



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**ROAD TO FREEDOM POLITICAL ACTION COMMITTEE**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2011"/>	<input type="text" value="15172.83"/>	<input type="text" value="15172.83"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="3402.60"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="40976.90"/>	<input type="text" value="90476.90"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="44379.50"/>	<input type="text" value="105649.73"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="31733.33"/>	<input type="text" value="93003.56"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="12646.17"/>	<input type="text" value="12646.17"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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

**ROAD TO FREEDOM POLITICAL ACTION COMMITTEE**

Report Covering the Period: From:  /  /  To:  /  /

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).....	7750.00	12750.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	7750.00	12750.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	33000.00	77500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	40750.00	90250.00
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.....	226.90	226.90
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 Transfers (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))..... ▶	40976.90	90476.90
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	40976.90	90476.90

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	19934.85	30705.08
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	19934.85	30705.08
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	11798.48	62298.48
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (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	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated 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)) ..	31733.33	93003.56
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	31733.33	93003.56

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	40750.00	90250.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	40750.00	90250.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	19934.85	30705.08
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	19934.85	30705.08

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

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

FOR LINE NUMBER: PAGE 6 OF 18  
(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)  
**ROAD TO FREEDOM POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. Richard Hohlt**

Mailing Address 7901 Kent Road

City Alexandria State VA Zip Code 22308

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

Name of Employer HOHLT & ASSOC. Occupation President

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 29 / 2011  
**Transaction ID : SA11AI.4399**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**B. Charles Landgraf**

Mailing Address 7303 Peter Pl.

City McLean State VA Zip Code 22102

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

Name of Employer Dewey & LeBoeuf LLP Occupation Partner

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2011  
**Transaction ID : SA11AI.4416**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 207 Masion Dr

City Alexandria State VA Zip Code 22202

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 11 / 2011  
**Transaction ID : SA11AI.4380**

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	7750.00

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

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

FOR LINE NUMBER: PAGE 7 OF 18  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**ROAD TO FREEDOM POLITICAL ACTION COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN RESORT DEVELOPMENT ASSOCIATION POLITICAL ACTION COMMITTEE (ARDA-PAC)

Mailing Address 1201 15TH STREET NW 4TH FLOOR

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00129932

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 16 / 2011

**Transaction ID : SA11C.4391**

Amount of Each Receipt this Period  
3000.00

**B.** Full Name (Last, First, Middle Initial)  
AMERICAN RESORT DEVELOPMENT ASSOCIATION POLITICAL ACTION COMMITTEE (ARDA-PAC)

Mailing Address 1201 15TH STREET NW 4TH FLOOR

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00129932

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2011

**Transaction ID : SA11C.4398**

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
ASSURANT INC. POLITICAL ACTION COMMITTEE

Mailing Address 501 WEST MICHIGAN STREET

City MILWAUKEE State WI Zip Code 53203

FEC ID number of contributing federal political committee. **C** C00185694

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 29 / 2011

**Transaction ID : SA11C.4415**

Amount of Each Receipt this Period  
1500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 18
<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)  
**ROAD TO FREEDOM POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. BANK OF AMERICA CORPORATION STATE AND FEDERAL PAC**

Mailing Address 1100 North King Street  
DE5-001-02-07

City State Zip Code  
Wilmington DE 19884

FEC ID number of contributing federal political committee. **C** C00043489

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
08 / 30 / 2011

**Transaction ID : SA11C.4384**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**B. CME GROUP, INC. PAC (CME/CBOT/NYMEX PAC)**

Mailing Address 20 South Wacker Drive

City State Zip Code  
Chicago IL 60606

FEC ID number of contributing federal political committee. **C** C00076299

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 19 / 2011

**Transaction ID : SA11C.4412**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**C. DEWEY & LEOEUF LLP POLITICAL ACTION COMMITTEE**

Mailing Address 1301 Avenue of America

City State Zip Code  
New York NY 10019

FEC ID number of contributing federal political committee. **C** C00217885

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2011

**Transaction ID : SA11C.4418**

Amount of Each Receipt this Period  
2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4500.00
<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 9 OF 18  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**ROAD TO FREEDOM POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. FINANCIAL SERVICES ROUNDTABLE PAC**

Mailing Address 1001 PENNSYLVANIA AVENUE, NW  
SUITE 500 SOUTH

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00193177

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 22 / 2011  
**Transaction ID : SA11C.4382**

Amount of Each Receipt this Period  
2000.00

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

Mailing Address 1550 Crystal Drive  
Suite 300

City Arlington State VA Zip Code 22202

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  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 28 / 2011  
**Transaction ID : SA11C.4413**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**C. MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 1295 State Street

City Springfield State MA Zip Code 01111

FEC ID number of contributing federal political committee. **C** C00118943

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 16 / 2011  
**Transaction ID : SA11C.4407**

Amount of Each Receipt this Period  
3000.00

**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: (check only one)	PAGE 10 OF 18
<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)  
**ROAD TO FREEDOM POLITICAL ACTION COMMITTEE**

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

Mailing Address 1095 Avenue of the Americas  
Area 4D

City State Zip Code  
New York NY 10036

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
08 / 31 / 2011

**Transaction ID : SA11C.4388**

Amount of Each Receipt this Period  
3000.00

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

Mailing Address 1295 State Street

City State Zip Code  
Springfield MA 01111

FEC ID number of contributing federal political committee. **C** C00367920

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
11 / 16 / 2011

**Transaction ID : SA11C.4408**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**C. PRICEWATERHOUSECOOPERS POLITICAL ACTION COMMITTEE I**

Mailing Address 1301 K Street, NW  
Suite 800W

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00107235

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 16 / 2011

**Transaction ID : SA11C.4390**

Amount of Each Receipt this Period  
3000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7000.00
<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 11 OF 18
<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)  
**ROAD TO FREEDOM POLITICAL ACTION COMMITTEE**

**A. VISA, INC. POLITICAL ACTION COMMITTEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1300 CONNECTICUT AVE NW  
 SUITE 900  
 City WASHINGTON State DC Zip Code 20036  
 FEC ID number of contributing federal political committee. **C** C00365122  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 16 / 2011  
**Transaction ID : SA11C.4389**  
 Amount of Each Receipt this Period  
 3000.00

**B. VISA, INC. POLITICAL ACTION COMMITTEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1300 CONNECTICUT AVE NW  
 SUITE 900  
 City WASHINGTON State DC Zip Code 20036  
 FEC ID number of contributing federal political committee. **C** C00365122  
 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  
 12 / 31 / 2011  
**Transaction ID : SA11C.4417**  
 Amount of Each Receipt this Period  
 2000.00

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	33000.00

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

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

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

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NAME OF COMMITTEE (In Full)  
**ROAD TO FREEDOM POLITICAL ACTION COMMITTEE**

**A. FRIENDS OF NAN HAYWORTH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 51 Gleneida Avenue  
 City Carmel State NY Zip Code 10512  
 FEC ID number of contributing federal political committee. **C** C00466490  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 226.90

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 02 / 2011  
**Transaction ID : SA16.4411**  
 Amount of Each Receipt this Period  
 226.90  
 Contribution Refund

**B.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	226.90
<b>TOTAL</b> This Period (last page this line number only).....▶	226.90

**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)  
**ROAD TO FREEDOM POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Avenue Events LLC**

Mailing Address 710 B Mount Vernon Ave.

City Alexandria State VA Zip Code 22301

Purpose of Disbursement  
Event Catering

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4386**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Bogart Associates Inc.**

Mailing Address 217 Third St., SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Travel

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4385**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Bogart Associates Inc.**

Mailing Address 217 Third St., SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Event Catering/Site Rental

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4401**

Amount of Each Disbursement this Period

**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)  
**ROAD TO FREEDOM POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Bogart Associates Inc.**

Mailing Address 217 Third St., SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Office Supplies/Shipping/Travel

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4404**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Davis & Harman LLP**

Mailing Address 1455 Pennsylvania Ave NW  
Ste 1225

City Washington State DC Zip Code 20004

Purpose of Disbursement  
Event Rental

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4405**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Federal City Caterers**

Mailing Address 1119 12th St NW

City Washington State DC Zip Code 20005

Purpose of Disbursement  
PAC Catering

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4402**

Amount of Each Disbursement this Period

**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)  
**ROAD TO FREEDOM POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Huckaby Davis Lisker Inc.**

Mailing Address 228 S. Washington St., Ste. 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Compliance Consulting

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 25 / 2011

Transaction ID : SB21B.4387

Amount of Each Disbursement this Period

1223.02

Full Name (Last, First, Middle Initial)

**B. Huckaby Davis Lisker Inc.**

Mailing Address 228 S. Washington St., Ste. 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Compliance Consulting

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 28 / 2011

Transaction ID : SB21B.4409

Amount of Each Disbursement this Period

1105.32

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

2328.34

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

19934.85

**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)  
**ROAD TO FREEDOM POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. BLAINE FOR CONGRESS 2008**

Mailing Address P.O. BOX 25

City State Zip Code  
HOLTS SUMMIT MO 65043

Purpose of Disbursement  
Contribution to Committee

011

Candidate Name

**W BLAINE LUETKEMEYER**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: MO District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		28		2011

Transaction ID : **SB23.4419**

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**B. Bogart Associates Inc.**

Mailing Address 217 Third St., SE

City State Zip Code  
Washington DC 20003

Purpose of Disbursement  
Inkind to Nan Hayworth--Catering

011

Candidate Name

**NAN HAYWORTH**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: NY District: 19

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		08		2011

Transaction ID : **SB23.4393**

Amount of Each Disbursement this Period

2239.48
---------

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF NAN HAYWORTH**

Mailing Address 51 Gleneida Avenue

City State Zip Code  
Carmel NY 10512

Purpose of Disbursement  
Inkind:Catering

011

Candidate Name

**NAN HAYWORTH**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: NY District: 19

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		08		2011

Transaction ID : **SB23.4393.0**

Amount of Each Disbursement this Period

2239.48
---------

**[MEMO ITEM]**

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

4239.48
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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)

<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)  
**ROAD TO FREEDOM POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JIM RENACCI FOR CONGRESS**

Mailing Address 150 SMOKERISE DRIVE

City WADSWORTH State OH Zip Code 44281

Purpose of Disbursement  
Contribution to Committee

011

Candidate Name

**JAMES B RENACCI**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: OH District: 16

Date of Disbursement

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

Transaction ID : **SB23.4429**

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
2	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

**B. SCHWEIKERT FOR CONGRESS**

Mailing Address 8776 E SHEA BLVD, SUITE B3A-626

City SCOTTSDALE State AZ Zip Code 85260

Purpose of Disbursement  
Contribution to Committee

011

Candidate Name

**DAVID SCHWEIKERT**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: AZ District: 05

Date of Disbursement

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

Transaction ID : **SB23.4426**

Amount of Each Disbursement this Period

1	5	5	9	0	0	0	0	0	0
1	5	5	9	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

**C. STIVERS FOR CONGRESS**

Mailing Address 4679 WINTERSET DRIVE

City COLUMBUS State OH Zip Code 43220

Purpose of Disbursement  
Contribution to Committee

011

Candidate Name

**STEVE STIVERS**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: OH District: 15

Date of Disbursement

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

Transaction ID : **SB23.4410**

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
2	0	0	0	0	0	0	0	0	0

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

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

5	5	5	9	0	0	0	0	0	0
5	5	5	9	0	0	0	0	0	0

2	0	0	0	0	0	0	0	0	0
2	0	0	0	0	0	0	0	0	0

**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)  
**ROAD TO FREEDOM POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. VERN BUCHANAN FOR CONGRESS**

Mailing Address P. O. BOX 48928

City SARASOTA State FL Zip Code 34230

Purpose of Disbursement  
Contribution to Committee

011

Candidate Name  
**VERNON BUCHANAN**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: FL District: 13

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 28 / 2011

Transaction ID : SB23.4422

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

2000.00

11798.48