

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
FREEDOM PROJECT; THE

Report Covering the Period: From:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		313898.42
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	230788.85									
(c) Total Receipts (from Line 19)	17086.59	1791637.84								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	247875.44	2105536.26								
7. Total Disbursements (from Line 31)	176308.82	2033969.64								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	71566.62	71566.62								
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
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	250.00	433987.00
(ii) Unitemized	0.00	15006.27
(iii) TOTAL (add Lines 11(a)(i) and (ii)	250.00	448993.27
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	16000.00	1169422.66
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	16250.00	1618415.93
12. Transfers From Affiliated/Other Party Committees	500.00	167511.74
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)	336.59	685.17
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	5025.00
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))	17086.59	1791637.84
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	17086.59	1791637.84

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.....	173808.82	862542.64
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	173808.82	862542.64
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	1143737.00
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	2500.00	2540.00
(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))	2500.00	2540.00
29. Other Disbursements.....	0.00	25150.00
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))..	176308.82	2033969.64
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	176308.82	2033969.64

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)	16250.00	1618415.93
34. Total Contribution Refunds (from Line 28(d))	2500.00	2540.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	13750.00	1615875.93
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	173808.82	862542.64
37. Offsets to Operating Expenditures (from Line 15, page 3)	336.59	685.17
38. Net Operating Expenditures (subtract Line 37 from Line 36)	173472.23	861857.47

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 49	
	(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

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) Gregory Byrne		Date of Receipt
	Mailing Address 5550 SW Macadam Avenue Suite 220		<input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/>
	City Portland	State OR	Zip Code 97239-3744
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID: SA11AI-12540-23497-c
	Name of Employer Self		Occupation Attorney
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>
			Amount of Each Receipt this Period <input type="text" value="250.00"/>
			Contribution

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 49
(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)
Constellation Brands Inc Political Action Committee

Mailing Address 207 High Point Drive
Bldg. 100

City State Zip Code
Victor NY 14564-1061

FEC ID number of contributing federal political committee. **C** C00304832

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

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

Transaction ID: SA11C-12541-23499-c

Amount of Each Receipt this Period
2500.00

Contribution

B.

Full Name (Last, First, Middle Initial)
National Air Traffic Controllers Association Pac

Mailing Address 1325 Massachusetts Avenue NW

City State Zip Code
Washington DC 20005-4171

FEC ID number of contributing federal political committee. **C** C00238725

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
 1 2 / 0 6 / 2 0 1 0

Transaction ID: SA11C-12538-23493-c

Amount of Each Receipt this Period
5000.00

Contribution

C.

Full Name (Last, First, Middle Initial)
Pacific Life Insurance Company Political Action Committee

Mailing Address 700 Newport Center Drive

City State Zip Code
Newport Beach CA 92660-6307

FEC ID number of contributing federal political committee. **C** C00068528

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
 1 2 / 2 2 / 2 0 1 0

Transaction ID: SA11C-11137-23498-c

Amount of Each Receipt this Period
3500.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **11000.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 8 / 49	
	(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"/> 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)
WALT DISNEY PRODUCTIONS EMPLOYEES PAC (DISNEY EMPLOYEES POLITICAL ACTION COMMITTEE)

Mailing Address 1150 17th Street NW
Suite 400

City	State	Zip Code
Washington	DC	20036-4622

FEC ID number of contributing federal political committee. **C** C00197749

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
1	2		0	6		2	0	1	0

Transaction ID: SA11C-3873-23492-c

Amount of Each Receipt this Period

5000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	5000.00
TOTAL This Period (last page this line number only)	16000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 / 49
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 12
		<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) Boehner for Speaker		Date of Receipt
	Mailing Address 631 Pennsylvania Avenue SE Suite B		<input type="text" value="12"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Washington	DC	20003-4452
	FEC ID number of contributing federal political committee.		Transaction ID: SA12-11479-23496-c
	<input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer		Occupation	Transfer from affil. cmt. contr. reported on prior filing
Receipt For:		Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="text" value="166249.69"/>	
	<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="500.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="500.00"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 10 / 49	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" 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)
AT&T

Mailing Address PO Box 371302

City State Zip Code
Pittsburgh PA 15250-7302

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
336.59

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

Transaction ID: SA15-2027-23495-e

Amount of Each Receipt this Period
336.59

Vendor refund

SUBTOTAL of Receipts This Page (optional)	▶	336.59
TOTAL This Period (last page this line number only)	▶	336.59

**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) Authorize.net	Transaction ID: SB21B-11844-23453-e
	Mailing Address 808 East Utah Dr.	Date of Disbursement 12 / 02 / 2010
	City American Fork State UT Zip Code 84003	Amount of Each Disbursement this Period 72.90
	Purpose of Disbursement Merchant fees 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) Bogart Associates, Inc.	Transaction ID: SB21B-9972-23448-e
	Mailing Address 1200 Trinity Drive	Date of Disbursement 11 / 23 / 2010
	City Alexandria State VA Zip Code 22314-4724	Amount of Each Disbursement this Period 200.92
	Purpose of Disbursement Gen. fund. bev., shipping & printing Candidate Name	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Capitol Hill Club	Transaction ID: SB21B-5501-23449-e
	Mailing Address 300 1st Street SE	Date of Disbursement 12 / 02 / 2010
	City Washington State DC Zip Code 20003-1801	Amount of Each Disbursement this Period 107.26
	Purpose of Disbursement Mtg exp. food & bev. Candidate Name	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	381.08
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) Capitol Hill Club Mailing Address 300 1st Street SE City Washington State DC Zip Code 20003-1801 Purpose of Disbursement Mtg. exp. food & bev. Candidate Name	Transaction ID: SB21B-5501-23450-e Date of Disbursement 12 / 02 / 2010
	Amount of Each Disbursement this Period 551.52
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) ▼	Category/Type 003

B. Full Name (Last, First, Middle Initial) Chain Bridge Bank Mailing Address 1445 Laughlin Avenue Suite A City Mclean State VA Zip Code 22101-5737 Purpose of Disbursement Payroll taxes Candidate Name	Transaction ID: SB21B-10391-23451-e Date of Disbursement 11 / 30 / 2010
	Amount of Each Disbursement this Period 2060.80
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) ▼	Category/Type 001

C. Full Name (Last, First, Middle Initial) Chain Bridge Bank Mailing Address 1445 Laughlin Avenue Suite A City Mclean State VA Zip Code 22101-5737 Purpose of Disbursement Bank fees Candidate Name	Transaction ID: SB21B-10391-23452-e Date of Disbursement 11 / 30 / 2010
	Amount of Each Disbursement this Period 65.90
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) ▼	Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ▶	2678.22
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 13 / 49

<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 <hr/> Mailing Address 1445 Laughlin Avenue Suite A <hr/> City Mclean State VA Zip Code 22101-5737 <hr/> Purpose of Disbursement Payroll taxes Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-10391-23454-e Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 1 0
	Amount of Each Disbursement this Period 20748.46
	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) Chain Bridge Bank <hr/> Mailing Address 1445 Laughlin Avenue Suite A <hr/> City Mclean State VA Zip Code 22101-5737 <hr/> Purpose of Disbursement Bank Fees 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-10391-23509-e Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 1 0
	Amount of Each Disbursement this Period 67.70
	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) Chain Bridge Bank <hr/> Mailing Address 1445 Laughlin Avenue Suite A <hr/> City Mclean State VA Zip Code 22101-5737 <hr/> Purpose of Disbursement Payroll Taxes Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-10391-23517-e Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 1 0
	Amount of Each Disbursement this Period 2060.78
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	22876.94
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 <hr/> Purpose of Disbursement Payroll processing 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-6282-23455-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 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) Clark, Schaefer, Hackett & Company <hr/> Mailing Address 160 N Breiel Boulevard <hr/> City Middletown State OH Zip Code 45042-3806 <hr/> Purpose of Disbursement Payroll processing 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-6282-23456-e Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 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) ▼
C. 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 <hr/> Purpose of Disbursement Payroll processing 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-6282-23519-e Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 1 / 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) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

195.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Commonwealth of Virginia	Transaction ID: SB21B-8564-23457-e Date of Disbursement
	Mailing Address PO Box 27264	<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City Richmond State VA Zip Code 23261-7264	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll taxes Candidate Name	<input type="text" value="540.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	001 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Commonwealth of Virginia	Transaction ID: SB21B-8564-23520-e Date of Disbursement
	Mailing Address PO Box 27264	<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>
	City Richmond State VA Zip Code 23261-7264	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll taxes Candidate Name	<input type="text" value="1582.23"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	001 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Direct TV	Transaction ID: SB21B-11147-23464-e Date of Disbursement
	Mailing Address PO Box 60036	<input type="text" value="11"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City Los Angeles State CA Zip Code 90060-0036	Amount of Each Disbursement this Period
	Purpose of Disbursement Satellite tv Candidate Name	<input type="text" value="88.23"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	001 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2210.46"/>
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

A.	Full Name (Last, First, Middle Initial) Direct TV	Transaction ID: SB21B-11147-23465-e
	Mailing Address PO Box 60036	Date of Disbursement 12 / 21 / 2010
	City Los Angeles State CA Zip Code 90060-0036	Amount of Each Disbursement this Period 93.23
	Purpose of Disbursement Satellite tv 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) Disney Resort Destinations	Transaction ID: SB21B-3618-23466-e
	Mailing Address PO Box 403411	Date of Disbursement 12 / 21 / 2010
	City Atlanta State GA Zip Code 30384-3411	Amount of Each Disbursement this Period 5277.74
	Purpose of Disbursement Gen. fund. food, bev. & lodging Candidate Name	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Federal Express	Transaction ID: SB21B-5079-11152-V
	Mailing Address PO Box 693	Date of Disbursement 12 / 21 / 2010
	City Memphis State TN Zip Code 38101-0693	Amount of Each Disbursement this Period 571.35
	Purpose of Disbursement Shipping 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) ▼

[MEMO ITEM]
Subitemization of Mastercard (12/21/10)

SUBTOTAL of Disbursements This Page (optional)	5370.97
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) Mastercard	Transaction ID: SB21B-3605-23501-e Date of Disbursement
	Mailing Address PO Box 42070	<input type="text" value="12"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
	City Middletown State OH Zip Code 45042-0070	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit card (see memo entries) Candidate Name	<input type="text" value="30000.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	001 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) US Airways	Transaction ID: SB21B-3616-11156-V Date of Disbursement
	Mailing Address 2345 Crystal Drive	<input type="text" value="12"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
	City Arlington State VA Zip Code 22227-0001	Amount of Each Disbursement this Period
	Purpose of Disbursement Gen. fund. travel airfare Candidate Name	<input type="text" value="2840.60"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	002 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Subitemization of Mastercard (12/21/10)

C.	Full Name (Last, First, Middle Initial) Disney Resort Destinations	Transaction ID: SB21B-3618-11170-V Date of Disbursement
	Mailing Address PO Box 403411	<input type="text" value="12"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
	City Atlanta State GA Zip Code 30384-3411	Amount of Each Disbursement this Period
	Purpose of Disbursement Gen. fund. food, bev. & lodging Candidate Name	<input type="text" value="10840.44"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	003 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Subitemization of Mastercard (12/21/10)

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="30000.00"/>
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

A.	Full Name (Last, First, Middle Initial) Congressional Liquors	Transaction ID: SB21B-6678-11178-V
	Mailing Address 404 1st Street SE	Date of Disbursement 12 / 21 / 2010
	City Washington State DC Zip Code 20003-1826	Amount of Each Disbursement this Period 179.73
	Purpose of Disbursement Gen. fund. bev. Candidate Name	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]
Subitemization of Mastercard (12/21/10)

B.	Full Name (Last, First, Middle Initial) La Lomita Restaurant	Transaction ID: SB21B-8100-11177-V
	Mailing Address 1330 Pennsylvania Avenue SE	Date of Disbursement 12 / 21 / 2010
	City Washington State DC Zip Code 20003-3037	Amount of Each Disbursement this Period 222.70
	Purpose of Disbursement Mtg. exp. food & bev. Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]
Subitemization of Mastercard (12/21/10)

C.	Full Name (Last, First, Middle Initial) The Alamo Travel Group	Transaction ID: SB21B-4316-11155-V
	Mailing Address 9000 Wurzbach Road	Date of Disbursement 12 / 21 / 2010
	City San Antonio State TX Zip Code 78240-1038	Amount of Each Disbursement this Period 200.00
	Purpose of Disbursement Gen. fund. travel reserv. fee Candidate Name	002 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) ▼

[MEMO ITEM]
Subitemization of Mastercard (12/21/10)

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)
The Michelangelo

Mailing Address 152 W 51st Street

City New York State NY Zip Code 10019-6813

Purpose of Disbursement
Gen. fund. travel food & bev.

Candidate Name

002
Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB21B-4347-11160-V
Date of Disbursement

12 / 21 / 2010

Amount of Each Disbursement this Period

44.07

[MEMO ITEM]

Subitemization of Mastercard (12/21/10)

B.

Full Name (Last, First, Middle Initial)
Trattoria Alberto

Mailing Address 506 8th Street SE

City Washington State DC Zip Code 20003-2834

Purpose of Disbursement
Gen. fund. food & bev.

Candidate Name

003
Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB21B-10171-11167-V
Date of Disbursement

12 / 21 / 2010

Amount of Each Disbursement this Period

3976.00

[MEMO ITEM]

Subitemization of Mastercard (12/21/10)

C.

Full Name (Last, First, Middle Initial)
Delta Air Lines

Mailing Address PO Box 20706

City Atlanta State GA Zip Code 30320-6001

Purpose of Disbursement
Gen. fund. travel airfare

Candidate Name

002
Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB21B-5296-11154-V
Date of Disbursement

12 / 21 / 2010

Amount of Each Disbursement this Period

544.60

[MEMO ITEM]

Subitemization of Mastercard (12/21/10)

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<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) Staples Mailing Address 8 Technology Drive # 1020 City Westborough State MA Zip Code 01581-1756 Purpose of Disbursement Office supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21B-6636-11162-V Date of Disbursement 12 / 21 / 2010
	Amount of Each Disbursement this Period 192.08 [MEMO ITEM] Subitemization of Mastercard (12/21/10)

B. Full Name (Last, First, Middle Initial) Google Inc., Advertising Programs Mailing Address 1600 Amphitheatre Parkway City Mountain View State CA Zip Code 94043-1351 Purpose of Disbursement TFP website advertising Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21B-11085-11153-V Date of Disbursement 12 / 21 / 2010
	Amount of Each Disbursement this Period 2500.00 [MEMO ITEM] Subitemization of Mastercard (12/21/10)

C. Full Name (Last, First, Middle Initial) Facebook Advertising Mailing Address 1601 S California Avenue City Palo Alto State CA Zip Code 94304-1111 Purpose of Disbursement TFP Website advertising Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21B-11148-11148-V Date of Disbursement 12 / 21 / 2010
	Amount of Each Disbursement this Period 1280.63 [MEMO ITEM] Subitemization of Mastercard (12/21/10)

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER: (check only one)

<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) 123 Together.com	Transaction ID: SB21B-10075-11174-V Date of Disbursement 12 / 21 / 2010
	Mailing Address 111 S Bedford Street Suite 200	Amount of Each Disbursement this Period 184.86
	City Burlington State MA Zip Code 01803-5145	
	Purpose of Disbursement Internet 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) ▼

[MEMO ITEM]
Subitemization of Mastercard (12/21/10)

B.	Full Name (Last, First, Middle Initial) Matchbox	Transaction ID: SB21B-11421-11165-V Date of Disbursement 12 / 21 / 2010
	Mailing Address 713 H Street NW	Amount of Each Disbursement this Period 307.68
	City Washington State DC Zip Code 20001-3733	
	Purpose of Disbursement Mtg. exp. food & bev. Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]
Subitemization of Mastercard (12/21/10)

C.	Full Name (Last, First, Middle Initial) Mailchimp.com	Transaction ID: SB21B-12123-11163-V Date of Disbursement 12 / 21 / 2010
	Mailing Address 512 Means Street NW Suite 404	Amount of Each Disbursement this Period 240.00
	City Atlanta State GA Zip Code 30318-5788	
	Purpose of Disbursement Email maintenance 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) ▼

[MEMO ITEM]
Subitemization of Mastercard (12/21/10)

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

<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) Apple Store	Transaction ID: SB21B-12125-11172-V
	Mailing Address 2700 Clarendon Boulevard	Date of Disbursement 12 / 21 / 2010
	City Arlington State VA Zip Code 22201-7005	Amount of Each Disbursement this Period 3643.50
	Purpose of Disbursement Computer purchase 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) ▼
		[MEMO ITEM] Subitemization of Mastercard (12/21/10)

B.	Full Name (Last, First, Middle Initial) Mr. Henrys	Transaction ID: SB21B-11280-11171-V
	Mailing Address 601 Pennsylvania Avenue SE	Date of Disbursement 12 / 21 / 2010
	City Washington State DC Zip Code 20003-4303	Amount of Each Disbursement this Period 66.67
	Purpose of Disbursement Mtg. exp. food & bev. Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] Subitemization of Mastercard (12/21/10)

C.	Full Name (Last, First, Middle Initial) St. Regis	Transaction ID: SB21B-12547-11150-V
	Mailing Address Two East 55th Street, at Fifth Ave	Date of Disbursement 12 / 21 / 2010
	City New York State NY Zip Code 10022	Amount of Each Disbursement this Period 442.97
	Purpose of Disbursement Gen. fund. food & bev. Candidate Name	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] Subitemization of Mastercard (12/21/10)

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) PJ Clarkes	Transaction ID: SB21B-12552-11173-V
	Mailing Address 1600 K Street NW	Date of Disbursement 12 / 21 / 2010
	City Washington State DC Zip Code 20006-2806	Amount of Each Disbursement this Period 325.00
	Purpose of Disbursement Gen. fund. food & bev. Candidate Name	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] Subitemization of Mastercard (12/21/10)

B.	Full Name (Last, First, Middle Initial) Ramparts	Transaction ID: SB21B-11985-11176-V
	Mailing Address 1700 Fern Street	Date of Disbursement 12 / 21 / 2010
	City Alexandria State VA Zip Code 22302-2605	Amount of Each Disbursement this Period 53.58
	Purpose of Disbursement Mtg. exp. food & bev. Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] Subitemization of Mastercard (12/21/10)

C.	Full Name (Last, First, Middle Initial) Guapos	Transaction ID: SB21B-10172-11179-V
	Mailing Address 4036 28th Street S	Date of Disbursement 12 / 21 / 2010
	City Arlington State VA Zip Code 22206-2202	Amount of Each Disbursement this Period 252.48
	Purpose of Disbursement Mtg. exp. food & bev. Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] Subitemization of Mastercard (12/21/10)

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 24 / 49

<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) AT&T Data</p> <p>Mailing Address 785 7th Street NW</p> <p>City Washington State DC Zip Code 20001-3715</p> <p>Purpose of Disbursement Data plan</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-12409-11161-V</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <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><input type="text" value="100.00"/></p> <p>[MEMO ITEM] Subitemization of Mastercard (12/21/10)</p>
<p>B. Full Name (Last, First, Middle Initial) Ted's Bulletin</p> <p>Mailing Address 505 8th Street SE</p> <p>City Washington State DC Zip Code 20003-2835</p> <p>Purpose of Disbursement Mtg. exp. food & bev.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-12414-11168-V</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <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><input type="text" value="136.66"/></p> <p>[MEMO ITEM] Subitemization of Mastercard (12/21/10)</p>
<p>C. Full Name (Last, First, Middle Initial) Szechuan House Fusion Grill</p> <p>Mailing Address 515 8th Street SE</p> <p>City Washington State DC Zip Code 20003-2835</p> <p>Purpose of Disbursement Mtg. exp. food & bev.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-10221-11187-V</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <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><input type="text" value="54.00"/></p> <p>[MEMO ITEM] Subitemization of Mastercard (12/31/10)</p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="0.00"/>
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) Ritz Carlton Naples</p> <p>Mailing Address 280 Vanderbilt Beach Road</p> <p>City Naples State FL Zip Code 34108-2371</p> <p>Purpose of Disbursement Gen. fund. evt. deposit</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-10941-11207-V</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: right;">3000.00</td> </tr> </table> <p>[MEMO ITEM] Subitemization of Mastercard (12/31/10)</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	1	0	3000.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		3	1		2	0	1	0													
3000.00																						
<p>B. Full Name (Last, First, Middle Initial) Ramparts</p> <p>Mailing Address 1700 Fern Street</p> <p>City Alexandria State VA Zip Code 22302-2605</p> <p>Purpose of Disbursement Mtg. exp. food & bev.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-11985-11200-V</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: right;">208.30</td> </tr> </table> <p>[MEMO ITEM] Subitemization of Mastercard (12/31/10)</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	1	0	208.30
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		3	1		2	0	1	0													
208.30																						
<p>C. Full Name (Last, First, Middle Initial) Mailchimp.com</p> <p>Mailing Address 512 Means Street NW Suite 404</p> <p>City Atlanta State GA Zip Code 30318-5788</p> <p>Purpose of Disbursement Email maintenance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-12123-11196-V</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: right;">240.00</td> </tr> </table> <p>[MEMO ITEM] Subitemization of Mastercard (12/31/10)</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	1	0	240.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		3	1		2	0	1	0													
240.00																						

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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) Ba Bay	Transaction ID: SB21B-12555-11197-V
	Mailing Address 633 Pennsylvania Avenue SE	Date of Disbursement 12 / 31 / 2010
	City Washington State DC Zip Code 20003-4303	Amount of Each Disbursement this Period 658.80
	Purpose of Disbursement Gen. fund. food & bev. Candidate Name	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] Subitemization of Mastercard (12/31/10)

B.	Full Name (Last, First, Middle Initial) College Hunks Haul Junk	Transaction ID: SB21B-12557-11201-V
	Mailing Address 14650 Southlawn Lane	Date of Disbursement 12 / 31 / 2010
	City Rockville State MD Zip Code 20850-1374	Amount of Each Disbursement this Period 287.00
	Purpose of Disbursement Moving expense 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) ▼
		[MEMO ITEM] Subitemization of Mastercard (12/31/10)

C.	Full Name (Last, First, Middle Initial) Clear	Transaction ID: SB21B-12559-11204-V
	Mailing Address 4400 Carillon Point	Date of Disbursement 12 / 31 / 2010
	City Kirkland State WA Zip Code 98033-7353	Amount of Each Disbursement this Period 475.40
	Purpose of Disbursement Internet 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) ▼
		[MEMO ITEM] Subitemization of Mastercard (12/31/10)

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

<p>A. Full Name (Last, First, Middle Initial) AT&T Data</p> <p>Mailing Address 785 7th Street NW</p> <p>City Washington State DC Zip Code 20001-3715</p> <p>Purpose of Disbursement Data plan</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-12409-11194-V</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <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><input type="text" value="100.00"/></p> <p>[MEMO ITEM] Subitemization of Mastercard (12/31/10)</p>
<p>B. Full Name (Last, First, Middle Initial) Wholefoods</p> <p>Mailing Address 2700 Wilson Boulevard</p> <p>City Arlington State VA Zip Code 22201-3804</p> <p>Purpose of Disbursement Gen. fund. food & bev.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-12553-11189-V</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <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><input type="text" value="342.24"/></p> <p>[MEMO ITEM] Subitemization of Mastercard (12/31/10)</p>
<p>C. Full Name (Last, First, Middle Initial) Universal Orlando Universal City</p> <p>Mailing Address 1000 Universal Studios Plaza</p> <p>City Orlando State FL Zip Code 32819-7601</p> <p>Purpose of Disbursement Gen. fund. event tickets</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-12395-11188-V</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <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><input type="text" value="11945.70"/></p> <p>[MEMO ITEM] Subitemization of Mastercard (12/31/10)</p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="0.00"/>
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)

<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) Facebook Advertising	Transaction ID: SB21B-11148-11180-V
	Mailing Address 1601 S California Avenue	Date of Disbursement 12 / 31 / 2010
	City Palo Alto State CA Zip Code 94304-1111	Amount of Each Disbursement this Period 682.65
	Purpose of Disbursement TFP website advertising Candidate Name	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] Subitemization of Mastercard (12/31/10)

B.	Full Name (Last, First, Middle Initial) Restaurant Eve	Transaction ID: SB21B-11243-11203-V
	Mailing Address 110 S Pitt Street	Date of Disbursement 12 / 31 / 2010
	City Alexandria State VA Zip Code 22314-3126	Amount of Each Disbursement this Period 380.00
	Purpose of Disbursement Gen. fund. food & bev. Candidate Name	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] Subitemization of Mastercard (12/31/10)

C.	Full Name (Last, First, Middle Initial) Central Michel Richard	Transaction ID: SB21B-11428-11183-V
	Mailing Address 1001 Pennsylvania Avenue NW	Date of Disbursement 12 / 31 / 2010
	City Washington State DC Zip Code 20004-2505	Amount of Each Disbursement this Period 101.80
	Purpose of Disbursement Mtg. exp. food & bev. Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] Subitemization of Mastercard (12/31/10)

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

<p>A. Full Name (Last, First, Middle Initial) Cava</p> <p>Mailing Address 527 8th Street SE</p> <p>City Washington State DC Zip Code 20003-2835</p> <p>Purpose of Disbursement Gen. fund. food & bev. Candidate Name 003 Category/Type</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21B-11371-11184-V Date of Disbursement: 12 / 31 / 2010</p> <p>Amount of Each Disbursement this Period 283.97</p> <p>[MEMO ITEM] Subitemization of Mastercard (12/31/10)</p>
<p>B. Full Name (Last, First, Middle Initial) Mears Transportation</p> <p>Mailing Address 324 W Gore Street</p> <p>City Orlando State FL Zip Code 32806-1037</p> <p>Purpose of Disbursement Gen. fund. ground transportation Candidate Name 003 Category/Type</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21B-9012-11190-V Date of Disbursement: 12 / 31 / 2010</p> <p>Amount of Each Disbursement this Period 2642.50</p> <p>[MEMO ITEM] Subitemization of Mastercard (12/31/10)</p>
<p>C. Full Name (Last, First, Middle Initial) BLT Steak</p> <p>Mailing Address 1625 I Street, NW</p> <p>City Washington State DC Zip Code 20006</p> <p>Purpose of Disbursement Mtg. exp. food & bev. Candidate Name 001 Category/Type</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21B-10009-11191-V Date of Disbursement: 12 / 31 / 2010</p> <p>Amount of Each Disbursement this Period 86.78</p> <p>[MEMO ITEM] Subitemization of Mastercard (12/31/10)</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER: (check only one)

<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) Staples	Transaction ID: SB21B-6636-11205-V Date of Disbursement 12 / 31 / 2010
	Mailing Address 8 Technology Drive # 1020	Amount of Each Disbursement this Period 323.27
	City Westborough State MA Zip Code 01581-1756	
	Purpose of Disbursement Office supplies 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) ▼

[MEMO ITEM]
Subitemization of Mastercard (12/31/10)

B.	Full Name (Last, First, Middle Initial) Google Inc., Advertising Programs	Transaction ID: SB21B-11085-11193-V Date of Disbursement 12 / 31 / 2010
	Mailing Address 1600 Amphitheatre Parkway	Amount of Each Disbursement this Period 1500.00
	City Mountain View State CA Zip Code 94043-1351	
	Purpose of Disbursement TFP website advertising Candidate Name	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]
Subitemization of Mastercard (12/31/10)

C.	Full Name (Last, First, Middle Initial) Guapos	Transaction ID: SB21B-10172-11212-V Date of Disbursement 12 / 31 / 2010
	Mailing Address 4036 28th Street S	Amount of Each Disbursement this Period 101.31
	City Arlington State VA Zip Code 22206-2202	
	Purpose of Disbursement Mtg. exp. food & bev. Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]
Subitemization of Mastercard (12/31/10)

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

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

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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) 123 Together.com	Transaction ID: SB21B-10075-11206-V Date of Disbursement 12 / 31 / 2010
	Mailing Address 111 S Bedford Street Suite 200	Amount of Each Disbursement this Period 184.86
	City Burlington State MA Zip Code 01803-5145	
	Purpose of Disbursement Internet 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) ▼
		[MEMO ITEM] Subitemization of Mastercard (12/31/10)

B.	Full Name (Last, First, Middle Initial) The Alamo Travel Group	Transaction ID: SB21B-4316-11211-V Date of Disbursement 12 / 31 / 2010
	Mailing Address 9000 Wurzbach Road	Amount of Each Disbursement this Period 25.00
	City San Antonio State TX Zip Code 78240-1038	
	Purpose of Disbursement Gen. fund. travel reserv. fee Candidate Name	002 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) ▼
		[MEMO ITEM] Subitemization of Mastercard (12/31/10)

C.	Full Name (Last, First, Middle Initial) USPS	Transaction ID: SB21B-3727-11195-V Date of Disbursement 12 / 31 / 2010
	Mailing Address 1200 Pennsylvania Avenue NW	Amount of Each Disbursement this Period 264.00
	City Washington State DC Zip Code 20004-2403	
	Purpose of Disbursement Postage 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) ▼
		[MEMO ITEM] Subitemization of Mastercard (12/31/10)

SUBTOTAL of Disbursements This Page (optional) ► 0.00

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

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

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

FOR LINE NUMBER: (check only one)

<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) Best Buy Mailing Address 5799 Leesburg Pike City Falls Church State VA Zip Code 22041-2906 Purpose of Disbursement Computer services Candidate Name	Transaction ID: SB21B-3893-11182-V Date of Disbursement 12 / 31 / 2010
	Amount of Each Disbursement this Period 314.77 [MEMO ITEM] Subitemization of Mastercard (12/31/10)
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) ▼	Category/Type 001

B. Full Name (Last, First, Middle Initial) United Airlines Mailing Address 1200 East Algonquin Road City Elk Grove Township State IL Zip Code 60007 Purpose of Disbursement Gen. fund. travel airfare Candidate Name	Transaction ID: SB21B-3902-11185-V Date of Disbursement 12 / 31 / 2010
	Amount of Each Disbursement this Period 858.70 [MEMO ITEM] Subitemization of Mastercard (12/31/10)
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) ▼	Category/Type 002

C. Full Name (Last, First, Middle Initial) US Airways Mailing Address 2345 Crystal Drive City Arlington State VA Zip Code 22227-0001 Purpose of Disbursement Gen. fund. travel airfare Candidate Name	Transaction ID: SB21B-3616-11210-V Date of Disbursement 12 / 31 / 2010
	Amount of Each Disbursement this Period 416.70 [MEMO ITEM] Subitemization of Mastercard (12/31/10)
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) ▼	Category/Type 002

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<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) Mastercard</p> <p>Mailing Address PO Box 42070</p> <p>City Middletown State OH Zip Code 45042-0070</p> <p>Purpose of Disbursement Credit card (see memo entries)</p> <p>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-3605-23508-e Date of Disbursement 12 / 31 / 2010</p> <p>Amount of Each Disbursement this Period 26690.36</p> <p>001 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Congressional Liquors</p> <p>Mailing Address 404 1st Street SE</p> <p>City Washington State DC Zip Code 20003-1826</p> <p>Purpose of Disbursement Gen. fund bev.</p> <p>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-6678-11213-V Date of Disbursement 12 / 31 / 2010</p> <p>Amount of Each Disbursement this Period 359.46</p> <p>003 Category/ Type</p> <p>[MEMO ITEM] Subitemization of Mastercard (12/31/10)</p>
<p>C. Full Name (Last, First, Middle Initial) Southwest Airlines</p> <p>Mailing Address PO Box 36611</p> <p>City Dallas State TX Zip Code 75235-1611</p> <p>Purpose of Disbursement Gen. fund. travel airfare</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-5077-11209-V Date of Disbursement 12 / 31 / 2010</p> <p>Amount of Each Disbursement this Period 333.70</p> <p>002 Category/ Type</p> <p>[MEMO ITEM] Subitemization of Mastercard (12/31/10)</p>

SUBTOTAL of Disbursements This Page (optional) ▶

26690.36

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) Federal Express	Transaction ID: SB21B-5079-11181-V
	Mailing Address PO Box 693	Date of Disbursement 12 / 31 / 2010
	City Memphis State TN Zip Code 38101-0693	Amount of Each Disbursement this Period 63.51
	Purpose of Disbursement Shipping 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) ▼

[MEMO ITEM]
Subitemization of Mastercard (12/31/10)

B.	Full Name (Last, First, Middle Initial) MDC & Associates, Inc.	Transaction ID: SB21B-9144-23467-e
	Mailing Address 1701 Esquire Lane	Date of Disbursement 12 / 21 / 2010
	City Mclean State VA Zip Code 22101-4755	Amount of Each Disbursement this Period 2557.40
	Purpose of Disbursement Bookkeeping & compliance 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) Muirfield Village Golf Club	Transaction ID: SB21B-5518-23475-e
	Mailing Address PO Box 565	Date of Disbursement 11 / 23 / 2010
	City Dublin State OH Zip Code 43017-0565	Amount of Each Disbursement this Period 1312.04
	Purpose of Disbursement Gen. fund. food & bev., greens fees Candidate Name	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

3869.44

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) Provisions, Ltd.</p> <p>Mailing Address 4947 Wyaconda Road</p> <p>City Rockville State MD Zip Code 20852-2443</p> <p>Purpose of Disbursement Gen. fund. food & bev. 003 Candidate Name Category/Type</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>Transaction ID: SB21B-12542-23500-e Date of Disbursement 12 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 1539.38</p>
<p>B. Full Name (Last, First, Middle Initial) Reflections Properties</p> <p>Mailing Address 631 Pennsylvania Avenue SE</p> <p>City Washington State DC Zip Code 20003-4303</p> <p>Purpose of Disbursement Office rent & parking 001 Candidate Name Category/Type</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>Transaction ID: SB21B-11115-23478-e Date of Disbursement 11 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 2430.00</p>
<p>C. Full Name (Last, First, Middle Initial) Reflections Properties</p> <p>Mailing Address 631 Pennsylvania Avenue SE</p> <p>City Washington State DC Zip Code 20003-4303</p> <p>Purpose of Disbursement Office rent & parking 001 Candidate Name Category/Type</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>Transaction ID: SB21B-11115-23479-e Date of Disbursement 12 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 2430.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

6399.38

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

A.	Full Name (Last, First, Middle Initial) Verizon	Transaction ID: SB21B-8324-23483-e
	Mailing Address PO Box 17577	Date of Disbursement 11 / 23 / 2010
	City Baltimore State MD Zip Code 21297-0513	Amount of Each Disbursement this Period 1256.71
	Purpose of Disbursement Telephone 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) Verizon	Transaction ID: SB21B-8324-23484-e
	Mailing Address PO Box 17577	Date of Disbursement 12 / 21 / 2010
	City Baltimore State MD Zip Code 21297-0513	Amount of Each Disbursement this Period 1044.48
	Purpose of Disbursement Telephone 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) Washington Courier	Transaction ID: SB21B-9969-23485-e
	Mailing Address 5520 Cherokee Avenue Suite 120	Date of Disbursement 11 / 23 / 2010
	City Alexandria State VA Zip Code 22312-2319	Amount of Each Disbursement this Period 320.60
	Purpose of Disbursement Telephone 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) ▶

2621.79

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

A.	Full Name (Last, First, Middle Initial) Washington Courier	Transaction ID: SB21B-9969-23486-e Date of Disbursement 12 / 21 / 2010
	Mailing Address 5520 Cherokee Avenue Suite 120	Amount of Each Disbursement this Period 159.51
	City Alexandria State VA Zip Code 22312-2319	
	Purpose of Disbursement Courier	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Wiley Rein LLP	Transaction ID: SB21B-3634-23487-e Date of Disbursement 11 / 23 / 2010
	Mailing Address 1776 K Street NW	Amount of Each Disbursement this Period 3000.88
	City Washington State DC Zip Code 20006-2304	
	Purpose of Disbursement Legal services	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Wiley Rein LLP	Transaction ID: SB21B-3634-23488-e Date of Disbursement 12 / 21 / 2010
	Mailing Address 1776 K Street NW	Amount of Each Disbursement this Period 3145.95
	City Washington State DC Zip Code 20006-2304	
	Purpose of Disbursement Legal Services	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	6306.34
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Whitaker Askew	Transaction ID: SB21B-3802-23445-e
	Mailing Address 3044 R Street NW	Date of Disbursement 11 / 30 / 2010
	City Washington State DC Zip Code 20007-2962	Amount of Each Disbursement this Period 1500.61
	Purpose of Disbursement Payroll 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-3802-23446-e
	Mailing Address 3044 R Street NW	Date of Disbursement 12 / 15 / 2010
	City Washington State DC Zip Code 20007-2962	Amount of Each Disbursement this Period 1500.60
	Purpose of Disbursement Payroll 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) Whitaker Askew	Transaction ID: SB21B-3802-23447-e
	Mailing Address 3044 R Street NW	Date of Disbursement 12 / 15 / 2010
	City Washington State DC Zip Code 20007-2962	Amount of Each Disbursement this Period 6385.00
	Purpose of Disbursement Payroll 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)	9386.21
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Whitaker Askew	Transaction ID: SB21B-3802-23510-e
	Mailing Address 3044 R Street NW	Date of Disbursement 12 / 31 / 2010
	City Washington State DC Zip Code 20007-2962	Amount of Each Disbursement this Period 1500.61
	Purpose of Disbursement Payroll 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) John Criscuolo	Transaction ID: SB21B-10858-23458-e
	Mailing Address 1845 A Street SE	Date of Disbursement 11 / 30 / 2010
	City Washington State DC Zip Code 20003-1706	Amount of Each Disbursement this Period 190.72
	Purpose of Disbursement Payroll 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-10858-23459-e
	Mailing Address 1845 A Street SE	Date of Disbursement 12 / 15 / 2010
	City Washington State DC Zip Code 20003-1706	Amount of Each Disbursement this Period 190.72
	Purpose of Disbursement Payroll 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) ► **1882.05**

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

A.	Full Name (Last, First, Middle Initial) John Criscuolo	Transaction ID: SB21B-10858-23460-e
	Mailing Address 1845 A Street SE	Date of Disbursement 12 / 15 / 2010
	City Washington State DC Zip Code 20003-1706	Amount of Each Disbursement this Period 3135.20
	Purpose of Disbursement Payroll 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) John Criscuolo	Transaction ID: SB21B-10858-23511-e
	Mailing Address 1845 A Street SE	Date of Disbursement 12 / 31 / 2010
	City Washington State DC Zip Code 20003-1706	Amount of Each Disbursement this Period 190.73
	Purpose of Disbursement Payroll 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) Johnny DeStefano	Transaction ID: SB21B-10021-23461-e
	Mailing Address 1000 New Jersey Ave., SE #1011	Date of Disbursement 11 / 30 / 2010
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period 597.06
	Purpose of Disbursement Payroll 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)	3922.99
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) Johnny DeStefano	Transaction ID: SB21B-10021-23462-e
	Mailing Address 1000 New Jersey Ave., SE #1011	Date of Disbursement 12 / 15 / 2010
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period 597.05
	Purpose of Disbursement Payroll 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) Johnny DeStefano	Transaction ID: SB21B-10021-23463-e
	Mailing Address 1000 New Jersey Ave., SE #1011	Date of Disbursement 12 / 15 / 2010
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period 6385.00
	Purpose of Disbursement Payroll 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) Johnny DeStefano	Transaction ID: SB21B-10021-23512-e
	Mailing Address 1000 New Jersey Ave., SE #1011	Date of Disbursement 12 / 31 / 2010
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period 597.06
	Purpose of Disbursement Payroll 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) ► 7579.11

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) Curtis Isakson <hr/> Mailing Address 1201 N Garfield Street Apt. 618 <hr/> City Arlington State VA Zip Code 22201-6812 <hr/> Purpose of Disbursement Payroll 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-11116-23468-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 438.84
	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) Curtis Isakson <hr/> Mailing Address 1201 N Garfield Street Apt. 618 <hr/> City Arlington State VA Zip Code 22201-6812 <hr/> Purpose of Disbursement Payroll 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-11116-23469-e Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 1 0
	Amount of Each Disbursement this Period 438.84
	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) Curtis Isakson <hr/> Mailing Address 1201 N Garfield Street Apt. 618 <hr/> City Arlington State VA Zip Code 22201-6812 <hr/> Purpose of Disbursement Payroll 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-11116-23470-e Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 1 0
	Amount of Each Disbursement this Period 3276.53
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	4154.21
TOTAL This Period (last page this line number only) ▶	(Empty)

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Curtis Isakson	Transaction ID: SB21B-11116-23513-e Date of Disbursement
	Mailing Address 1201 N Garfield Street Apt. 618	<input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/>
	City Arlington State VA Zip Code 22201-6812	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Candidate Name	<input type="text" value="438.84"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Kevin Mcgrann	Transaction ID: SB21B-4052-23471-e Date of Disbursement
	Mailing Address 150 N Carolina Avenue SE	<input type="text" value="1"/> <input type="text" value="1"/> / <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"/>
	City Washington State DC Zip Code 20003-1841	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Candidate Name	<input type="text" value="824.64"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Kevin Mcgrann	Transaction ID: SB21B-4052-23472-e Date of Disbursement
	Mailing Address 150 N Carolina Avenue SE	<input type="text" value="1"/> <input type="text" value="2"/> / <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"/>
	City Washington State DC Zip Code 20003-1841	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Candidate Name	<input type="text" value="824.64"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

<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 Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-4052-23473-e</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <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><input type="text" value="6385.00"/></p> <p>Category/Type: <input type="text" value="001"/></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 Mtg. exp. food & bev. reimb.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-4052-23474-e</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <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><input type="text" value="184.24"/></p> <p>Category/Type: <input type="text" value="002"/></p>
<p>C. 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 Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-4052-23514-e</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <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><input type="text" value="824.64"/></p> <p>Category/Type: <input type="text" value="001"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="7393.88"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial) Tommy McKone <hr/> Mailing Address 901 N Pollard Street <hr/> City Arlington State VA Zip Code 22203-4087 <hr/> Purpose of Disbursement Stipend 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-12539-23494-e Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
	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) Donald Seymour <hr/> Mailing Address 401 Holland Lane #609 <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Payroll 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-10022-23480-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 758.09
	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) Donald Seymour <hr/> Mailing Address 401 Holland Lane #609 <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Payroll 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-10022-23481-e Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 1 0
	Amount of Each Disbursement this Period 758.10
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

2516.19

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) Donald Seymour	Transaction ID: SB21B-10022-23482-e
	Mailing Address 401 Holland Lane #609	Date of Disbursement 12 / 15 / 2010
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period 8492.41
	Purpose of Disbursement Payroll 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) Donald Seymour	Transaction ID: SB21B-10022-23515-e
	Mailing Address 401 Holland Lane #609	Date of Disbursement 12 / 31 / 2010
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period 758.10
	Purpose of Disbursement Payroll 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) Caitlin Wohlfarth	Transaction ID: SB21B-11845-23489-e
	Mailing Address 1808 N Quinn Street	Date of Disbursement 11 / 30 / 2010
	City Arlington State VA Zip Code 22209-1335	Amount of Each Disbursement this Period 229.14
	Purpose of Disbursement Payroll 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)	▶	9479.65
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.</p> <p>Full Name (Last, First, Middle Initial) Caitlin Wohlfarth</p> <p>Mailing Address 1808 N Quinn Street</p> <p>City Arlington State VA Zip Code 22209-1335</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-11845-23490-e</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <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><input type="text" value="229.15"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Caitlin Wohlfarth</p> <p>Mailing Address 1808 N Quinn Street</p> <p>City Arlington State VA Zip Code 22209-1335</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-11845-23491-e</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <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><input type="text" value="4350.14"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Caitlin Wohlfarth</p> <p>Mailing Address 1808 N Quinn Street</p> <p>City Arlington State VA Zip Code 22209-1335</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-11845-23516-e</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <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><input type="text" value="229.14"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

4808.43

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

173808.82

**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 49 / 49

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" 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)
Kirsten Chadwick

Transaction ID: SB28a-6467-23539-e
Date of Disbursement

Mailing Address 601 President Ford Lane

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

City State Zip Code
Alexandria VA 22302-3033

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Contribution refund

010
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

2500.00

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

2500.00
