

30011 Ivy Glenn Drive, Suite 223

Laguna Niguel CA 92677

FEC ID No. C00437822

24-Hour Notice 48-Hour Notice

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 1 / 3
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Campaign Fund	FEC IDENTIFICATION NUMBER C C00437822
Check if <input type="checkbox"/> 24-hour notice <input checked="" type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Fullfillment Management Svc

Date
M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 0 8

Mailing Address
2070 Chain Bridge Rd # 520

Amount
858.18

City State Zip Code
Vienna VA 22182

Office Sought: House State: _____
 Senate District: _____
 Presidential

Purpose of Expenditure
Folding/Inserting Ma-
ll

Category/
Type 003

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:
John McCain

Disbursement For: Primary General 2008

Calendar Year-To-Date Per Election
for Office Sought 272283.58

Transaction ID: EDT.E.56

Full Name (Last, First, Middle, Initial) of Payee
Response Dynamics, Inc.

Date
M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 0 8

Mailing Address
2070 Chain Bridge Rd # 520

Amount
1554.55

City State Zip Code
Vienna VA 22182

Office Sought: House State: _____
 Senate District: _____
 Presidential

Purpose of Expenditure
Mailing Services

Category/
Type 003

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:
John McCain

Disbursement For: Primary General 2008

Calendar Year-To-Date Per Election
for Office Sought 272283.58

Transaction ID: EDT.E.57

(a) SUBTOTAL of Itemized Independent Expenditures	2412.73
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

James Lacy
Signature

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 8

24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

FEC ID No.

24-Hour Notice 48-Hour Notice

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 2 / 3
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
National Campaign Fund

FEC IDENTIFICATION NUMBER
C C00437822

Check if 24-hour notice 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

The Best List, Inc.

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 0 8

Amount

810.45

Mailing Address
2070 Chain Bridge Rd. # 520

City State Zip Code
Vienna VA 22182

Office Sought: House State: _____
 Senate District: _____
 Presidential

Purpose of Expenditure
Lists

Category/
Type 003

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:
John McCain

Disbursement For: Primary General 2008
 Other (specify) : _____

Calendar Year-To-Date Per Election
for Office Sought 272283.58

Transaction ID: EDT.E.54

Full Name (Last, First, Middle, Initial) of Payee
Response Dynamics, Inc.

Date

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

Amount

3710.69

Mailing Address
2070 Chain Bridge Road Ste 520

City State Zip Code
Vienna VA 22182

Office Sought: House State: _____
 Senate District: _____
 Presidential

Purpose of Expenditure
Postage

Category/
Type 003

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:
John McCain

Disbursement For: Primary General 2008
 Other (specify) : _____

Calendar Year-To-Date Per Election
for Office Sought 272283.58

Transaction ID: EDT.E.58

(a) SUBTOTAL of Itemized Independent Expenditures

4521.14

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures

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James Lacy

Signature

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ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 3 / 3
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Campaign Fund		FEC IDENTIFICATION NUMBER C C00437822	
Check if <input type="checkbox"/> 24-hour notice <input checked="" type="checkbox"/> 48-hour notice		Date M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 8	
Full Name (Last, First, Middle, Initial) of Payee Mid America Printing		Amount 8053.08	
Mailing Address 2070 Chain Bridge Rd # 520		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
City Vienna	State VA	Zip Code 22182	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Purpose of Expenditure Printing		Category/ Type 003	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2008 <input type="checkbox"/> Other (specify) : _____
Name of Federal Candidate supported or Opposed by expenditure: John McCain		Transaction ID: EDT.E.59	
Calendar Year-To-Date Per Election for Office Sought		272283.58	

(a) SUBTOTAL of Itemized Independent Expenditures	8053.08
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	14986.95

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

James Lacy
Signature

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0 6 / 3 0 / 2 0 0 8