634354.36

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	34669.02	240115.07
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	34669.02	240115.07
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9500.00	244560.00
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))..	44169.02	484825.07
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	44169.02	484825.07

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)	62702.31	633092.31
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	62702.31	633092.31
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	34669.02	240115.07
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	34669.02	240115.07

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

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

FOR LINE NUMBER: PAGE 6 / 28
(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)
Dennis Albaugh

Mailing Address 940 Cape Marco Drive
Apt. 2506

City State Zip Code
Marco Island FL 34145-6643

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

Name of Employer Occupation
Albaugh, Inc. Chairman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
04 / 30 / 2010

Transaction ID: SA11AI-10952-22189-c

Amount of Each Receipt this Period
3000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Samuel Baptista

Mailing Address 2015 Lorraine Avenue

City State Zip Code
Mc Lean VA 22101-5331

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

Name of Employer Occupation
The Baptista Group President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
MM / DD / YYYY
04 / 30 / 2010

Transaction ID: SA11AI-5597-22193-c

Amount of Each Receipt this Period
1500.00

Contribution

C. Full Name (Last, First, Middle Initial)
Kristin Barens

Mailing Address 18702 Patrician Drive

City State Zip Code
Villa Park CA 92861-4212

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

Name of Employer Occupation
Mullin Consulting Insurance Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
04 / 01 / 2010

Transaction ID: SA11AI-11142-22204-c

Amount of Each Receipt this Period
1000.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► 5500.00

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 / 28
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

<p>A. Full Name (Last, First, Middle Initial) William Kirk Blalock</p> <p>Mailing Address 609 W Braddock Road</p> <p>City State Zip Code Alexandria VA 22302-4104</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Fierce, Isakowitz & Blalock Partner</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1000.00</p>	<p>Date of Receipt 04 / 30 / 2010</p> <p>Transaction ID: SA11AI-3825-22185-c</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>Contribution</p>
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<p>B. Full Name (Last, First, Middle Initial) Jeff Borysiewicz</p> <p>Mailing Address 7407 Park Springs Circle</p> <p>City State Zip Code Orlando FL 32835-2620</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Corona Cigar Company Premium Cigar Retailer</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 500.00</p>	<p>Date of Receipt 04 / 28 / 2010</p> <p>Transaction ID: SA11AI-11797-22226-c</p> <p>Amount of Each Receipt this Period 500.00</p> <p>Contribution</p>
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<p>C. Full Name (Last, First, Middle Initial) Michael Chappell</p> <p>Mailing Address 1155 F Street NW Suite 950</p> <p>City State Zip Code Washington DC 20004-1336</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Fierce, Isakowitz & Blalock Partner</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1000.00</p>	<p>Date of Receipt 04 / 30 / 2010</p> <p>Transaction ID: SA11AI-11756-22184-c</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>Contribution</p>
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SUBTOTAL of Receipts This Page (optional)	2500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 28
	<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) Stephen Clark		Date of Receipt
	Mailing Address 9273 Lerwick Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 04 / 30 / 2010
	City	State	Zip Code
	Dublin	OH	43017-9492
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI-4486-22192-c
Name of Employer Clark & Associates		Occupation President	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"/> 500.00
			Contribution

B.	Full Name (Last, First, Middle Initial) Rodger Currie		Date of Receipt
	Mailing Address 8201 Burning Tree Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 04 / 14 / 2010
	City	State	Zip Code
	Bethesda	MD	20817-2908
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI-11784-22213-c
Name of Employer Amgen, Inc.		Occupation Attorney	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"/> 1000.00
			Contribution

C.	Full Name (Last, First, Middle Initial) Carlyle Eubank		Date of Receipt
	Mailing Address 3350 Calle Bonita		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 04 / 16 / 2010
	City	State	Zip Code
	Santa Ynez	CA	93460-9309
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI-11787-22216-c
Name of Employer Self		Occupation Investments	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"/> 1000.00
			Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 2500.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 / 28
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<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) Brian Gaston		Date of Receipt
	Mailing Address 919 Bernard Street		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Alexandria	VA	22314-1209
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer The Glover Park Group		Occupation Managing Director	Transaction ID: SA11AI-6515-22194-c Amount of Each Receipt this Period <input type="text" value="1500.00"/> Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="1500.00"/>	

B.	Full Name (Last, First, Middle Initial) Kenneth Kies		Date of Receipt
	Mailing Address 6109 Franklin Park Road		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Mclean	VA	22101-4214
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Federal Policy Group		Occupation Managing Director	Transaction ID: SA11AI-6951-22187-c Amount of Each Receipt this Period <input type="text" value="5000.00"/> Contribution
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"/>	

C.	Full Name (Last, First, Middle Initial) Jon Shaver		Date of Receipt
	Mailing Address 5533 Lago Vista Lane		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Frisco	TX	75034-2236
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Performant Financial Corp.		Occupation Chairman	Transaction ID: SA11AI-8659-22195-c Amount of Each Receipt this Period <input type="text" value="5000.00"/> Contribution
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"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="11500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 10 / 28	
	(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

A.	Full Name (Last, First, Middle Initial) Brett Tibbitts		Date of Receipt	
	Mailing Address PO Box 679		M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11AI-11786-22215-c
	Somis	CA	93066-0679	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
	C		250.00	
Name of Employer Self-employed		Occupation		
		Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Contribution		
		Aggregate Year-to-Date ▼		
		250.00		

SUBTOTAL of Receipts This Page (optional)	250.00
TOTAL This Period (last page this line number only)	22250.00

**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 11 / 28
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" 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) Christopher Cox		Date of Receipt
	Mailing Address 2205 Windsor Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 4 / 2 8 / 2 0 1 0
	City	State	Zip Code
	Alexandria	VA	22307-1019
	FEC ID number of contributing federal political committee.		Transaction ID: SA12-4039-22203-P
		Amount of Each Receipt this Period	<input type="text"/> 625.00
Name of Employer Navigators		Occupation Principal	[MEMO ITEM] Transfer Subitemization of Americans For a Conser- vative Course
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 1625.00	

B.	Full Name (Last, First, Middle Initial) James Ervin		Date of Receipt
	Mailing Address 106 N Carolina Avenue SE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 4 / 2 8 / 2 0 1 0
	City	State	Zip Code
	Washington	DC	20003-1841
	FEC ID number of contributing federal political committee.		Transaction ID: SA12-5439-22203-P
		Amount of Each Receipt this Period	<input type="text"/> 833.33
Name of Employer Ervin Technical Assoc.		Occupation President	[MEMO ITEM] Transfer Subitemization of Americans For a Conser- vative Course
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 833.33	

C.	Full Name (Last, First, Middle Initial) James Kravotil		Date of Receipt
	Mailing Address 3300 N Vermont Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 4 / 2 8 / 2 0 1 0
	City	State	Zip Code
	Arlington	VA	22207-4469
	FEC ID number of contributing federal political committee.		Transaction ID: SA12-11758-22203-P
		Amount of Each Receipt this Period	<input type="text"/> 625.00
Name of Employer UST		Occupation Sr. Vice President	[MEMO ITEM] Transfer Subitemization of Americans For a Conser- vative Course
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 625.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 0.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 28

(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)
Jeffrey Walter

Mailing Address PO Box 7061

City State Zip Code
Alexandria VA 22307-0061

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

Name of Employer Occupation
The Walter Group Principal

Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 656.25

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 0

Transaction ID: SA12-11389-22203-P

Amount of Each Receipt this Period
656.25

[MEMO ITEM]
Transfer Subitemization
of Americans For a Conser-
vative Course

B.

Full Name (Last, First, Middle Initial)
Americans For a Conservative Course

Mailing Address 1701 Esquire Lane

City State Zip Code
McLean VA 22101-4755

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1262.05

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 0

Transaction ID: SA12-10737-22203-c

Amount of Each Receipt this Period
1262.05

Transfer from affiliated
committee

SUBTOTAL of Receipts This Page (optional)

1262.05

TOTAL This Period (last page this line number only)

1262.05

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 28
(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 Family Mutual Insurance Company Federal Pac (amfam Pac)

Mailing Address 6000 American Parkway

City Madison State WI Zip Code 53783-0001

FEC ID number of contributing federal political committee. **C** C00354290

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 04 / 30 / 2010
Transaction ID: SA11C-10034-22201-c
Amount of Each Receipt this Period: 2500.00
Contribution

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

Mailing Address 1201 L Street NW

City Washington State DC Zip Code 20005-4024

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 04 / 30 / 2010
Transaction ID: SA11C-3965-22197-c
Amount of Each Receipt this Period: 2500.00
Contribution

C. Full Name (Last, First, Middle Initial)
AMERICAN INSURANCE ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1130 Connecticut Avenue NW
Suite 1000

City Washington State DC Zip Code 20036-3910

FEC ID number of contributing federal political committee. **C** C00103143

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 04 / 30 / 2010
Transaction ID: SA11C-3970-22186-c
Amount of Each Receipt this Period: 2000.00
Contribution

SUBTOTAL of Receipts This Page (optional) ► 7000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 28
	<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) Association For Advanced Life Underwriting Pac (aalu Pac)		Date of Receipt
	Mailing Address 2901 Telestar Court Floor 4		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Falls Church	VA	22042-1260
	FEC ID number of contributing federal political committee.	<input type="text" value="C00447565"/>	Transaction ID: SA11C-11135-22200-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.	Full Name (Last, First, Middle Initial) CAPITAL ONE FINANCIAL CORP. ASSOC. POLITICAL FUND		Date of Receipt
	Mailing Address 1680 Capital One Drive		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Mclean	VA	22102-3407
	FEC ID number of contributing federal political committee.	<input type="text" value="C00326595"/>	Transaction ID: SA11C-4267-22188-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

C.	Full Name (Last, First, Middle Initial) INDEPENDENT INSURANCE AGENTS OF AMERICA POLITICAL ACTION COMMITTEE (INSURPAC)		Date of Receipt
	Mailing Address 412 1st Street SE Suite 300		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Washington	DC	20003-1804
	FEC ID number of contributing federal political committee.	<input type="text" value="C00022343"/>	Transaction ID: SA11C-4035-22202-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

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="10000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 28
	<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) National Association Of Professional Surplus Lines Offices (NAPSLO) PAC	Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 1 0
	Mailing Address 805 15th Street NW Suite 700	Transaction ID: SA11C-10903-22196-c
	City Washington State DC Zip Code 20005-2282	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C C00417634	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.	Full Name (Last, First, Middle Initial) PINNACLE WEST CORPORATION PAC	Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 1 0
	Mailing Address 400 N 5th Street	Transaction ID: SA11C-4161-22199-c
	City Phoenix State AZ Zip Code 85004-3902	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C C00015933	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	

C.	Full Name (Last, First, Middle Initial) Raytheon Company Political Action Committee	Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 1 0
	Mailing Address 1100 Wilson Boulevard Suite 1500	Transaction ID: SA11C-10623-22191-c
	City Arlington State VA Zip Code 22209-2270	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C C00097568	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	

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 16 / 28
(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)
Supervalu Inc Political Action Committee, (valupac)

Mailing Address PO Box 20

City State Zip Code
Boise ID 83726-0020

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
04 / 30 / 2010

Transaction ID: SA11C-4154-22198-c

Amount of Each Receipt this Period
2500.00

Contribution

B.

Full Name (Last, First, Middle Initial)
VERIZON COMMUNICATION INC GOOD GOVT CLUB

Mailing Address 1300 I Street NW
Suite 400-WEST

City State Zip Code
Washington DC 20005-3314

FEC ID number of contributing federal political committee. **C** C00186288

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
04 / 30 / 2010

Transaction ID: SA11C-3964-22190-c

Amount of Each Receipt this Period
5000.00

Contribution

C.

Full Name (Last, First, Middle Initial)
WENDY'S ARBY'S GROUP INC. POLITICAL ACTION COMMITTEE

Mailing Address 4288 W Dublin Granville Road

City State Zip Code
Dublin OH 43017-1442

FEC ID number of contributing federal political committee. **C** C00369090

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
04 / 01 / 2010

Transaction ID: SA11C-4046-22143-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)	▶	39500.00

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 18 / 28

<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-10391-22157-e
	Mailing Address 1445 Laughlin Avenue Suite A	Date of Disbursement MM / DD / YYYY 04 / 30 / 2010
	City Mclean State VA Zip Code 22101-5737	Amount of Each Disbursement this Period 1525.29
	Purpose of Disbursement Payroll taxes 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) Chain Bridge Bank	Transaction ID: SB21B-10391-22231-e
	Mailing Address 1445 Laughlin Avenue Suite A	Date of Disbursement MM / DD / YYYY 04 / 30 / 2010
	City Mclean State VA Zip Code 22101-5737	Amount of Each Disbursement this Period 66.80
	Purpose of Disbursement Bank fee 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) Clark, Schaefer, Hackett & Company	Transaction ID: SB21B-6282-22158-e
	Mailing Address 160 N Breiel Boulevard	Date of Disbursement MM / DD / YYYY 04 / 15 / 2010
	City Middletown State OH Zip Code 45042-3806	Amount of Each Disbursement this Period 65.00
	Purpose of Disbursement Payroll processing Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1657.09
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<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) Clark, Schaefer, Hackett & Company <hr/> Mailing Address 160 N Breiel Boulevard <hr/> City Middletown State OH Zip Code 45042-3806 Purpose of Disbursement Payroll 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-6282-22159-e Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 65.00
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
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-8564-22161-e Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 1 0
	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) ▼
C. Full Name (Last, First, Middle Initial) Department of Employment Services <hr/> Mailing Address PO Box 96664 <hr/> City Washington State DC Zip Code 20090-6664 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-4076-22165-e Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 594.00
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

1007.58

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 20 / 28

<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) Direct TV <hr/> Mailing Address PO Box 60036 <hr/> City Los Angeles State CA Zip Code 90060-0036 <hr/> Purpose of Disbursement Satellite TV 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-11147-22168-e Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 9 / 2 0 1 0
	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. 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-9144-22169-e Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 1 0
	Amount of Each Disbursement this Period 2500.00
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) 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-11448-22175-e Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 1 0
	Amount of Each Disbursement this Period 9600.00
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

12172.58

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 21 / 28

<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) NJi New Media, LLC	Transaction ID: SB21B-11448-22230-e
	Mailing Address 201 King Street	Date of Disbursement MM / DD / YYYY 04 / 30 / 2010
	City Alexandria State VA Zip Code 22314-6600	Amount of Each Disbursement this Period 467.50
	Purpose of Disbursement Website contribution processing Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Office of Tax and Revenue	Transaction ID: SB21B-4077-22176-e
	Mailing Address PO Box 96385	Date of Disbursement MM / DD / YYYY 04 / 30 / 2010
	City Washington State DC Zip Code 20090-6385	Amount of Each Disbursement this Period 165.00
	Purpose of Disbursement Payroll taxes 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) Reflections Properties	Transaction ID: SB21B-11115-22177-e
	Mailing Address 631 Pennsylvania Avenue SE	Date of Disbursement MM / DD / YYYY 04 / 29 / 2010
	City Washington State DC Zip Code 20003-4303	Amount of Each Disbursement this Period 2300.00
	Purpose of Disbursement Office rent and parking Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	2932.50
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 22 / 28

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial) Verizon <hr/> Mailing Address PO Box 17577 <hr/> City Baltimore State MD Zip Code 21297-0513 <hr/> Purpose of Disbursement Telephone 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-8324-22181-e Date of Disbursement MM / DD / YYYY 04 / 29 / 2010
	Amount of Each Disbursement this Period 851.46
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Washington Courier <hr/> Mailing Address 5520 Cherokee Avenue Suite 120 <hr/> City Alexandria State VA Zip Code 22312-2319 <hr/> Purpose of Disbursement Courier 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-9969-22182-e Date of Disbursement MM / DD / YYYY 04 / 16 / 2010
	Amount of Each Disbursement this Period 107.54
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Wiley Rein LLP <hr/> Mailing Address 1776 K Street NW <hr/> City Washington State DC Zip Code 20006-2304 <hr/> Purpose of Disbursement Legal services 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-3634-22183-e Date of Disbursement MM / DD / YYYY 04 / 16 / 2010
	Amount of Each Disbursement this Period 3000.00
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

3959.00

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 23 / 28

<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-3802-22152-e
	Mailing Address 3044 R Street NW	Date of Disbursement 04 / 15 / 2010
	City Washington State DC Zip Code 20007-2962	Amount of Each Disbursement this Period 1372.29
	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-3802-22153-e
	Mailing Address 3044 R Street NW	Date of Disbursement 04 / 30 / 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-10858-22163-e
	Mailing Address 1845 A Street SE	Date of Disbursement 04 / 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) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	2935.29
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

<p>A. Full Name (Last, First, Middle Initial) John Criscuolo</p> <p>Mailing Address 1845 A Street SE</p> <p>City Washington State DC Zip Code 20003-1706</p> <p>Purpose of Disbursement Mtg. exp. food & bev. Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-10858-22162-e Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <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="187.89"/></p>
<p>B. Full Name (Last, First, Middle Initial) John Criscuolo</p> <p>Mailing Address 1845 A Street SE</p> <p>City Washington State DC Zip Code 20003-1706</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-10858-22164-e Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <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="190.72"/></p>
<p>C. Full Name (Last, First, Middle Initial) Johnny DeStefano</p> <p>Mailing Address 1000 New Jersey Ave., SE #1011</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-10021-22166-e Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <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="597.05"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="975.66"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

<p>A. Full Name (Last, First, Middle Initial) Johnny DeStefano</p> <p>Mailing Address 1000 New Jersey Ave., SE #1011</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-10021-22167-e Date of Disbursement 04 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 597.06</p> <p>001 Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Curtis Isakson</p> <p>Mailing Address 1201 N Garfield Street Apt. 618</p> <p>City Arlington State VA Zip Code 22201-6812</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-11116-22171-e Date of Disbursement 04 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 438.84</p> <p>001 Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Curtis Isakson</p> <p>Mailing Address 1201 N Garfield Street Apt. 618</p> <p>City Arlington State VA Zip Code 22201-6812</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-11116-22172-e Date of Disbursement 04 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 438.84</p> <p>001 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1474.74

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

<p>A. Full Name (Last, First, Middle Initial) Kevin Mcgrann</p> <p>Mailing Address 150 N Carolina Avenue SE</p> <p>City Washington State DC Zip Code 20003-1841</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-4052-22173-e Date of Disbursement 04 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 824.65</p> <p>001 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Kevin Mcgrann</p> <p>Mailing Address 150 N Carolina Avenue SE</p> <p>City Washington State DC Zip Code 20003-1841</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-4052-22174-e Date of Disbursement 04 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 824.64</p> <p>001 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Donald Seymour</p> <p>Mailing Address 401 Holland Lane #609</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-10022-22179-e Date of Disbursement 04 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 1253.39</p> <p>001 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2902.68

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 27 / 28

<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 <hr/> Mailing Address 401 Holland Lane #609 <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Mtg. exp. food & bev. Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-10022-22178-e Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 1 0
	Amount of Each Disbursement this Period 831.11
B. Full Name (Last, First, Middle Initial) Donald Seymour <hr/> Mailing Address 401 Holland Lane #609 <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Salary 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-10022-22180-e Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 1253.39

SUBTOTAL of Disbursements This Page (optional) ▶

2084.50

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

34669.02

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial) Bernard Sansaricq For Congress Campaign Committee <hr/> Mailing Address PO Box 822116 <hr/> City State Zip Code Pembroke Pines FL 33082-2116 <hr/> Purpose of Disbursement Contribution <input type="checkbox"/> 011 Candidate Name Bernard Sansaricq <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: FL District: 23	Transaction ID: SB23-11754-22160-e Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 9 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 4500.00
	B. Full Name (Last, First, Middle Initial) Hawaii Republican Party <hr/> Mailing Address 725 Kapiolani Boulevard Suite 105 <hr/> City State Zip Code Honolulu HI 96813-6027 <hr/> Purpose of Disbursement Contribution <input type="checkbox"/> 011 Candidate Name Hawaii Republican Party <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:

SUBTOTAL of Disbursements This Page (optional) ►

9500.00

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

9500.00