

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

The Legacy Committee Political Action Committee

ADDRESS (number and street)

30011 Ivy Glenn Drive, Ste 223

☐Check if different
than previously
reported. (ACC)

Laguna Niguel

CA

92677

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00429084

3. IS THIS
REPORT☐NEW
(N)**OR**☒AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☒January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

07

01

2007

through

12

31

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

James Lacy

Signature of Treasurer

Electronically Filed by James Lacy

Date

05

29

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

The Legacy Committee Political Action Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2007		0.00
(b) Cash on Hand at Beginning of Reporting Period	25589.33	
(c) Total Receipts (from Line 19)	395588.08	447450.53
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	421177.41	447450.53
7. Total Disbursements (from Line 31)	401669.50	427942.63
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	19507.91	19507.91
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

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

The Legacy Committee Political Action Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	7

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	107262.00	116301.00
(i) Itemized (use Schedule A)	288326.08	331149.53
(ii) Unitemized	395588.08	447450.53
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ➡	395588.08	447450.53
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	395588.08	447450.53
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	395588.08	447450.53

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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.....	63873.85	69553.31
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	63873.85	69553.31
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2250.00	2250.00
24. Independent Expenditure (use Schedule E)	335525.65	356119.32
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	20.00	20.00
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))..	401669.50	427942.63
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	401669.50	427942.63

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	395588.08	447450.53
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	395588.08	447450.53
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	63873.85	69553.31
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	63873.85	69553.31

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 428

(check only one)

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

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR RICHARD S GRIFFITH

Mailing Address PO BOX 91610

City

LAFAYETTE

State

LA

Zip Code

70509

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

INVESTOR/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	0	7

Transaction ID: INC.A.465

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MRS ANGELA HAVERLY

Mailing Address 24 MOSSWOOD TRL

City

DENVER

State

NJ

Zip Code

7834

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

363.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	0	7

Transaction ID: INC.A.192

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

MRS EDITH FLEMINBERG

Mailing Address 805 LONDONDERRY RD

City

SCHENECTADY

State

NY

Zip Code

12309

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

658.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	3		2	0	0	7

Transaction ID: INC.A.658

Amount of Each Receipt this Period

220.00

SUBTOTAL of Receipts This Page (optional)

395.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 7 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR FRANCIS P LEHAR

Mailing Address 11 NORWOOD AVE
PO BOX 1482

City State Zip Code
MANCHESTER MA 1944

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
RETIRED MUSIC PUBLISHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 3 / 2 0 0 7

Transaction ID: INC.A.261

Amount of Each Receipt this Period

88.00

B.

Full Name (Last, First, Middle Initial)

MRS LESLEY LINSTEADER

Mailing Address 23871 WILLOWS DR APT 135

City State Zip Code
LAGUNA HILLS CA 92653

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED/HOMEMAKER

Occupation
RETIRED BUSINESS FINANCIAL MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

822.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 3 / 2 0 0 7

Transaction ID: INC.A.882

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MS PAULINE SALYERS

Mailing Address 2916 HOYLAKES CT

City State Zip Code
DAYTON OH 45439

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 3 / 2 0 0 7

Transaction ID: INC.A.780

Amount of Each Receipt this Period

33.00

SUBTOTAL of Receipts This Page (optional)

221.00

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 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS HELEN M WILKS

Mailing Address 459 NW RAYMOND LN

City

PORT SAINT LUCIE

State

FL

Zip Code

34983

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.75

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 3 / 2 0 0 7

Transaction ID: INC.A.425

Amount of Each Receipt this Period

44.00

B.

Full Name (Last, First, Middle Initial)

MS PHYLLIS M GORMAN

Mailing Address 4700 TOWN RIDGE DR

City

GREENSBORO

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 6 / 2 0 0 7

Transaction ID: INC.A.299

Amount of Each Receipt this Period

44.00

C.

Full Name (Last, First, Middle Initial)

MRS GERTRUDE PETROSE

Mailing Address 2905 W 71ST ST

City

CHICAGO

State

IL

Zip Code

60629

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.75

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 6 / 2 0 0 7

Transaction ID: INC.A.623

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

133.00

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 9 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS OLETHA E YOUNG

Mailing Address 730 W JEFFERSON ST APT 242

City

MORTON

State

IL

Zip Code

61550

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 6 / 2 0 0 7

Transaction ID: INC.A.515

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MRS JUANITA L ALEXANDER

Mailing Address 2724 ALCAZAR ST NE

City

ALBUQUERQUE

State

NM

Zip Code

87110

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

ELEMENTARY TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 9 / 2 0 0 7

Transaction ID: INC.A.436

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MRS PHYLLIS R DAVIS

Mailing Address 1150 ANCHORAGE LN UNIT 610

City

SAN DIEGO

State

CA

Zip Code

92106

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 9 / 2 0 0 7

Transaction ID: INC.A.1132

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

180.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS ELEANOR B MALOT

Mailing Address 3505 S 94TH AVE

City

OMAHA

State

NE

Zip Code

68124

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 9 / 2 0 0 7

Transaction ID: INC.A.304

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

MS ELLEN C ROUTSON

Mailing Address 1401 HERMITS WAY

City

THE DALLES

State

OR

Zip Code

97058

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

732.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 9 / 2 0 0 7

Transaction ID: INC.A.324

Amount of Each Receipt this Period

44.00

C.

Full Name (Last, First, Middle Initial)

MS PATRICIA A KING

Mailing Address 704 MILLBRIDGE

City

CLEMENTON

State

NJ

Zip Code

8021

FEC ID number of contributing
federal political committee.

C

Name of Employer
ARANON CORP

Occupation

RECEPTIONIST/BOOKKEEPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 0 / 2 0 0 7

Transaction ID: INC.A.860

Amount of Each Receipt this Period

220.00

SUBTOTAL of Receipts This Page (optional)

514.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS HERMIONE W LEWIS

Mailing Address 17502 102ND AVE NE APT 112

City

BOTHELL

State

WA

Zip Code

98011

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 0 / 2 0 0 7

Transaction ID: INC.A.240

Amount of Each Receipt this Period

15.00

B.

Full Name (Last, First, Middle Initial)

MRS KATRINA A MATLOCK

Mailing Address 3665 S RIVER CHURCH RD

City

WOODLEAF

State

NC

Zip Code

27054

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 0 / 2 0 0 7

Transaction ID: INC.A.787

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MRS MARGARET W PIERCE

Mailing Address 2725 SENECA CIR

City

WEST PALM BEACH

State

FL

Zip Code

33409

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

768.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 0 / 2 0 0 7

Transaction ID: INC.A.827

Amount of Each Receipt this Period

88.00

SUBTOTAL of Receipts This Page (optional)

133.00

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 12 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
MS HELEN W SKATRUD

Mailing Address 2601 TOUCHMARK DR UNIT 241

City State Zip Code
APPLETON WI 54914

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

969.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 0 / 2 0 0 7

Transaction ID: INC.A.866

Amount of Each Receipt this Period

15.00

B.

Full Name (Last, First, Middle Initial)
MRS BLANCHE BEA ALLEN

Mailing Address 34117 DUNE RD

City State Zip Code
NEWBERRY SPRINGS CA 92365

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 1 / 2 0 0 7

Transaction ID: INC.A.698

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)
MRS BETTY J ALSON

Mailing Address 819 PARADISE LN

City State Zip Code
BROOKINGS OR 97415

FEC ID number of contributing
federal political committee.

C

Name of Employer
US ARMY/FORT RICHARDSON,
AL

Occupation
RETIRED BUDGET OFFICER/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1062.75

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 1 / 2 0 0 7

Transaction ID: INC.A.574

Amount of Each Receipt this Period

220.00

SUBTOTAL of Receipts This Page (optional)

285.00

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 13 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR & MRS JOHN R BOON

Mailing Address 8304 FRANCONIA RD

City

RICHMOND

State

VA

Zip Code

23227

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 1 / 2 0 0 7

Transaction ID: INC.A.642

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MS VERNIE J DAVIDSON

Mailing Address 12552 CHARDIN PL APT 2

City

SAINT LOUIS

State

MO

Zip Code

63128

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
X-RAY TECHNOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 1 / 2 0 0 7

Transaction ID: INC.A.814

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MRS WILMA N DEMOSS

Mailing Address 104 SAINT JO TER

City

NOCONA

State

TX

Zip Code

76255

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 1 / 2 0 0 7

Transaction ID: INC.A.278

Amount of Each Receipt this Period

5.00

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 14 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS JENNIE LOU DICKSON

Mailing Address 411 E HOADLEY RD

City

PINE BLUFF

State

AR

Zip Code

71602

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

NURSE/BIOLOGY AND CHEMISTRY TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 1 / 2 0 0 7

Transaction ID: INC.A.905

Amount of Each Receipt this Period

44.00

B.

Full Name (Last, First, Middle Initial)

MR CHARLES R DRUMMOND

Mailing Address 17527 COUNTY ROAD 448

City

MOUNT DORA

State

FL

Zip Code

32757

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 1 / 2 0 0 7

Transaction ID: INC.A.1121

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN H GEIMAN

Mailing Address 541 W WALNUT ST

City

HANOVER

State

PA

Zip Code

17331

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 1 / 2 0 0 7

Transaction ID: INC.A.203

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

194.00

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 15 / 428

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR RICHARD S GRIFFITH

Mailing Address PO BOX 91610

City

LAFAYETTE

State

LA

Zip Code

70509

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

INVESTOR/HOMEMAKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	1		2	0	0	7

Transaction ID: INC.A.466

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR THOMAS A SCHOWALTER

Mailing Address N 21 W 26693 CATTAIL CT

City

PEWAUKEE

State

WI

Zip Code

53072

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	1		2	0	0	7

Transaction ID: INC.A.820

Amount of Each Receipt this Period

44.00

C.

Full Name (Last, First, Middle Initial)

MRS JENNIE R PODBIELSKI

Mailing Address 34 MERILINE AVE

City

METHUEN

State

MA

Zip Code

1844

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	2		2	0	0	7

Transaction ID: INC.A.1056

Amount of Each Receipt this Period

44.00

SUBTOTAL of Receipts This Page (optional)

288.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 16 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS VIOLET V CHEAL

Mailing Address 354 KENDAL DR

City

KENNETT SQUARE

State

PA

Zip Code

19348

FEC ID number of contributing
federal political committee.

C

Name of Employer
STATE OF DELEWARE

Occupation

RETIRED TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 3 / 2 0 0 7

Transaction ID: INC.A.613

Amount of Each Receipt this Period

44.00

B.

Full Name (Last, First, Middle Initial)

MR ERIC F ROSS

Mailing Address 2000 S OCEAN BLVD APT 104S

City

PALM BEACH

State

FL

Zip Code

33480

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 3 / 2 0 0 7

Transaction ID: INC.A.988

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MRS MARY JANE RUSH

Mailing Address 352 E 328TH ST

City

WILLOWICK

State

OH

Zip Code

44095

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 3 / 2 0 0 7

Transaction ID: INC.A.1139

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

169.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 17 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MISS AGATHA K SALVIN

Mailing Address 1900 LAKE MICHIGAN DR NW

City

GRAND RAPIDS

State

MI

Zip Code

49504

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 3 / 2 0 0 7

Transaction ID: INC.A.319

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MS JOSEPHINE E WOOD

Mailing Address 1400 ENTERPRISE DR APT N330

City

LYNCHBURG

State

VA

Zip Code

24502

FEC ID number of contributing
federal political committee.

C

Name of Employer
FAIRFAX COUNTY SCHOOL BOA-
RD

Occupation
RETIRED TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 3 / 2 0 0 7

Transaction ID: INC.A.402

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR ELLIOT A BAINES

Mailing Address 360 INDIAN HARBOR RD

City

VERO BEACH

State

FL

Zip Code

32963

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 6 / 2 0 0 7

Transaction ID: INC.A.452

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 428

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS REBA GOLPHENEE

Mailing Address 6007 COLDBROOK AVE

City

LAKEWOOD

State

CA

Zip Code

90713

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	6	/	2	0	0	7

Transaction ID: INC.A.1076

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MS CAROLYN P HAMAN

Mailing Address 8917 S PALMER RD
PO BOX 176

City

NEW CARLISLE

State

OH

Zip Code

45344

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

662.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	6	/	2	0	0	7

Transaction ID: INC.A.548

Amount of Each Receipt this Period

44.00

C.

Full Name (Last, First, Middle Initial)

MR ELDRED METZGER

Mailing Address 12223 S STATE ROAD 13

City

CLAYPOOL

State

IN

Zip Code

46510

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	6	/	2	0	0	7

Transaction ID: INC.A.500

Amount of Each Receipt this Period

44.00

SUBTOTAL of Receipts This Page (optional)

113.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 19 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS ELLEN M NOFTZ

Mailing Address 1238 BALMORAL AVE

City

WESTCHESTER

State

IL

Zip Code

60154

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 6 / 2 0 0 7

Transaction ID: INC.A.1037

Amount of Each Receipt this Period

44.00

B.

Full Name (Last, First, Middle Initial)

MRS KATHERINE S SMOOT

Mailing Address 1 JEFFERSON FERRY DR
APT. # 6169

City

CENTEREACH

State

NY

Zip Code

11720

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.75

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 6 / 2 0 0 7

Transaction ID: INC.A.579

Amount of Each Receipt this Period

220.00

C.

Full Name (Last, First, Middle Initial)

MR WILSON E VANDERBURG

Mailing Address 2133 NW BEECHWOOD PL

City

CORVALLIS

State

OR

Zip Code

97330

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 6 / 2 0 0 7

Transaction ID: INC.A.506

Amount of Each Receipt this Period

88.00

SUBTOTAL of Receipts This Page (optional)

352.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 20 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR AUBREY J BOURGEOIS

Mailing Address 10100 HILLVIEW DR APT 608

City

PENSACOLA

State

FL

Zip Code

32514

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 7 / 2 0 0 7

Transaction ID: INC.A.1136

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

DR T C JONES

Mailing Address 1301 ARENAL CT

City

SANTA FE

State

NM

Zip Code

87501

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 7 / 2 0 0 7

Transaction ID: INC.A.455

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MRS GERTRUDE PETROSE

Mailing Address 2905 W 71ST ST

City

CHICAGO

State

IL

Zip Code

60629

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.75

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 7 / 2 0 0 7

Transaction ID: INC.A.624

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

235.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 21 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS PAULINE SALYERS

Mailing Address 2916 HOYLAK CT

City

DAYTON

State

OH

Zip Code

45439

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 7 / 2 0 0 7

Transaction ID: INC.A.781

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MS HELEN W SKATRUD

Mailing Address 2601 TOUCHMARK DR UNIT 241

City

APPLETON

State

WI

Zip Code

54914

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

969.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 7 / 2 0 0 7

Transaction ID: INC.A.867

Amount of Each Receipt this Period

44.00

C.

Full Name (Last, First, Middle Initial)

MRS MARGARET L BROWN

Mailing Address 2001 W RUDASILL RD APT 5301

City

TUCSON

State

AZ

Zip Code

85704

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.75

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 9 / 2 0 0 7

Transaction ID: INC.A.968

Amount of Each Receipt this Period

44.00

SUBTOTAL of Receipts This Page (optional)

113.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 22 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR JOHN RODGERS CAMP, JR

Mailing Address 2532 SW 50TH BLVD

City

GAINESVILLE

State

FL

Zip Code

32608

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

RETIRED ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: INC.A.386

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR DAVID L LUKE, III

Mailing Address 775 PARK AVE

City

NEW YORK

State

NY

Zip Code

10021

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: INC.A.851

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR & MRS JOHN R BOON

Mailing Address 8304 FRANCONIA RD

City

RICHMOND

State

VA

Zip Code

23227

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 3 / 2 0 0 7

Transaction ID: INC.A.643

Amount of Each Receipt this Period

44.00

SUBTOTAL of Receipts This Page (optional)

194.00

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS ALICE R FINNERTY

Mailing Address 5 SUTTON PL

City

ISLIP

State

NY

Zip Code

11751

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 3 / 2 0 0 7

Transaction ID: INC.A.798

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR PHILIP O GEIER, JR

Mailing Address 6000 REDBIRD HOLLOW LN

City

CINCINNATI

State

OH

Zip Code

45243

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

588.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 3 / 2 0 0 7

Transaction ID: INC.A.308

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MS VERA RUTH GOODRICH

Mailing Address 25738 COUNTY ROAD Z

City

LA JUNTA

State

CO

Zip Code

81050

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOSPICE VOLUNTEER/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.75

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 3 / 2 0 0 7

Transaction ID: INC.A.1117

Amount of Each Receipt this Period

44.00

SUBTOTAL of Receipts This Page (optional)

194.00

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR CLIFFORD N HALL

Mailing Address 9047 DICKENSON RD

City

WINNEBAGO

State

IL

Zip Code

61088

FEC ID number of contributing
federal political committee.

C

Name of Employer
SUNDSTRAND CORP

Occupation

SELF-EMPLOYED/RETIRED/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 3 / 2 0 0 7

Transaction ID: INC.A.412

Amount of Each Receipt this Period

44.00

B.

Full Name (Last, First, Middle Initial)

MRS FERN B HILSTAD

Mailing Address PO BOX 193

City

CIRCLE

State

MT

Zip Code

59215

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

397.75

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 3 / 2 0 0 7

Transaction ID: INC.A.845

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

DR MILDRED M THOMAS

Mailing Address 2935 N WILLAMETTE BLVD

City

PORTLAND

State

OR

Zip Code

97217

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 3 / 2 0 0 7

Transaction ID: INC.A.678

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

179.00

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 25 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS VALERIE M WOODARD

Mailing Address 4000 SW 78TH ST

City

GAINESVILLE

State

FL

Zip Code

32608

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 3 / 2 0 0 7

Transaction ID: INC.A.395

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MRS OLETHA E YOUNG

Mailing Address 730 W JEFFERSON ST APT 242

City

MORTON

State

IL

Zip Code

61550

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 3 / 2 0 0 7

Transaction ID: INC.A.516

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR WALTER R CHANDLER

Mailing Address 608 SNUGGS ST

City

ALBEMARLE

State

NC

Zip Code

28001

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.00

Date of Receipt

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

Transaction ID: INC.A.961

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

135.00

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 26 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR JOHN H GEIMAN

Mailing Address 541 W WALNUT ST

City

HANOVER

State

PA

Zip Code

17331

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.00

Date of Receipt

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

Transaction ID: INC.A.204

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MRS JANET W HADDEN

Mailing Address 5406 MAGNOLIA ST

City

PEARLAND

State

TX

Zip Code

77584

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

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

Transaction ID: INC.A.737

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

MR ADRIAN H HUERTER

Mailing Address 841 TEXAS AVE

City

SAN ANTONIO

State

TX

Zip Code

78201

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.75

Date of Receipt

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

Transaction ID: INC.A.248

Amount of Each Receipt this Period

3.00

SUBTOTAL of Receipts This Page (optional)

98.00

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
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FOR LINE NUMBER: PAGE 27 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS PATRICIA A HUGHES

Mailing Address 107 CASA LINDA DR

City

WOODLAND

State

CA

Zip Code

95695

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

RET TENANT FARMER/LANDOWNER/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

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

Transaction ID: INC.A.843

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MRS CONSTANCE D HUNTER

Mailing Address 4329 S ATLANTIC AVE

City

PORT ORANGE

State

FL

Zip Code

32127

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

426.00

Date of Receipt

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

Transaction ID: INC.A.172

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MRS CONSTANCE D HUNTER

Mailing Address 4329 S ATLANTIC AVE

City

PORT ORANGE

State

FL

Zip Code

32127

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

426.00

Date of Receipt

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

Transaction ID: INC.A.173

Amount of Each Receipt this Period

44.00

SUBTOTAL of Receipts This Page (optional)

194.00

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR FRED W KERR

Mailing Address 5310 HIGHWAY 65

City

CHILLICOTHE

State

MO

Zip Code

64601

FEC ID number of contributing
federal political committee.

C

Name of Employer
K FARMS, INC

Occupation

SELF-EMPLOYED FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.00

Date of Receipt

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

Transaction ID: INC.A.199

Amount of Each Receipt this Period

44.00

B.

Full Name (Last, First, Middle Initial)

MR FRED W KERR

Mailing Address 5310 HIGHWAY 65

City

CHILLICOTHE

State

MO

Zip Code

64601

FEC ID number of contributing
federal political committee.

C

Name of Employer
K FARMS, INC

Occupation

SELF-EMPLOYED FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.00

Date of Receipt

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

Transaction ID: INC.A.198

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MRS FRANCES S TAYLOR

Mailing Address 62 TAYLOR LN

City

SPRUCE PINE

State

AL

Zip Code

35585

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: INC.A.1063

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

114.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS JUANITA L ALEXANDER

Mailing Address 2724 ALCAZAR ST NE

City

ALBUQUERQUE

State

NM

Zip Code

87110

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

ELEMENTARY TEACHER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 6 / 2 0 0 7

Transaction ID: INC.A.437

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MRS BLANCHE BEA ALLEN

Mailing Address 34117 DUNE RD

City

NEWBERRY SPRINGS

State

CA

Zip Code

92365

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 6 / 2 0 0 7

Transaction ID: INC.A.699

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MR CONRAD C DE LEEUW

Mailing Address 11 CHAPMAN DR

City

LITTLE FERRY

State

NJ

Zip Code

7643

FEC ID number of contributing
federal political committee.

C

Name of Employer
COACH USA

Occupation

DRIVER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 6 / 2 0 0 7

Transaction ID: INC.A.664

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

145.00

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
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FOR LINE NUMBER: PAGE 30 / 428

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR OBERLIN J EVENSON

Mailing Address 580 SAN GORGONIO ST

City

SAN DIEGO

State

CA

Zip Code

92106

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 6 / 2 0 0 7

Transaction ID: INC.A.333

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

MS JANICE B LINDBERG

Mailing Address 1550 MOUNT OLIVET RD

City

ZIRCONIA

State

NC

Zip Code

28790

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 6 / 2 0 0 7

Transaction ID: INC.A.916

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

MR HENRY O ODEGARD

Mailing Address 89518 FIR BUTTE RD

City

EUGENE

State

OR

Zip Code

97402

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 6 / 2 0 0 7

Transaction ID: INC.A.329

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

175.00

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
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FOR LINE NUMBER: PAGE 31 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS BARBARA J PORBE

Mailing Address 2649 N DUNFIELD ST

City

ORANGE

State

CA

Zip Code

92865

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

RETIRED PRIVATE VIOLIN TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 6 / 2 0 0 7

Transaction ID: INC.A.1126

Amount of Each Receipt this Period

44.00

B.

Full Name (Last, First, Middle Initial)

MS PAULINE SALYERS

Mailing Address 2916 HOYLAK CT

City

DAYTON

State

OH

Zip Code

45439

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 6 / 2 0 0 7

Transaction ID: INC.A.782

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MRS JOYCE A CROWTHER

Mailing Address 23500 CRISTO REY DR UNIT 208C

City

CUPERTINO

State

CA

Zip Code

95014

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 7 / 2 0 0 7

Transaction ID: INC.A.1109

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

194.00

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 32 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS VERNIE J DAVIDSON

Mailing Address 12552 CHARDIN PL APT 2

City

SAINT LOUIS

State

MO

Zip Code

63128

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

X-RAY TECHNOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 7 / 2 0 0 7

Transaction ID: INC.A.815

Amount of Each Receipt this Period

44.00

B.

Full Name (Last, First, Middle Initial)

MRS EDNA P HARRISON

Mailing Address 12153 GLENCOE ST

City

THORNTON

State

CO

Zip Code

80241

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 7 / 2 0 0 7

Transaction ID: INC.A.264

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MRS MARJORIE J KING

Mailing Address 50 VIEW POINT DR

City

GREENVILLE

State

SC

Zip Code

29609

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

439.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 7 / 2 0 0 7

Transaction ID: INC.A.288

Amount of Each Receipt this Period

44.00

SUBTOTAL of Receipts This Page (optional)

138.00

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 33 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MISS C VIRGINIA PIERREPONT

Mailing Address 201 CROSSWICKS ST
CLAREEST M001

City State Zip Code
BORDENTOWN NJ 8505

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 7 / 2 0 0 7

Transaction ID: INC.A.724

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

MS HELEN W SKATRUD

Mailing Address 2601 TOUCHMARK DR UNIT 241

City State Zip Code
APPLETON WI 54914

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

969.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 7 / 2 0 0 7

Transaction ID: INC.A.868

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

MR HENRY L WELLS

Mailing Address 6018 MADRA AVE

City State Zip Code
SAN DIEGO CA 92120

FEC ID number of contributing
federal political committee.

C

Name of Employer
SAN DIEGO TRUCK CENTER

Occupation
RETIRED MECHANIC/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

858.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 7 / 2 0 0 7

Transaction ID: INC.A.370

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

120.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 428

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS RITA A BABIN

Mailing Address 710 W LE FEVRE RD APT 203

City

STERLING

State

IL

Zip Code

61081

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	3	0	/	2	0	0	7

Transaction ID: INC.A.861

Amount of Each Receipt this Period

88.00

B.

Full Name (Last, First, Middle Initial)

DR JOHN CHESNICK, JR DO

Mailing Address 5110 CREEKMONT DR

City

CORPUS CHRISTI

State

TX

Zip Code

78413

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	3	0	/	2	0	0	7

Transaction ID: INC.A.1095

Amount of Each Receipt this Period

44.00

C.

Full Name (Last, First, Middle Initial)

MS BETSY H DEBEVOISE

Mailing Address 628 HANCOCK RD

City

WILLIAMSTOWN

State

MA

Zip Code

1267

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	3	0	/	2	0	0	7

Transaction ID: INC.A.856

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

182.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 35 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS ALICE R FINNERTY

Mailing Address 5 SUTTON PL

City

ISLIP

State

NY

Zip Code

11751

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 3 0 / 2 0 0 7

Transaction ID: INC.A.799

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR PHILIP O GEIER, JR

Mailing Address 6000 REDBIRD HOLLOW LN

City

CINCINNATI

State

OH

Zip Code

45243

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

588.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 3 0 / 2 0 0 7

Transaction ID: INC.A.309

Amount of Each Receipt this Period

88.00

C.

Full Name (Last, First, Middle Initial)

MRS MAYME L KAUFFELD

Mailing Address 1512 BROOKHOLLOW DR

City

BATON ROUGE

State

LA

Zip Code

70810

FEC ID number of contributing
federal political committee.

C

Name of Employer
USDA

Occupation

RETIRED RESEARCH ENTOMOLOGIST

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 3 0 / 2 0 0 7

Transaction ID: INC.A.432

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

338.00

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 36 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS JANE LANDAU

Mailing Address 25 W 81ST ST
APT 12B

City State Zip Code
NEW YORK NY 10024

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
RETIRED SECRETARY/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 0 / 2 0 0 7

Transaction ID: INC.A.314

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MRS KATRINA A MATLOCK

Mailing Address 3665 S RIVER CHURCH RD

City State Zip Code
WOODLEAF NC 27054

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 0 / 2 0 0 7

Transaction ID: INC.A.788

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR RICHARD E MEEKER

Mailing Address 605 NE 70TH ST

City State Zip Code
GLADSTONE MO 64118

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 0 / 2 0 0 7

Transaction ID: INC.A.509

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

110.00

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 37 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR ELDRED METZGER

Mailing Address 12223 S STATE ROAD 13

City

CLAYPOOL

State

IN

Zip Code

46510

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 3 0 / 2 0 0 7

Transaction ID: INC.A.501

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MISS C VIRGINIA PIERREPONT

Mailing Address 201 CROSSWICKS ST
CLAREEST M001

City

BORDENTOWN

State

NJ

Zip Code

8505

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 3 0 / 2 0 0 7

Transaction ID: INC.A.725

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

MRS JENNIE R PODBIELSKI

Mailing Address 34 MERILINE AVE

City

METHUEN

State

MA

Zip Code

1844

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 3 0 / 2 0 0 7

Transaction ID: INC.A.1057

Amount of Each Receipt this Period

44.00

SUBTOTAL of Receipts This Page (optional)

129.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 38 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS JANICE E SHALLENBERG

Mailing Address 140 WINDSOR PARK DR APT E301

City

CAROL STREAM

State

IL

Zip Code

60188

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 3 0 / 2 0 0 7

Transaction ID: INC.A.716

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR ROBERT SUNDERLAND

Mailing Address 953 PYRITE AVE

City

HENDERSON

State

NV

Zip Code

89011

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1122.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 3 0 / 2 0 0 7

Transaction ID: INC.A.667

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

MRS JUANITA L ALEXANDER

Mailing Address 2724 ALCAZAR ST NE

City

ALBUQUERQUE

State

NM

Zip Code

87110

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
ELEMENTARY TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 3 1 / 2 0 0 7

Transaction ID: INC.A.438

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

80.00

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 39 / 428

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS AGNES M ANNEN

Mailing Address 705 TAYLOR ST

City

MOUNT ANGEL

State

OR

Zip Code

97362

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

414.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	0	7

Transaction ID: INC.A.539

Amount of Each Receipt this Period

88.00

B.

Full Name (Last, First, Middle Initial)

MRS VIRGINIA H BARNES

Mailing Address 101 COUNTRY COVE DR

City

CLINTON

State

MS

Zip Code

39056

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

788.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	0	7

Transaction ID: INC.A.1081

Amount of Each Receipt this Period

44.00

C.

Full Name (Last, First, Middle Initial)

MRS MARGARET L BROWN

Mailing Address 2001 W RUDASILL RD APT 5301

City

TUCSON

State

AZ

Zip Code

85704

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

265.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	0	7

Transaction ID: INC.A.970

Amount of Each Receipt this Period

44.00

SUBTOTAL of Receipts This Page (optional)

176.00

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 40 / 428

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS MARGARET L BROWN

Mailing Address 2001 W RUDASILL RD APT 5301

City	State	Zip Code
TUCSON	AZ	85704

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	0	7

Transaction ID: INC.A.969

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR OBERLIN J EVENSON

Mailing Address 580 SAN GORGONIO ST

City	State	Zip Code
SAN DIEGO	CA	92106

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	0	7

Transaction ID: INC.A.334

Amount of Each Receipt this Period

88.00

C.

Full Name (Last, First, Middle Initial)

MR CLIFFORD N HALL

Mailing Address 9047 DICKENSON RD

City	State	Zip Code
WINNEBAGO	IL	61088

FEC ID number of contributing
federal political committee.

C

Name of Employer
SUNDSTRAND CORPOccupation
SELF-EMPLOYED/RETIRED/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	0	7

Transaction ID: INC.A.413

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

338.00

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 41 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS ANGELA HAVERLY

Mailing Address 24 MOSSWOOD TRL

City

DENVILLE

State

NJ

Zip Code

7834

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

363.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 3 1 / 2 0 0 7

Transaction ID: INC.A.193

Amount of Each Receipt this Period

88.00

B.

Full Name (Last, First, Middle Initial)

MRS LESLEY LINSTEADER

Mailing Address 23871 WILLOWS DR APT 135

City

LAGUNA HILLS

State

CA

Zip Code

92653

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED/HOMEMAKER

Occupation

RETIRED BUSINESS FINANCIAL MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

822.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 3 1 / 2 0 0 7

Transaction ID: INC.A.883

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

DR MILDRED M THOMAS

Mailing Address 2935 N WILLAMETTE BLVD

City

PORTLAND

State

OR

Zip Code

97217

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 3 1 / 2 0 0 7

Transaction ID: INC.A.679

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

213.00

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 42 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
MR HENRY L WELLS

Mailing Address 6018 MADRA AVE

City State Zip Code
SAN DIEGO CA 92120

FEC ID number of contributing
federal political committee.

C

Name of Employer
SAN DIEGO TRUCK CENTER

Occupation
RETIRED MECHANIC/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

858.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 1 / 2 0 0 7

Transaction ID: INC.A.371

Amount of Each Receipt this Period

220.00

B.

Full Name (Last, First, Middle Initial)
MRS OLETHA E YOUNG

Mailing Address 730 W JEFFERSON ST APT 242

City State Zip Code
MORTON IL 61550

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 1 / 2 0 0 7

Transaction ID: INC.A.517

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)
MR ELBERT C SMITH

Mailing Address PO BOX 856

City State Zip Code
RENTON WA 98057

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

844.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 1 / 2 0 0 7

Transaction ID: INC.A.999

Amount of Each Receipt this Period

44.00

SUBTOTAL of Receipts This Page (optional)

314.00

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR JOHN K BAKER

Mailing Address 79 SHORELINE DR

City

HILTON HEAD ISLAND

State

SC

Zip Code

29928

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.75

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: INC.A.1008

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MRS MARGARET E DAVENPORT

Mailing Address 825 APPLE VALLEY DR

City

SAN JOSE

State

CA

Zip Code

95125

FEC ID number of contributing
federal political committee.

C

Name of Employer
ESUH SCHOOL DISTRICT

Occupation
RETIRED TEACHER/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

488.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: INC.A.344

Amount of Each Receipt this Period

88.00

C.

Full Name (Last, First, Middle Initial)

MS VERNIE J DAVIDSON

Mailing Address 12552 CHARDIN PL APT 2

City

SAINT LOUIS

State

MO

Zip Code

63128

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
X-RAY TECHNOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: INC.A.816

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

148.00

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS WILMA N DEMOSS

Mailing Address 104 SAINT JO TER

City

NOCONA

State

TX

Zip Code

76255

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: INC.A.279

Amount of Each Receipt this Period

5.00

B.

Full Name (Last, First, Middle Initial)

MS JENNIE LOU DICKSON

Mailing Address 411 E HOADLEY RD

City

PINE BLUFF

State

AR

Zip Code

71602

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
NURSE/BIOLOGY AND CHEMISTRY TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: INC.A.906

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MRS EDDITH G DOWELL

Mailing Address 3513 GILLESPIE AVE

City

NASHVILLE

State

TN

Zip Code

37205

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

860.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: INC.A.1188

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

75.00

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS EDITH FLEMINBERG

Mailing Address 805 LONDONDERRY RD

City

SCHENECTADY

State

NY

Zip Code

12309

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

658.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: INC.A.659

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR BOYD L FUGAL

Mailing Address 504 W 1100 N

City

PLEASANT GROVE

State

UT

Zip Code

84062

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

RETIRED FARMER/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: INC.A.367

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR JAMES WISNER GALLE

Mailing Address 7933 CHADWICK ST

City

PRAIRIE VILLAGE

State

KS

Zip Code

66208

FEC ID number of contributing
federal political committee.

C

Name of Employer
USAF

Occupation

RETIRED LT COL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1890.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: INC.A.1166

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

200.00

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR PHILIP O GEIER, JR

Mailing Address 6000 REDBIRD HOLLOW LN

City

CINCINNATI

State

OH

Zip Code

45243

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

588.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: INC.A.310

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MRS MARTHA ANN PIERCY

Mailing Address 1146 SHENANDOAH RD

City

SAN MARINO

State

CA

Zip Code

91108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

937.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: INC.A.380

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MRS MARTHA ANN PIERCY

Mailing Address 1146 SHENANDOAH RD

City

SAN MARINO

State

CA

Zip Code

91108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

937.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: INC.A.379

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

400.00

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 47 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR WILLIAM C STONUM

Mailing Address 814 DOGWOOD ST
C/O LINDA EDWARDS

City State Zip Code
EXCELSIOR SPRINGS MO 64024

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: INC.A.481

Amount of Each Receipt this Period

44.00

B.

Full Name (Last, First, Middle Initial)

MS JUNE L WELSH

Mailing Address 1111 N COLLEGE AVE

City State Zip Code
CLARKSVILLE AR 72830

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: INC.A.768

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

MRS AGNES M ANNEN

Mailing Address 705 TAYLOR ST

City State Zip Code
MOUNT ANGEL OR 97362

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

414.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 6 / 2 0 0 7

Transaction ID: INC.A.540

Amount of Each Receipt this Period

88.00

SUBTOTAL of Receipts This Page (optional)

282.00

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 48 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS RONNIE BERRY

Mailing Address 15225 SOBEY RD

City

SARATOGA

State

CA

Zip Code

95070

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 6 / 2 0 0 7

Transaction ID: INC.A.1105

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

MRS RONNIE BERRY

Mailing Address 15225 SOBEY RD

City

SARATOGA

State

CA

Zip Code

95070

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 6 / 2 0 0 7

Transaction ID: INC.A.1106

Amount of Each Receipt this Period

44.00

C.

Full Name (Last, First, Middle Initial)

MRS LEOLA Z CLARK

Mailing Address 701 10TH ST SE RM 34-18

City

CEDAR RAPIDS

State

IA

Zip Code

52403

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 6 / 2 0 0 7

Transaction ID: INC.A.688

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

129.00

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS JOYCE A CROWTHER

Mailing Address 23500 CRISTO REY DR UNIT 208C

City

CUPERTINO

State

CA

Zip Code

95014

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 6 / 2 0 0 7

Transaction ID: INC.A.1110

Amount of Each Receipt this Period

44.00

B.

Full Name (Last, First, Middle Initial)

MS JENNIE LOU DICKSON

Mailing Address 411 E HOADLEY RD

City

PINE BLUFF

State

AR

Zip Code

71602

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
NURSE/BIOLOGY AND CHEMISTRY TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 6 / 2 0 0 7

Transaction ID: INC.A.907

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

MR PHILIP O GEIER, JR

Mailing Address 6000 REDBIRD HOLLOW LN

City

CINCINNATI

State

OH

Zip Code

45243

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

588.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 6 / 2 0 0 7

Transaction ID: INC.A.311

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

184.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS ALICE K HAYES

Mailing Address 4014 QUAIL RIDGE DR N APT A

City

BOYNTON BEACH

State

FL

Zip Code

33436

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1481.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 6 / 2 0 0 7

Transaction ID: INC.A.832

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR LORAIN E HENDERSON

Mailing Address 2974 RIDGE CT

City

SANTA CLARA

State

CA

Zip Code

95051

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

ELECTRONICS SUPERVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 6 / 2 0 0 7

Transaction ID: INC.A.184

Amount of Each Receipt this Period

44.00

C.

Full Name (Last, First, Middle Initial)

MS VIOLA S HILL

Mailing Address 902 3RD ST E APT B11

City

ROUNDUP

State

MT

Zip Code

59072

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 6 / 2 0 0 7

Transaction ID: INC.A.454

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

294.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 51 / 428

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS CONSTANCE D HUNTER

Mailing Address 4329 S ATLANTIC AVE

City

PORT ORANGE

State

FL

Zip Code

32127

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

426.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 6 / 2 0 0 7

Transaction ID: INC.A.174

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MRS RUTH E JOHNSON

Mailing Address 212 S 3RD ST

City

NEODESHA

State

KS

Zip Code

66757

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 6 / 2 0 0 7

Transaction ID: INC.A.762

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MRS ERNESTINE MAHAN OWEN

Mailing Address 212 COUNTRY CLUB RD

City

BATESVILLE

State

MS

Zip Code

38606

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 6 / 2 0 0 7

Transaction ID: INC.A.1213

Amount of Each Receipt this Period

900.00

SUBTOTAL of Receipts This Page (optional)

970.00

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
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

DR MILDRED M THOMAS

Mailing Address 2935 N WILLAMETTE BLVD

City

PORTLAND

State

OR

Zip Code

97217

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 6 / 2 0 0 7

Transaction ID: INC.A.680

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MR WILSON E VANDERBURG

Mailing Address 2133 NW BEECHWOOD PL

City

CORVALLIS

State

OR

Zip Code

97330

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 6 / 2 0 0 7

Transaction ID: INC.A.507

Amount of Each Receipt this Period

88.00

C.

Full Name (Last, First, Middle Initial)

MS JUNE L WELSH

Mailing Address 1111 N COLLEGE AVE

City

CLARKSVILLE

State

AR

Zip Code

72830

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 6 / 2 0 0 7

Transaction ID: INC.A.769

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

143.00

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 53 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS OLETHA E YOUNG

Mailing Address 730 W JEFFERSON ST APT 242

City

MORTON

State

IL

Zip Code

61550

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 6 / 2 0 0 7

Transaction ID: INC.A.518

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR ELLIOT A BAINES

Mailing Address 360 INDIAN HARBOR RD

City

VERO BEACH

State

FL

Zip Code

32963

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: INC.A.453

Amount of Each Receipt this Period

2000.00

C.

Full Name (Last, First, Middle Initial)

MR AUBREY J BOURGEOIS

Mailing Address 10100 HILLVIEW DR APT 608

City

PENSACOLA

State

FL

Zip Code

32514

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.00

Date of Receipt

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

Transaction ID: INC.A.1137

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

2100.00

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 54 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR WALTER R CHANDLER

Mailing Address 608 SNUGGS ST

City

ALBEMARLE

State

NC

Zip Code

28001

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.00

Date of Receipt

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

Transaction ID: INC.A.962

Amount of Each Receipt this Period

44.00

B.

Full Name (Last, First, Middle Initial)

MS VIOLET V CHEAL

Mailing Address 354 KENDAL DR

City

KENNETT SQUARE

State

PA

Zip Code

19348

FEC ID number of contributing
federal political committee.

C

Name of Employer
STATE OF DELEWARE

Occupation

RETIRED TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.00

Date of Receipt

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

Transaction ID: INC.A.614

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MRS HELEN D GELARDI

Mailing Address 200 DEER VALLEY RD APT 2G

City

SAN RAFAEL

State

CA

Zip Code

94903

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

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

Transaction ID: INC.A.277

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

294.00

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 55 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS PHYLLIS M GORMAN

Mailing Address 4700 TOWN RIDGE DR

City

GREENSBORO

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

273.00

Date of Receipt

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

Transaction ID: INC.A.300

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

DR JOHN J HARTFORD, MD

Mailing Address 3644 TERRA GRANADA DR
#2A

City

WALNUT CREEK

State

CA

Zip Code

94595

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

RETIRED M.D.

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

243.00

Date of Receipt

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

Transaction ID: INC.A.181

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MRS ADRIANNA LEYENDEKKER

Mailing Address 9001 AVENUE 360

City

VISALIA

State

CA

Zip Code

93291

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

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

Transaction ID: INC.A.272

Amount of Each Receipt this Period

220.00

SUBTOTAL of Receipts This Page (optional)

320.00

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 56 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS MARGARET W PIERCE

Mailing Address 2725 SENECA CIR

City

WEST PALM BEACH

State

FL

Zip Code

33409

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

768.00

Date of Receipt

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

Transaction ID: INC.A.828

Amount of Each Receipt this Period

88.00

B.

Full Name (Last, First, Middle Initial)

MISS C VIRGINIA PIERREPONT

Mailing Address 201 CROSSWICKS ST
CLAREEST M001

City

BORDENTOWN

State

NJ

Zip Code

8505

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: INC.A.726

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MRS JEANETTE M RODEGHIER

Mailing Address 1440 TOWNSHIP AVE

City

WISCONSIN RAPIDS

State

WI

Zip Code

54494

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

708.00

Date of Receipt

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

Transaction ID: INC.A.732

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

158.00

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 57 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS MARJORIE K SHEVLIN

Mailing Address 1148 MOUNTAIN CREEK RD APT 108

City

CHATTANOOGA

State

TN

Zip Code

37405

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: INC.A.891

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

DR MILDRED M THOMAS

Mailing Address 2935 N WILLAMETTE BLVD

City

PORTLAND

State

OR

Zip Code

97217

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

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

Transaction ID: INC.A.681

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MS JANE COMBS WARNOCK

Mailing Address 309 MIDVALE TERRACE

City

SEBASTIAN

State

FL

Zip Code

32958

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3250.00

Date of Receipt

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

Transaction ID: INC.A.937

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

625.00

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 58 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
MS JANE LANDAU

Mailing Address 25 W 81ST ST
APT 12B

City State Zip Code
NEW YORK NY 10024

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
RETIRED SECRETARY/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

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

Transaction ID: INC.A.315

Amount of Each Receipt this Period

44.00

B.

Full Name (Last, First, Middle Initial)
MR GUY T MCBRIDE, JR

Mailing Address 2615 OAK DR UNIT 13

City State Zip Code
LAKEWOOD CO 80215

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

591.00

Date of Receipt

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

Transaction ID: INC.A.955

Amount of Each Receipt this Period

44.00

C.

Full Name (Last, First, Middle Initial)
MS LEONA RULE

Mailing Address 6104 W COURT ST

City State Zip Code
FLINT MI 48532

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

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

Transaction ID: INC.A.840

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

288.00

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 59 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS MARY JANE RUSH

Mailing Address 352 E 328TH ST

City

WILLOWICK

State

OH

Zip Code

44095

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

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

Transaction ID: INC.A.1140

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

FATHER JAMES P RYAN

Mailing Address 2828 SLOAT RD

City

PEBBLE BEACH

State

CA

Zip Code

93953

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

RETIRED CATHOLIC PRIEST/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

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

Transaction ID: INC.A.218

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MRS ANNIE D WILSON

Mailing Address 254 NORMAN DR

City

CRANBERRY TWP

State

PA

Zip Code

16066

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: INC.A.383

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

140.00

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 60 / 428

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.Full Name (Last, First, Middle Initial)
MS DONNA P WOOLLEY

Mailing Address PO BOX 43

City	State	Zip Code
DRAIN	OR	97435

FEC ID number of contributing
federal political committee.

C

Name of Employer
EAGLE'S VIEW MANAGEMENT
CO.Occupation
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: INC.A.233

Amount of Each Receipt this Period

100.00

B.Full Name (Last, First, Middle Initial)
MRS JUANITA L ALEXANDER

Mailing Address 2724 ALCAZAR ST NE

City	State	Zip Code
ALBUQUERQUE	NM	87110

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
ELEMENTARY TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	9		2	0	0	7

Transaction ID: INC.A.439

Amount of Each Receipt this Period

30.00

C.Full Name (Last, First, Middle Initial)
MRS MARGARET L BROWN

Mailing Address 2001 W RUDASILL RD APT 5301

City	State	Zip Code
TUCSON	AZ	85704

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	9		2	0	0	7

Transaction ID: INC.A.971

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

205.00

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 61 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS PATRICIA B CARMODY

Mailing Address 900 UNIVERSITY ST APT 17H

City

SEATTLE

State

WA

Zip Code

98101

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 9 / 2 0 0 7

Transaction ID: INC.A.630

Amount of Each Receipt this Period

44.00

B.

Full Name (Last, First, Middle Initial)

MR OBERLIN J EVENSON

Mailing Address 580 SAN GORGONIO ST

City

SAN DIEGO

State

CA

Zip Code

92106

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 9 / 2 0 0 7

Transaction ID: INC.A.335

Amount of Each Receipt this Period

220.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN H GEIMAN

Mailing Address 541 W WALNUT ST

City

HANOVER

State

PA

Zip Code

17331

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 9 / 2 0 0 7

Transaction ID: INC.A.205

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

314.00

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 62 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS REBA GOLPHENEE

Mailing Address 6007 COLDBROOK AVE

City

LAKEWOOD

State

CA

Zip Code

90713

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 9 / 2 0 0 7

Transaction ID: INC.A.1077

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MS CAROLYN P HAMAN

Mailing Address 8917 S PALMER RD
PO BOX 176

City

NEW CARLISLE

State

OH

Zip Code

45344

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

662.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 9 / 2 0 0 7

Transaction ID: INC.A.549

Amount of Each Receipt this Period

88.00

C.

Full Name (Last, First, Middle Initial)

MR ALDEN T HARRIS, SR

Mailing Address 226 WILLIAMS LN

City

BIGFORK

State

MT

Zip Code

59911

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

RETIRED/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 9 / 2 0 0 7

Transaction ID: INC.A.1144

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

388.00

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
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS JANICE B LINDBERG

Mailing Address 1550 MOUNT OLIVET RD

City

ZIRCONIA

State

NC

Zip Code

28790

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 9 / 2 0 0 7

Transaction ID: INC.A.917

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MISS C VIRGINIA PIERREPONT

Mailing Address 201 CROSSWICKS ST
CLAREEST M001

City

BORDENTOWN

State

NJ

Zip Code

8505

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 9 / 2 0 0 7

Transaction ID: INC.A.727

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MR RODGER C SCOTT

Mailing Address 20405 SE 344TH ST

City

AUBURN

State

WA

Zip Code

98092

FEC ID number of contributing
federal political committee.

C

Name of Employer
SCOTTY'S GENERAL CONSTRUCTION

Occupation
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1650.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 9 / 2 0 0 7

Transaction ID: INC.A.236

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

570.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR EXCEL I SMITH

Mailing Address PO BOX 187

City

TRINCHERA

State

CO

Zip Code

81081

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 9 / 2 0 0 7

Transaction ID: INC.A.364

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

DR MILDRED M THOMAS

Mailing Address 2935 N WILLAMETTE BLVD

City

PORTLAND

State

OR

Zip Code

97217

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 9 / 2 0 0 7

Transaction ID: INC.A.682

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

DR MILDRED M THOMAS

Mailing Address 2935 N WILLAMETTE BLVD

City

PORTLAND

State

OR

Zip Code

97217

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 9 / 2 0 0 7

Transaction ID: INC.A.683

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

65.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR HENRY L WELLS

Mailing Address 6018 MADRA AVE

City

SAN DIEGO

State

CA

Zip Code

92120

FEC ID number of contributing
federal political committee.

C

Name of Employer
SAN DIEGO TRUCK CENTER

Occupation

RETIRED MECHANIC/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

858.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 9 / 2 0 0 7

Transaction ID: INC.A.372

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MRS AGNES M ANNEN

Mailing Address 705 TAYLOR ST

City

MOUNT ANGEL

State

OR

Zip Code

97362

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

414.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 0 / 2 0 0 7

Transaction ID: INC.A.541

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR CALVIN R ARNOLD

Mailing Address 1010 REED AVE

City

CHEYENNE

State

WY

Zip Code

82007

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 0 / 2 0 0 7

Transaction ID: INC.A.994

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

320.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS LILLIE K BELK DAVIS

Mailing Address 2340 WHITES MILL RD

City

SUMTER

State

SC

Zip Code

29153

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 0 / 2 0 0 7

Transaction ID: INC.A.898

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MS JANE COMBS WARNOCK

Mailing Address 309 MIDVALE TERRACE

City

SEBASTIAN

State

FL

Zip Code

32958

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 0 / 2 0 0 7

Transaction ID: INC.A.938

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MRS JOYCE A CROWTHER

Mailing Address 23500 CRISTO REY DR UNIT 208C

City

CUPERTINO

State

CA

Zip Code

95014

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 0 / 2 0 0 7

Transaction ID: INC.A.1111

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

245.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS MARGARET E DAVENPORT

Mailing Address 825 APPLE VALLEY DR

City

SAN JOSE

State

CA

Zip Code

95125

FEC ID number of contributing
federal political committee.

C

Name of Employer
ESUH SCHOOL DISTRICT

Occupation

RETIRED TEACHER/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

488.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 0 / 2 0 0 7

Transaction ID: INC.A.345

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

MRS MAXINE DUFF

Mailing Address 415 TUSCULUM RD APT K20
MCMURRAY MONOR APTS

City

NASHVILLE

State

TN

Zip Code

37211

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 0 / 2 0 0 7

Transaction ID: INC.A.1217

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR PHILIP O GEIER, JR

Mailing Address 6000 REDBIRD HOLLOW LN

City

CINCINNATI

State

OH

Zip Code

45243

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

588.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 0 / 2 0 0 7

Transaction ID: INC.A.312

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR LORAIN E HENDERSON

Mailing Address 2974 RIDGE CT

City

SANTA CLARA

State

CA

Zip Code

95051

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

ELECTRONICS SUPERVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 0 / 2 0 0 7

Transaction ID: INC.A.185

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

MRS BEVERLY E HORNBY

Mailing Address 324 EL MODENA AVE

City

NEWPORT BEACH

State

CA

Zip Code

92663

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 0 / 2 0 0 7

Transaction ID: INC.A.663

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MS FRANCES B HUME

Mailing Address 489 VILLAGE PL

City

LONGWOOD

State

FL

Zip Code

32779

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 0 / 2 0 0 7

Transaction ID: INC.A.1215

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

335.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS HELEN A MAHURIN

Mailing Address 501 W 107TH ST APT 211

City

KANSAS CITY

State

MO

Zip Code

64114

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.75

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 0 / 2 0 0 7

Transaction ID: INC.A.984

Amount of Each Receipt this Period

88.00

B.

Full Name (Last, First, Middle Initial)

MRS KATRINA A MATLOCK

Mailing Address 3665 S RIVER CHURCH RD

City

WOODLEAF

State

NC

Zip Code

27054

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 0 / 2 0 0 7

Transaction ID: INC.A.789

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

MRS BETTE J POLIQUIN

Mailing Address 49220 SUNROSE LN

City

PALM DESERT

State

CA

Zip Code

92260

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 0 / 2 0 0 7

Transaction ID: INC.A.554

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

173.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR ROBERT G ROHWER

Mailing Address 1700 HIDDEN OAKS DR

City

STILLWATER

State

OK

Zip Code

74074

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 0 / 2 0 0 7

Transaction ID: INC.A.990

Amount of Each Receipt this Period

220.00

B.

Full Name (Last, First, Middle Initial)

MR JAMES F WYCHGEL

Mailing Address 109 RIDGE RD

City

CHOCOWINITY

State

NC

Zip Code

27817

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 0 / 2 0 0 7

Transaction ID: INC.A.1086

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MRS AGNES V ANDERSON

Mailing Address 890 WIXFORD WAY

City

SACRAMENTO

State

CA

Zip Code

95864

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 3 / 2 0 0 7

Transaction ID: INC.A.451

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

820.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR ARTHUR E BURGNER

Mailing Address 808 HIGHLAND DR SE

City

TUMWATER

State

WA

Zip Code

98501

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 3 / 2 0 0 7

Transaction ID: INC.A.922

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR PHILIP O GEIER, JR

Mailing Address 6000 REDBIRD HOLLOW LN

City

CINCINNATI

State

OH

Zip Code

45243

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

588.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 3 / 2 0 0 7

Transaction ID: INC.A.313

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MRS REBA GOLPHENEE

Mailing Address 6007 COLD BROOK AVE

City

LAKEWOOD

State

CA

Zip Code

90713

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 3 / 2 0 0 7

Transaction ID: INC.A.1078

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS CONSTANCE D HUNTER

Mailing Address 4329 S ATLANTIC AVE

City

PORT ORANGE

State

FL

Zip Code

32127

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

426.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 3 / 2 0 0 7

Transaction ID: INC.A.175

Amount of Each Receipt this Period

44.00

B.

Full Name (Last, First, Middle Initial)

MRS MARJORIE J KING

Mailing Address 50 VIEW POINT DR

City

GREENVILLE

State

SC

Zip Code

29609

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

439.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 3 / 2 0 0 7

Transaction ID: INC.A.289

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MRS KATRINA A MATLOCK

Mailing Address 3665 S RIVER CHURCH RD

City

WOODLEAF

State

NC

Zip Code

27054

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 3 / 2 0 0 7

Transaction ID: INC.A.790

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

164.00

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
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS JANICE E SHALLENBERG

Mailing Address 140 WINDSOR PARK DR APT E301

City

CAROL STREAM

State

IL

Zip Code

60188

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 3 / 2 0 0 7

Transaction ID: INC.A.717

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR MARVIN H SHUETT

Mailing Address 171 OAKWOOD BLVD
PO BOX 66

City

HUSTISFORD

State

WI

Zip Code

53034

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 3 / 2 0 0 7

Transaction ID: INC.A.813

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN K BAKER

Mailing Address 79 SHORELINE DR

City

HILTON HEAD ISLAND

State

SC

Zip Code

29928

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.75

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 4 / 2 0 0 7

Transaction ID: INC.A.1009

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS FUMIE BOYCE

Mailing Address 4532 INTELCO LOOP SE APT 354

City

LACEY

State

WA

Zip Code

98503

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4020.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 4 / 2 0 0 7

Transaction ID: INC.A.569

Amount of Each Receipt this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

MS JANE COMBS WARNOCK

Mailing Address 309 MIDVALE TERRACE

City

SEBASTIAN

State

FL

Zip Code

32958

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 4 / 2 0 0 7

Transaction ID: INC.A.939

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR CHARLES R DRUMMOND

Mailing Address 17527 COUNTY ROAD 448

City

MOUNT DORA

State

FL

Zip Code

32757

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 4 / 2 0 0 7

Transaction ID: INC.A.1122

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

2650.00

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR SMITH L ELDER

Mailing Address 10604 BIG THICKET DR

City

DALLAS

State

TX

Zip Code

75217

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 4 / 2 0 0 7

Transaction ID: INC.A.705

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR RICHARD S GRIFFITH

Mailing Address PO BOX 91610

City

LAFAYETTE

State

LA

Zip Code

70509

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
INVESTOR/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 4 / 2 0 0 7

Transaction ID: INC.A.467

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MS MAUDE L HOLDEN

Mailing Address 8352 PONDVIEW LN

City

ENGLEWOOD

State

FL

Zip Code

34224

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 4 / 2 0 0 7

Transaction ID: INC.A.591

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

200.00

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
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR ADRIAN H HUERTER

Mailing Address 841 TEXAS AVE

City

SAN ANTONIO

State

TX

Zip Code

78201

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.75

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 4 / 2 0 0 7

Transaction ID: INC.A.249

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MRS MAYME L KAUFFELD

Mailing Address 1512 BROOKHOLLOW DR

City

BATON ROUGE

State

LA

Zip Code

70810

FEC ID number of contributing
federal political committee.

C

Name of Employer
USDA

Occupation
RETIRED RESEARCH ENTOMOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 4 / 2 0 0 7

Transaction ID: INC.A.433

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

MRS ELVA B LENDT

Mailing Address 3967 GRAPEFRUIT CIR

City

LAS VEGAS

State

NV

Zip Code

89103

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

578.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 4 / 2 0 0 7

Transaction ID: INC.A.1147

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

155.00

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS WILHELMINE E LONG

Mailing Address 1817 W NORWOOD ST

City

CHICAGO

State

IL

Zip Code

60660

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 4 / 2 0 0 7

Transaction ID: INC.A.750

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MRS GLENNA K ROBERTS

Mailing Address 4100 E FLETCHER AVE APT 805

City

TAMPA

State

FL

Zip Code

33613

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 4 / 2 0 0 7

Transaction ID: INC.A.740

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MRS GLENNA K ROBERTS

Mailing Address 4100 E FLETCHER AVE APT 805

City

TAMPA

State

FL

Zip Code

33613

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 4 / 2 0 0 7

Transaction ID: INC.A.741

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

135.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS ELLEN C ROUTSON

Mailing Address 1401 HERMITS WAY

City State Zip Code
 THE DALLES OR 97058

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

732.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 1 4 / 2 0 0 7

Transaction ID: INC.A.325

Amount of Each Receipt this Period

88.00

B.

Full Name (Last, First, Middle Initial)

FATHER JAMES P RYAN

Mailing Address 2828 SLOAT RD

City State Zip Code
 PEBBLE BEACH CA 93953

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
RETIRED CATHOLIC PRIEST/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 1 4 / 2 0 0 7

Transaction ID: INC.A.219

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MRS DOROTHY L SAPLATA

Mailing Address 5304 HARRY S TRUMAN DR APT 304

City State Zip Code
 GRANDVIEW MO 64030

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 1 4 / 2 0 0 7

Transaction ID: INC.A.347

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

238.00

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 79 / 428

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS EUTEVA C SKOW

Mailing Address 17200 W BELL RD LOT 2311

City

SURPRISE

State

AZ

Zip Code

85374

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 4 / 2 0 0 7

Transaction ID: INC.A.603

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR EXCEL I SMITH

Mailing Address PO BOX 187

City

TRINCHERA

State

CO

Zip Code

81081

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 4 / 2 0 0 7

Transaction ID: INC.A.365

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MS MILDRED F SOUTHERN

Mailing Address 933 KENLEIGH CIR

City

WINSTON SALEM

State

NC

Zip Code

27106

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

727.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 4 / 2 0 0 7

Transaction ID: INC.A.1015

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS AURORA VEGA

Mailing Address 251 S WALNUT AVE APT 111

City

SAN DIMAS

State

CA

Zip Code

91773

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 4 / 2 0 0 7

Transaction ID: INC.A.804

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR DAVID H BURROWS

Mailing Address 2301 STANLEY AVE SE
PO BOX 24233

City

ROANOKE

State

VA

Zip Code

24014

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 5 / 2 0 0 7

Transaction ID: INC.A.274

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR IRWIN J ELESON

Mailing Address 816 ROCHESTER DR

City

BILLINGS

State

MT

Zip Code

59101

FEC ID number of contributing
federal political committee.

C

Name of Employer
YELLOWSTONE BOYS AND GIRLS
RANCH

Occupation
SEMI-RETIRED MAINTENANCE/PUBLIC RELATI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 5 / 2 0 0 7

Transaction ID: INC.A.490

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

120.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR IRWIN J ELESON

Mailing Address 816 ROCHESTER DR

City

BILLINGS

State

MT

Zip Code

59101

FEC ID number of contributing
federal political committee.

C

Name of Employer

YELLOWSTONE BOYS AND GIRLS
RANCH

Occupation

SEMI-RETIRED MAINTENANCE/PUBLIC RELATI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 5 / 2 0 0 7

Transaction ID: INC.A.489

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MRS GLENNA K ROBERTS

Mailing Address 4100 E FLETCHER AVE APT 805

City

TAMPA

State

FL

Zip Code

33613

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 5 / 2 0 0 7

Transaction ID: INC.A.742

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR LYNN O ROHDE

Mailing Address 400 N A1A LOT 71

City

JUPITER

State

FL

Zip Code

33477

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 5 / 2 0 0 7

Transaction ID: INC.A.560

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

175.00

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
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(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR JAMES J SHEA, JR

Mailing Address 28 HILLSDALE DR

City

NEWPORT BEACH

State

CA

Zip Code

92660

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	5		2	0	0	7

Transaction ID: INC.A.252

Amount of Each Receipt this Period

220.00

B.

Full Name (Last, First, Middle Initial)

MS HELEN W SKATRUD

Mailing Address 2601 TOUCHMARK DR UNIT 241

City

APPLETON

State

WI

Zip Code

54914

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

969.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	5		2	0	0	7

Transaction ID: INC.A.869

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MRS EUTEVA C SKOW

Mailing Address 17200 W BELL RD LOT 2311

City

SURPRISE

State

AZ

Zip Code

85374

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	5		2	0	0	7

Transaction ID: INC.A.604

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

265.00

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
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS VERNA LEE STEWART

Mailing Address 16795 COUNTRY KNOLL DR

City

NORTHVILLE

State

MI

Zip Code

48168

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 5 / 2 0 0 7

Transaction ID: INC.A.693

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR ROBERT SUNDERLAND

Mailing Address 953 PYRITE AVE

City

HENDERSON

State

NV

Zip Code

89011

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1122.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 5 / 2 0 0 7

Transaction ID: INC.A.668

Amount of Each Receipt this Period

44.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN M SWORD

Mailing Address 1914 B AVE NE

City

CEDAR RAPIDS

State

IA

Zip Code

52402

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.75

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 5 / 2 0 0 7

Transaction ID: INC.A.1090

Amount of Each Receipt this Period

44.00

SUBTOTAL of Receipts This Page (optional)

188.00

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 84 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR JOHN M SWORD

Mailing Address 1914 B AVE NE

City

CEDAR RAPIDS

State

IA

Zip Code

52402

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.75

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 5 / 2 0 0 7

Transaction ID: INC.A.1089

Amount of Each Receipt this Period

44.00

B.

Full Name (Last, First, Middle Initial)

MR WILLIAM J WALTON

Mailing Address 12 SUNSET VIEW ST

City

SABATTUS

State

ME

Zip Code

4280

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

SERVICE MANAGER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 5 / 2 0 0 7

Transaction ID: INC.A.406

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

MR WILLIAM J WALTON

Mailing Address 12 SUNSET VIEW ST

City

SABATTUS

State

ME

Zip Code

4280

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

SERVICE MANAGER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 5 / 2 0 0 7

Transaction ID: INC.A.405

Amount of Each Receipt this Period

44.00

SUBTOTAL of Receipts This Page (optional)

128.00

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 85 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR ELMER K WHITBECK

Mailing Address 420 LAVENDER LN

City

VIRGINIA BEACH

State

VA

Zip Code

23462

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 5 / 2 0 0 7

Transaction ID: INC.A.831

Amount of Each Receipt this Period

220.00

B.

Full Name (Last, First, Middle Initial)

MR KENNETH L BATCHELDER

Mailing Address 813 S CANYON BLVD
C/O COUNTRY SPICE RCF

City

JOHN DAY

State

OR

Zip Code

97845

FEC ID number of contributing
federal political committee.

C

Name of Employer
COUNTRY SPICE RCF

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

620.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 6 / 2 0 0 7

Transaction ID: INC.A.544

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

MR & MRS JOHN R BOON

Mailing Address 8304 FRANCONIA RD

City

RICHMOND

State

VA

Zip Code

23227

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 6 / 2 0 0 7

Transaction ID: INC.A.644

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

280.00

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 86 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS JEAN B CANAIY

Mailing Address 2688 ELDORADO SPRINGS DR

City

LOVELAND

State

CO

Zip Code

80538

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 6 / 2 0 0 7

Transaction ID: INC.A.925

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MRS REBA GOLPHENEE

Mailing Address 6007 COLDBROOK AVE

City

LAKEWOOD

State

CA

Zip Code

90713

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 6 / 2 0 0 7

Transaction ID: INC.A.1079

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MS PATRICIA A HUGHES

Mailing Address 107 CASA LINDA DR

City

WOODLAND

State

CA

Zip Code

95695

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

RET TENANT FARMER/LANDOWNER/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 6 / 2 0 0 7

Transaction ID: INC.A.844

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

150.00

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 87 / 428

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR ROBERT G KNABE

Mailing Address 710 PATCHESTER DR

City

HOUSTON

State

TX

Zip Code

77079

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	6		2	0	0	7

Transaction ID: INC.A.305

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MRS GLENNA K ROBERTS

Mailing Address 4100 E FLETCHER AVE APT 805

City

TAMPA

State

FL

Zip Code

33613

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	6		2	0	0	7

Transaction ID: INC.A.743

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MRS GLENNA K ROBERTS

Mailing Address 4100 E FLETCHER AVE APT 805

City

TAMPA

State

FL

Zip Code

33613

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	6		2	0	0	7

Transaction ID: INC.A.744

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

250.00

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 88 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS GLENNA K ROBERTS

Mailing Address 4100 E FLETCHER AVE APT 805

City

TAMPA

State

FL

Zip Code

33613

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 6 / 2 0 0 7

Transaction ID: INC.A.745

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR LYNN O ROHDE

Mailing Address 400 N A1A LOT 71

City

JUPITER

State

FL

Zip Code

33477

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 6 / 2 0 0 7

Transaction ID: INC.A.561

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

MS MILDRED F SOUTHERN

Mailing Address 933 KENLEIGH CIR

City

WINSTON SALEM

State

NC

Zip Code

27106

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

727.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 6 / 2 0 0 7

Transaction ID: INC.A.1016

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

150.00

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 89 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR JOHN M SWORD

Mailing Address 1914 B AVE NE

City

CEDAR RAPIDS

State

IA

Zip Code

52402

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.75

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 6 / 2 0 0 7

Transaction ID: INC.A.1091

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

MRS AURORA VEGA

Mailing Address 251 S WALNUT AVE APT 111

City

SAN DIMAS

State

CA

Zip Code

91773

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 6 / 2 0 0 7

Transaction ID: INC.A.805

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR WILLIAM J WALTON

Mailing Address 12 SUNSET VIEW ST

City

SABATTUS

State

ME

Zip Code

4280

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

SERVICE MANAGER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 6 / 2 0 0 7

Transaction ID: INC.A.407

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

200.00

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 90 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS FUMIE BOYCE

Mailing Address 4532 INTELCO LOOP SE APT 354

City

LACEY

State

WA

Zip Code

98503

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4020.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: INC.A.570

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MS PHYLLIS M GORMAN

Mailing Address 4700 TOWN RIDGE DR

City

GREENSBORO

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: INC.A.301

Amount of Each Receipt this Period

44.00

C.

Full Name (Last, First, Middle Initial)

MR LORAIN E HENDERSON

Mailing Address 2974 RIDGE CT

City

SANTA CLARA

State

CA

Zip Code

95051

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

ELECTRONICS SUPERVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: INC.A.186

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

169.00

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 91 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MISS C VIRGINIA PIERREPONT

Mailing Address 201 CROSSWICKS ST
CLAREEST M001

City State Zip Code
BORDENTOWN NJ 8505

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: INC.A.728

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MRS JEANETTE M RODEGHIER

Mailing Address 1440 TOWNSHIP AVE

City State Zip Code
WISCONSIN RAPIDS WI 54494

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

708.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: INC.A.733

Amount of Each Receipt this Period

220.00

C.

Full Name (Last, First, Middle Initial)

MRS EUTEVA C SKOW

Mailing Address 17200 W BELL RD LOT 2311

City State Zip Code
SURPRISE AZ 85374

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: INC.A.605

Amount of Each Receipt this Period

44.00

SUBTOTAL of Receipts This Page (optional)

289.00

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 92 / 428

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR ROBERT SUNDERLAND

Mailing Address 953 PYRITE AVE

City

HENDERSON

State

NV

Zip Code

89011

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1122.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	7	/	2	0	0	7

Transaction ID: INC.A.669

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MRS VIRGINIA H BARNES

Mailing Address 101 COUNTRY COVE DR

City

CLINTON

State

MS

Zip Code

39056

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

788.00

Date of Receipt

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

Transaction ID: INC.A.1082

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

DR JOHN CHESNICK, JR DO

Mailing Address 5110 CREEKMONT DR

City

CORPUS CHRISTI

State

TX

Zip Code

78413

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.75

Date of Receipt

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

Transaction ID: INC.A.1096

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

345.00

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 93 / 428

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR SAMUEL L PECKHAM

Mailing Address 10405 COUNTY HIGHWAY A

City

LA FARGE

State

WI

Zip Code

54639

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

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

Transaction ID: INC.A.758

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MS JOSEPHINE E WOOD

Mailing Address 1400 ENTERPRISE DR APT N330

City

LYNCHBURG

State

VA

Zip Code

24502

FEC ID number of contributing
federal political committee.

C

Name of Employer

FAIRFAX COUNTY SCHOOL BOA-
RD

Occupation

RETIRED TEACHER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

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

Transaction ID: INC.A.403

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MRS JOAN H BOWSER

Mailing Address 155 MILL CREEK DR

City

CHARLOTTESVILLE

State

VA

Zip Code

22902

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	1	/	2	0	0	7

Transaction ID: INC.A.853

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1150.00

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 94 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR SMITH L ELDER

Mailing Address 10604 BIG THICKET DR

City

DALLAS

State

TX

Zip Code

75217

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 1 / 2 0 0 7

Transaction ID: INC.A.706

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MS ALICE K HAYES

Mailing Address 4014 QUAIL RIDGE DR N APT A

City

BOYNTON BEACH

State

FL

Zip Code

33436

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1481.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 1 / 2 0 0 7

Transaction ID: INC.A.833

Amount of Each Receipt this Period

880.00

C.

Full Name (Last, First, Middle Initial)

MS RITA A BABIN

Mailing Address 710 W LE FEVRE RD APT 203

City

STERLING

State

IL

Zip Code

61081

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.00

Date of Receipt

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

Transaction ID: INC.A.862

Amount of Each Receipt this Period

46.00

SUBTOTAL of Receipts This Page (optional)

951.00

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 95 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR WALTER R JURASEK

Mailing Address 598 WINDERMERE LN

City

ARROYO GRANDE

State

CA

Zip Code

93420

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

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

Transaction ID: INC.A.419

Amount of Each Receipt this Period

220.00

B.

Full Name (Last, First, Middle Initial)

MR THOMAS A SCHOWALTER

Mailing Address N 21 W 26693 CATTAIL CT

City

PEWAUKEE

State

WI

Zip Code

53072

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

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

Transaction ID: INC.A.821

Amount of Each Receipt this Period

44.00

C.

Full Name (Last, First, Middle Initial)

MRS TRUDY S WEBB

Mailing Address PO BOX 1147

City

KASILOF

State

AK

Zip Code

99610

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.00

Date of Receipt

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

Transaction ID: INC.A.245

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

314.00

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 96 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
MS ALDEN HANSEN

Mailing Address 849 E 2ND ST
APT 19

City State Zip Code
MINDEN NE 68959

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 3 / 2 0 0 7

Transaction ID: INC.A.754

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)
MR THOMAS A SCHOWALTER

Mailing Address N 21 W 26693 CATTAIL CT

City State Zip Code
PEWAUKEE WI 53072

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 3 / 2 0 0 7

Transaction ID: INC.A.822

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)
MR JAMES WISNER GALLE

Mailing Address 7933 CHADWICK ST

City State Zip Code
PRAIRIE VILLAGE KS 66208

FEC ID number of contributing
federal political committee.

C

Name of Employer
USAF

Occupation
RETIRED LT COL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1890.00

Date of Receipt

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

Transaction ID: INC.A.1167

Amount of Each Receipt this Period

92.00

SUBTOTAL of Receipts This Page (optional)

342.00

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 97 / 428

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS JOSEPHINE E WOOD

Mailing Address 1400 ENTERPRISE DR APT N330

City

LYNCHBURG

State

VA

Zip Code

24502

FEC ID number of contributing
federal political committee.

C

Name of Employer

FAIRFAX COUNTY SCHOOL BOA-
RD

Occupation

RETIRED TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

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

Transaction ID: INC.A.404

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

MRS PHYLLIS R DAVIS

Mailing Address 1150 ANCHORAGE LN UNIT 610

City

SAN DIEGO

State

CA

Zip Code

92106

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

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

Transaction ID: INC.A.1133

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR THOMAS G FAILS

Mailing Address 4101 E LOUISIANA AVE STE 412

City

DENVER

State

CO

Zip Code

80246

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

PETROLEUM GEOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

392.00

Date of Receipt

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

Transaction ID: INC.A.756

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

650.00

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 98 / 428

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR THOMAS G FAILS

Mailing Address 4101 E LOUISIANA AVE STE 412

City

DENVER

State

CO

Zip Code

80246

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

PETROLEUM GEOLOGIST

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

392.00

Date of Receipt

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

Transaction ID: INC.A.757

Amount of Each Receipt this Period

92.00

B.

Full Name (Last, First, Middle Initial)

MR JAMES WISNER GALLE

Mailing Address 7933 CHADWICK ST

City

PRAIRIE VILLAGE

State

KS

Zip Code

66208

FEC ID number of contributing
federal political committee.

C

Name of Employer
USAF

Occupation

RETIRED LT COL

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1890.00

Date of Receipt

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

Transaction ID: INC.A.1168

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MS JANE LANDAU

Mailing Address 25 W 81ST ST
APT 12B

City

NEW YORK

State

NY

Zip Code

10024

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

RETIRED SECRETARY/HOMEMAKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

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

Transaction ID: INC.A.316

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

242.00

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 99 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS JEANETTE M RODEGHIER

Mailing Address 1440 TOWNSHIP AVE

City

WISCONSIN RAPIDS

State

WI

Zip Code

54494

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

708.00

Date of Receipt

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

Transaction ID: INC.A.734

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

MISS AGATHA K SALVIN

Mailing Address 1900 LAKE MICHIGAN DR NW

City

GRAND RAPIDS

State

MI

Zip Code

49504

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

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

Transaction ID: INC.A.320

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

MR RICHARD S GRIFFITH

Mailing Address PO BOX 91610

City

LAFAYETTE

State

LA

Zip Code

70509

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

INVESTOR/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

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

Transaction ID: INC.A.468

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

405.00

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 100 / 428

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR RICHARD S GRIFFITH

Mailing Address PO BOX 91610

City

LAFAYETTE

State

LA

Zip Code

70509

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

INVESTOR/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

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

Transaction ID: INC.A.469

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MRS EDNA P HARRISON

Mailing Address 12153 GLENCOE ST

City

THORNTON

State

CO

Zip Code

80241

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

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

Transaction ID: INC.A.265

Amount of Each Receipt this Period

46.00

C.

Full Name (Last, First, Middle Initial)

MRS JENNIE R PODBIELSKI

Mailing Address 34 MERILINE AVE

City

METHUEN

State

MA

Zip Code

1844

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: INC.A.1058

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

171.00

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 101 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS JANICE E SHALLENBERG

Mailing Address 140 WINDSOR PARK DR APT E301

City

CAROL STREAM

State

IL

Zip Code

60188

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

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

Transaction ID: INC.A.718

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MRS KATHERINE S SMOOT

Mailing Address 1 JEFFERSON FERRY DR
APT. # 6169

City

CENTEREACH

State

NY

Zip Code

11720

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.75

Date of Receipt

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

Transaction ID: INC.A.580

Amount of Each Receipt this Period

137.00

C.

Full Name (Last, First, Middle Initial)

MR ELDRED METZGER

Mailing Address 12223 S STATE ROAD 13

City

CLAYPOOL

State

IN

Zip Code

46510

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 9 / 2 0 0 7

Transaction ID: INC.A.502

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

337.00

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 102 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS MARGARET W PIERCE

Mailing Address 2725 SENECA CIR

City

WEST PALM BEACH

State

FL

Zip Code

33409

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

768.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 9 / 2 0 0 7

Transaction ID: INC.A.829

Amount of Each Receipt this Period

92.00

B.

Full Name (Last, First, Middle Initial)

MS ALICE K HAYES

Mailing Address 4014 QUAIL RIDGE DR N APT A

City

BOYNTON BEACH

State

FL

Zip Code

33436

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1481.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 0 / 2 0 0 7

Transaction ID: INC.A.834

Amount of Each Receipt this Period

137.00

C.

Full Name (Last, First, Middle Initial)

MRS FERN B HILSTAD

Mailing Address PO BOX 193

City

CIRCLE

State

MT

Zip Code

59215

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

397.75

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 0 / 2 0 0 7

Transaction ID: INC.A.846

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

329.00

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 103 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS WINIFRED A PARKER

Mailing Address 46692 GOODPASTURE RD
PO BOX 143

City State Zip Code
VIDA OR 97488

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 0 / 2 0 0 7

Transaction ID: INC.A.547

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

FATHER JAMES P RYAN

Mailing Address 2828 SLOAT RD

City State Zip Code
PEBBLE BEACH CA 93953

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

RETIRED CATHOLIC PRIEST/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 0 / 2 0 0 7

Transaction ID: INC.A.221

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

FATHER JAMES P RYAN

Mailing Address 2828 SLOAT RD

City State Zip Code
PEBBLE BEACH CA 93953

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

RETIRED CATHOLIC PRIEST/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 0 / 2 0 0 7

Transaction ID: INC.A.220

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

300.00

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 104 / 428

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS JANE LANDAU

Mailing Address 25 W 81ST ST
APT 12BCity State Zip Code
NEW YORK NY 10024FEC ID number of contributing
federal political committee.**C**Name of Employer
SELF-EMPLOYEDOccupation
RETIRED SECRETARY/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	0	7

Transaction ID: INC.A.317

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MS JEAN B MASTERS

Mailing Address 1150 OAK KNOLL DR

City State Zip Code
LAKE FOREST IL 60045FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIREDOccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	0	7

Transaction ID: INC.A.511

Amount of Each Receipt this Period

137.00

C.

Full Name (Last, First, Middle Initial)

MR SAMUEL L PECKHAM

Mailing Address 10405 COUNTY HIGHWAY A

City State Zip Code
LA FARGE WI 54639FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	0	7

Transaction ID: INC.A.759

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

287.00

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 105 / 428

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS JENNIE R PODBIELSKI

Mailing Address 34 MERILINE AVE

City

METHUEN

State

MA

Zip Code

1844

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	0	7

Transaction ID: INC.A.1059

Amount of Each Receipt this Period

137.00

B.

Full Name (Last, First, Middle Initial)

MR OBERLIN J EVENSON

Mailing Address 580 SAN GORGONIO ST

City

SAN DIEGO

State

CA

Zip Code

92106

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	4		2	0	0	7

Transaction ID: INC.A.336

Amount of Each Receipt this Period

137.00

C.

Full Name (Last, First, Middle Initial)

MR JAMES WISNER GALLE

Mailing Address 7933 CHADWICK ST

City

PRAIRIE VILLAGE

State

KS

Zip Code

66208

FEC ID number of contributing
federal political committee.

C

Name of Employer
USAFOccupation
RETIRED LT COL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1890.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	4		2	0	0	7

Transaction ID: INC.A.1169

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

329.00

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 106 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR JAMES WISNER GALLE

Mailing Address 7933 CHADWICK ST

City

PRAIRIE VILLAGE

State

KS

Zip Code

66208

FEC ID number of contributing
federal political committee.

C

Name of Employer
USAF

Occupation

RETIRED LT COL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1890.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 4 / 2 0 0 7

Transaction ID: INC.A.1170

Amount of Each Receipt this Period

137.00

B.

Full Name (Last, First, Middle Initial)

MRS RUTH E JOHNSON

Mailing Address 212 S 3RD ST

City

NEODESHA

State

KS

Zip Code

66757

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 4 / 2 0 0 7

Transaction ID: INC.A.763

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MS MARION W PARKS, JR

Mailing Address 2534 N MORRISON RD

City

MUNCIE

State

IN

Zip Code

47304

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.S. ARMY

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 4 / 2 0 0 7

Transaction ID: INC.A.635

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

267.00

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 107 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS MARION W PARKS, JR

Mailing Address 2534 N MORRISON RD

City

MUNCIE

State

IN

Zip Code

47304

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.S. ARMY

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 4 / 2 0 0 7

Transaction ID: INC.A.634

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MRS LIZ PERRY

Mailing Address 1201 HARDING AVE

City

TRACY

State

CA

Zip Code

95376

FEC ID number of contributing
federal political committee.

C

Name of Employer
UNIVERSITY OF CALIFORNIA

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 4 / 2 0 0 7

Transaction ID: INC.A.1131

Amount of Each Receipt this Period

274.00

C.

Full Name (Last, First, Middle Initial)

MS ELLEN C ROUTSON

Mailing Address 1401 HERMITS WAY

City

THE DALLES

State

OR

Zip Code

97058

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

732.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 4 / 2 0 0 7

Transaction ID: INC.A.326

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

394.00

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 108 / 428

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

FATHER JAMES P RYAN

Mailing Address 2828 SLOAT RD

City

PEBBLE BEACH

State

CA

Zip Code

93953

FEC ID number of contributing
federal political committee.**C**Name of Employer
SELF EMPLOYED

Occupation

RETIRED CATHOLIC PRIEST/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	4		2	0	0	7

Transaction ID: INC.A.222

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MRS JENIFER M SAMPSON

Mailing Address 5300 S MAIN ST APT 58

City

CEDAR FALLS

State

IA

Zip Code

50613

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

472.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	4		2	0	0	7

Transaction ID: INC.A.942

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MRS OLETHA E YOUNG

Mailing Address 730 W JEFFERSON ST APT 242

City

MORTON

State

IL

Zip Code

61550

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	4		2	0	0	7

Transaction ID: INC.A.519

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

155.00

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
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS ARLENE K BUCK

Mailing Address 701 85TH AVE NE APT 309

City

MINNEAPOLIS

State

MN

Zip Code

55434

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 5 / 2 0 0 7

Transaction ID: INC.A.912

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MRS JOYCE A CROWTHER

Mailing Address 23500 CRISTO REY DR UNIT 208C

City

CUPERTINO

State

CA

Zip Code

95014

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 5 / 2 0 0 7

Transaction ID: INC.A.1112

Amount of Each Receipt this Period

46.00

C.

Full Name (Last, First, Middle Initial)

MRS PHYLLIS R DAVIS

Mailing Address 1150 ANCHORAGE LN UNIT 610

City

SAN DIEGO

State

CA

Zip Code

92106

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 5 / 2 0 0 7

Transaction ID: INC.A.1134

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

246.00

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 110 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS MAXINE DUFF

Mailing Address 415 TUSCULUM RD APT K20
MCMURRAY MONOR APTS

City State Zip Code
NASHVILLE TN 37211

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 5 / 2 0 0 7

Transaction ID: INC.A.1218

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

DR JOHN J HARTFORD, MD

Mailing Address 3644 TERRA GRANADA DR
#2A

City State Zip Code
WALNUT CREEK CA 94595

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
RETIRED M.D.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 5 / 2 0 0 7

Transaction ID: INC.A.182

Amount of Each Receipt this Period

93.00

C.

Full Name (Last, First, Middle Initial)

MRS EILEEN KELLEY

Mailing Address 1201 N WARREN AVE

City State Zip Code
OKLAHOMA CITY OK 73107

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 5 / 2 0 0 7

Transaction ID: INC.A.1181

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

293.00

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 111 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS LESLEY LINSTEADER

Mailing Address 23871 WILLOWS DR APT 135

City

LAGUNA HILLS

State

CA

Zip Code

92653

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED/HOMEMAKER

Occupation

RETIRED BUSINESS FINANCIAL MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

822.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 5 / 2 0 0 7

Transaction ID: INC.A.884

Amount of Each Receipt this Period

137.00

B.

Full Name (Last, First, Middle Initial)

MS MARIE J PAPILLON

Mailing Address 16426 NE 31ST AVE

City

NORTH MIAMI BEACH

State

FL

Zip Code

33160

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 5 / 2 0 0 7

Transaction ID: INC.A.583

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MISS C VIRGINIA PIERREPONT

Mailing Address 201 CROSSWICKS ST
CLAREEST M001

City

BORDENTOWN

State

NJ

Zip Code

8505

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 5 / 2 0 0 7

Transaction ID: INC.A.729

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

262.00

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS JO AN RIEDLINGER

Mailing Address PO BOX 3006

City

TROY

State

MT

Zip Code

59935

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 5 / 2 0 0 7

Transaction ID: INC.A.593

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

MRS DOROTHY L SAPLATA

Mailing Address 5304 HARRY S TRUMAN DR APT 304

City

GRANDVIEW

State

MO

Zip Code

64030

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 5 / 2 0 0 7

Transaction ID: INC.A.348

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

MR ROBERT SUNDERLAND

Mailing Address 953 PYRITE AVE

City

HENDERSON

State

NV

Zip Code

89011

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1122.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 5 / 2 0 0 7

Transaction ID: INC.A.670

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

570.00

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 113 / 428

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS DONNA P WOOLLEY

Mailing Address PO BOX 43

City

DRAIN

State

OR

Zip Code

97435

FEC ID number of contributing
federal political committee.

C

Name of Employer
EAGLE'S VIEW MANAGEMENT
CO.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	5		2	0	0	7

Transaction ID: INC.A.234

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR MYRON C YOCKY

Mailing Address 5102 DOWNEY AVE

City

LAKEWOOD

State

CA

Zip Code

90712

FEC ID number of contributing
federal political committee.

C

Name of Employer
DOUGLAS AIRCRAFT CO.

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	5		2	0	0	7

Transaction ID: INC.A.458

Amount of Each Receipt this Period

137.00

C.

Full Name (Last, First, Middle Initial)

MRS JUANITA L ALEXANDER

Mailing Address 2724 ALCAZAR ST NE

City

ALBUQUERQUE

State

NM

Zip Code

87110

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

ELEMENTARY TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	0	7

Transaction ID: INC.A.440

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

262.00

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 114 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS ALICE R FINNERTY

Mailing Address 5 SUTTON PL

City

ISLIP

State

NY

Zip Code

11751

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 7 / 2 0 0 7

Transaction ID: INC.A.800

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

MS HELEN W SKATRUD

Mailing Address 2601 TOUCHMARK DR UNIT 241

City

APPLETON

State

WI

Zip Code

54914

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

969.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 7 / 2 0 0 7

Transaction ID: INC.A.870

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

MRS OLETHA E YOUNG

Mailing Address 730 W JEFFERSON ST APT 242

City

MORTON

State

IL

Zip Code

61550

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 7 / 2 0 0 7

Transaction ID: INC.A.520

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

160.00

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 115 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR ARTHUR M DOWNES, JR

Mailing Address 5058 GLENOAK DR

City

LOUISVILLE

State

OH

Zip Code

44641

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 0 7

Transaction ID: INC.A.1046

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR BOYD L FUGAL

Mailing Address 504 W 1100 N

City

PLEASANT GROVE

State

UT

Zip Code

84062

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
RETIRED FARMER/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 0 7

Transaction ID: INC.A.368

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR GUY T MCBRIDE, JR

Mailing Address 2615 OAK DR UNIT 13

City

LAKEWOOD

State

CO

Zip Code

80215

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

591.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 0 7

Transaction ID: INC.A.956

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

300.00

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 116 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS TRUDY S WEBB

Mailing Address PO BOX 1147

City

KASILOF

State

AK

Zip Code

99610

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 0 / 2 0 0 7

Transaction ID: INC.A.246

Amount of Each Receipt this Period

137.00

B.

Full Name (Last, First, Middle Initial)

MR KENNETH L BATCHELDER

Mailing Address 813 S CANYON BLVD
C/O COUNTRY SPICE RCF

City

JOHN DAY

State

OR

Zip Code

97845

FEC ID number of contributing
federal political committee.

C

Name of Employer
COUNTRY SPICE RCF

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

620.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 2 / 2 0 0 7

Transaction ID: INC.A.545

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

MRS JEAN B CANAIY

Mailing Address 2688 ELDORADO SPRINGS DR

City

LOVELAND

State

CO

Zip Code

80538

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 2 / 2 0 0 7

Transaction ID: INC.A.926

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

662.00

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 117 / 428

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR SMITH L ELDER

Mailing Address 10604 BIG THICKET DR

City

DALLAS

State

TX

Zip Code

75217

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	2		2	0	0	7

Transaction ID: INC.A.707

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR JAMES WISNER GALLE

Mailing Address 7933 CHADWICK ST

City

PRAIRIE VILLAGE

State

KS

Zip Code

66208

FEC ID number of contributing
federal political committee.

C

Name of Employer
USAFOccupation
RETIRED LT COL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1890.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	2		2	0	0	7

Transaction ID: INC.A.1171

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MS CAROLYN P HAMAN

Mailing Address 8917 S PALMER RD
PO BOX 176

City

NEW CARLISLE

State

OH

Zip Code

45344

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

662.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	2		2	0	0	7

Transaction ID: INC.A.550

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

225.00

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 118 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS MARGERY L KEIDEL

Mailing Address 27765 CALLE VALDES

City

MISSION VIEJO

State

CA

Zip Code

92692

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 2 / 2 0 0 7

Transaction ID: INC.A.649

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MRS JUANITA L ALEXANDER

Mailing Address 2724 ALCAZAR ST NE

City

ALBUQUERQUE

State

NM

Zip Code

87110

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

ELEMENTARY TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 3 / 2 0 0 7

Transaction ID: INC.A.442

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MRS JUANITA L ALEXANDER

Mailing Address 2724 ALCAZAR ST NE

City

ALBUQUERQUE

State

NM

Zip Code

87110

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

ELEMENTARY TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 3 / 2 0 0 7

Transaction ID: INC.A.441

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

80.00

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 119 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS RITA A BABIN

Mailing Address 710 W LE FEVRE RD APT 203

City

STERLING

State

IL

Zip Code

61081

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 3 / 2 0 0 7

Transaction ID: INC.A.863

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

MR JOHN K BAKER

Mailing Address 79 SHORELINE DR

City

HILTON HEAD ISLAND

State

SC

Zip Code

29928

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.75

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 3 / 2 0 0 7

Transaction ID: INC.A.1010

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

MS PEGGY J BARTON

Mailing Address 1135 MANFELD DR

City

COLUMBUS

State

OH

Zip Code

43227

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 3 / 2 0 0 7

Transaction ID: INC.A.811

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

170.00

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 120 / 428

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

DR JOHN CHESNICK, JR DO

Mailing Address 5110 CREEKMONT DR

City

CORPUS CHRISTI

State

TX

Zip Code

78413

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	3		2	0	0	7

Transaction ID: INC.A.1097

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR CONRAD C DE LEEUW

Mailing Address 11 CHAPMAN DR

City

LITTLE FERRY

State

NJ

Zip Code

7643

FEC ID number of contributing
federal political committee.

C

Name of Employer
COACH USAOccupation
DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	3		2	0	0	7

Transaction ID: INC.A.665

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

MRS ANGELA HAVERLY

Mailing Address 24 MOSSWOOD TRL

City

DENVERVILLE

State

NJ

Zip Code

7834

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

363.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	3		2	0	0	7

Transaction ID: INC.A.194

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

200.00

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
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FOR LINE NUMBER: PAGE 121 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS MARJORIE J KING

Mailing Address 50 VIEW POINT DR

City

GREENVILLE

State

SC

Zip Code

29609

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

439.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 3 / 2 0 0 7

Transaction ID: INC.A.290

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

MRS LESLEY LINSTEADER

Mailing Address 23871 WILLOWS DR APT 135

City

LAGUNA HILLS

State

CA

Zip Code

92653

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED/HOMEMAKER

Occupation

RETIRED BUSINESS FINANCIAL MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

822.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 3 / 2 0 0 7

Transaction ID: INC.A.885

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MRS KATRINA A MATLOCK

Mailing Address 3665 S RIVER CHURCH RD

City

WOODLEAF

State

NC

Zip Code

27054

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 3 / 2 0 0 7

Transaction ID: INC.A.792

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

165.00

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 122 / 428

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS KATRINA A MATLOCK

Mailing Address 3665 S RIVER CHURCH RD

City

WOODLEAF

State

NC

Zip Code

27054

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	3		2	0	0	7

Transaction ID: INC.A.791

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

MS PAULINE SALYERS

Mailing Address 2916 HOYLAKES CT

City

DAYTON

State

OH

Zip Code

45439

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	3		2	0	0	7

Transaction ID: INC.A.783

Amount of Each Receipt this Period

44.00

C.

Full Name (Last, First, Middle Initial)

MRS JENIFER M SAMPSON

Mailing Address 5300 S MAIN ST APT 58

City

CEDAR FALLS

State

IA

Zip Code

50613

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

472.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	3		2	0	0	7

Transaction ID: INC.A.943

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

134.00

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 123 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR RODGER C SCOTT

Mailing Address 20405 SE 344TH ST

City

AUBURN

State

WA

Zip Code

98092

FEC ID number of contributing
federal political committee.

C

Name of Employer

SCOTTY'S GENERAL CONSTRUC-
TION

Occupation

SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1650.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 3 / 2 0 0 7

Transaction ID: INC.A.237

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

MS MILDRED F SOUTHERN

Mailing Address 933 KENLEIGH CIR

City

WINSTON SALEM

State

NC

Zip Code

27106

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

727.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 3 / 2 0 0 7

Transaction ID: INC.A.1017

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR JAMES F WYCHGEL

Mailing Address 109 RIDGE RD

City

CHOCOWINITY

State

NC

Zip Code

27817

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 3 / 2 0 0 7

Transaction ID: INC.A.1087

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

700.00

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 124 / 428

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

DR JOHN CHESNICK, JR DO

Mailing Address 5110 CREEKMONT DR

City

CORPUS CHRISTI

State

TX

Zip Code

78413

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	4		2	0	0	7

Transaction ID: INC.A.1098

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MRS ALICE R FINNERTY

Mailing Address 5 SUTTON PL

City

ISLIP

State

NY

Zip Code

11751

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	4		2	0	0	7

Transaction ID: INC.A.801

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MRS EDNA P HARRISON

Mailing Address 12153 GLENCOE ST

City

THORNTON

State

CO

Zip Code

80241

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	4		2	0	0	7

Transaction ID: INC.A.266

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

170.00

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 125 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS JANICE B LINDBERG

Mailing Address 1550 MOUNT OLIVET RD

City

ZIRCONIA

State

NC

Zip Code

28790

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: INC.A.918

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

MS ARLENE K BUCK

Mailing Address 701 85TH AVE NE APT 309

City

MINNEAPOLIS

State

MN

Zip Code

55434

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 7 / 2 0 0 7

Transaction ID: INC.A.913

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN RODGERS CAMP, JR

Mailing Address 2532 SW 50TH BLVD

City

GAINESVILLE

State

FL

Zip Code

32608

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
RETIRED ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 7 / 2 0 0 7

Transaction ID: INC.A.387

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

500.00

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 126 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS ALICE R FINNERTY

Mailing Address 5 SUTTON PL

City

ISLIP

State

NY

Zip Code

11751

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 0 7

Transaction ID: INC.A.802

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MRS ANNE M HARPER

Mailing Address 85 SCOTTSDALE DR

City

TROY

State

MI

Zip Code

48084

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

MUSIC TEACHER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 0 7

Transaction ID: INC.A.487

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR LORAIN E HENDERSON

Mailing Address 2974 RIDGE CT

City

SANTA CLARA

State

CA

Zip Code

95051

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

ELECTRONICS SUPERVISOR

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 0 7

Transaction ID: INC.A.187

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

300.00

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 127 / 428

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS RUTH E JOHNSON

Mailing Address 212 S 3RD ST

City

NEODESHA

State

KS

Zip Code

66757

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	0	7

Transaction ID: INC.A.764

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MRS RUTH E JOHNSON

Mailing Address 212 S 3RD ST

City

NEODESHA

State

KS

Zip Code

66757

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	0	7

Transaction ID: INC.A.765

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR EDWIN L JONES, JR

Mailing Address 7035 MARCHING DUCK DR
VILLA E 406

City

CHARLOTTE

State

NC

Zip Code

28210

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	0	7

Transaction ID: INC.A.361

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

400.00

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 128 / 428

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

DR T C JONES

Mailing Address 1301 ARENAL CT

City

SANTA FE

State

NM

Zip Code

87501

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	0	7

Transaction ID: INC.A.456

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MS BARBARA J PORBE

Mailing Address 2649 N DUNFIELD ST

City

ORANGE

State

CA

Zip Code

92865

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
RETIRED PRIVATE VIOLIN TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	0	7

Transaction ID: INC.A.1127

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR ROBERT SUNDERLAND

Mailing Address 953 PYRITE AVE

City

HENDERSON

State

NV

Zip Code

89011

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1122.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	0	7

Transaction ID: INC.A.671

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

250.00

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 129 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR CALVIN R ARNOLD

Mailing Address 1010 REED AVE

City

CHEYENNE

State

WY

Zip Code

82007

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 8 / 2 0 0 7

Transaction ID: INC.A.995

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MRS WILMA N DEMOSS

Mailing Address 104 SAINT JO TER

City

NOCONA

State

TX

Zip Code

76255

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 8 / 2 0 0 7

Transaction ID: INC.A.280

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MR ROBERT J FREDETTE, SR

Mailing Address 552-850 DAY RD

City

MCARTHUR

State

CA

Zip Code

96056

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.S.N.

Occupation
RETIRED/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 8 / 2 0 0 7

Transaction ID: INC.A.513

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

170.00

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 130 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR ADRIAN H HUERTER

Mailing Address 841 TEXAS AVE

City

SAN ANTONIO

State

TX

Zip Code

78201

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.75

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 8 / 2 0 0 7

Transaction ID: INC.A.250

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MR FRANCIS P LEHAR

Mailing Address 11 NORWOOD AVE
PO BOX 1482

City

MANCHESTER

State

MA

Zip Code

1944

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
RETIRED MUSIC PUBLISHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 8 / 2 0 0 7

Transaction ID: INC.A.262

Amount of Each Receipt this Period

110.00

C.

Full Name (Last, First, Middle Initial)

MR GUY T MCBRIDE, JR

Mailing Address 2615 OAK DR UNIT 13

City

LAKEWOOD

State

CO

Zip Code

80215

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

591.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 8 / 2 0 0 7

Transaction ID: INC.A.957

Amount of Each Receipt this Period

110.00

SUBTOTAL of Receipts This Page (optional)

240.00

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 131 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS MARTHA ANN PIERCY

Mailing Address 1146 SHENANDOAH RD

City

SAN MARINO

State

CA

Zip Code

91108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

937.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 8 / 2 0 0 7

Transaction ID: INC.A.381

Amount of Each Receipt this Period

137.00

B.

Full Name (Last, First, Middle Initial)

MR DAVID K ROBINSON

Mailing Address 842 E VILLA ST APT 219

City

PASADENA

State

CA

Zip Code

91101

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

RETIRED ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 8 / 2 0 0 7

Transaction ID: INC.A.949

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

FATHER JAMES P RYAN

Mailing Address 2828 SLOAT RD

City

PEBBLE BEACH

State

CA

Zip Code

93953

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

RETIRED CATHOLIC PRIEST/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 8 / 2 0 0 7

Transaction ID: INC.A.223

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

272.00

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 132 / 428

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR MYRON C YOCKY

Mailing Address 5102 DOWNEY AVE

City

LAKEWOOD

State

CA

Zip Code

90712

FEC ID number of contributing
federal political committee.

C

Name of Employer
DOUGLAS AIRCRAFT CO.

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	8		2	0	0	7

Transaction ID: INC.A.459

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR & MRS JOHN R BOON

Mailing Address 8304 FRANCONIA RD

City

RICHMOND

State

VA

Zip Code

23227

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	0		2	0	0	7

Transaction ID: INC.A.645

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

MRS MARGARET E DAVENPORT

Mailing Address 825 APPLE VALLEY DR

City

SAN JOSE

State

CA

Zip Code

95125

FEC ID number of contributing
federal political committee.

C

Name of Employer
ESUH SCHOOL DISTRICT

Occupation

RETIRED TEACHER/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

488.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	0		2	0	0	7

Transaction ID: INC.A.346

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

275.00

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 133 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS PHYLLIS R DAVIS

Mailing Address 1150 ANCHORAGE LN UNIT 610

City

SAN DIEGO

State

CA

Zip Code

92106

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 0 / 2 0 0 7

Transaction ID: INC.A.1135

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MS ELLEN M NOFTZ

Mailing Address 1238 BALMORAL AVE

City

WESTCHESTER

State

IL

Zip Code

60154

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 0 / 2 0 0 7

Transaction ID: INC.A.1038

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

MS MARIE J PAPILLON

Mailing Address 16426 NE 31ST AVE

City

NORTH MIAMI BEACH

State

FL

Zip Code

33160

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 0 / 2 0 0 7

Transaction ID: INC.A.584

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

275.00

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 134 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS VERNAL LEE STEWART

Mailing Address 16795 COUNTRY KNOLL DR

City

NORTHVILLE

State

MI

Zip Code

48168

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 0 / 2 0 0 7

Transaction ID: INC.A.694

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

MR ROBERT SUNDERLAND

Mailing Address 953 PYRITE AVE

City

HENDERSON

State

NV

Zip Code

89011

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1122.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 0 / 2 0 0 7

Transaction ID: INC.A.672

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MS JENNIE LOU DICKSON

Mailing Address 411 E HOADLEY RD

City

PINE BLUFF

State

AR

Zip Code

71602

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

NURSE/BIOLOGY AND CHEMISTRY TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 1 / 2 0 0 7

Transaction ID: INC.A.908

Amount of Each Receipt this Period

110.00

SUBTOTAL of Receipts This Page (optional)

245.00

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 135 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR ARTHUR M DOWNES, JR

Mailing Address 5058 GLENOAK DR

City

LOUISVILLE

State

OH

Zip Code

44641

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 1 / 2 0 0 7

Transaction ID: INC.A.1047

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MS MABEL O FIELDS

Mailing Address 801 HUNTINGTON AVE

City

WARREN

State

IN

Zip Code

46792

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.75

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 1 / 2 0 0 7

Transaction ID: INC.A.1027

Amount of Each Receipt this Period

162.75

C.

Full Name (Last, First, Middle Initial)

MS VERA RUTH GOODRICH

Mailing Address 25738 COUNTY ROAD Z

City

LA JUNTA

State

CO

Zip Code

81050

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOSPICE VOLUNTEER/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.75

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 1 / 2 0 0 7

Transaction ID: INC.A.1118

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

337.75

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 136 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS JOYCE B HEINRICH

Mailing Address 1035 HILL ST APT 224

City

WATERTOWN

State

WI

Zip Code

53098

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 1 / 2 0 0 7

Transaction ID: INC.A.416

Amount of Each Receipt this Period

110.00

B.

Full Name (Last, First, Middle Initial)

MRS ISABELLE HENRY

Mailing Address 1818 STATE ST

City

WASHINGTON

State

IN

Zip Code

47501

FEC ID number of contributing
federal political committee.

C

Name of Employer
MISSIONARY

Occupation

MISSIONARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 1 / 2 0 0 7

Transaction ID: INC.A.722

Amount of Each Receipt this Period

110.00

C.

Full Name (Last, First, Middle Initial)

DR PARKE B JOHNSTON

Mailing Address 10200 HUMPHREY RD
JOHNSTONE FARM

City

CINCINNATI

State

OH

Zip Code

45242

FEC ID number of contributing
federal political committee.

C

Name of Employer
MADEIRA VETERINARY HOSPITAL, INC.

Occupation

SEMI-RETIRED VETERINARIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 1 / 2 0 0 7

Transaction ID: INC.A.217

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

520.00

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
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
MS HELEN W SKATRUD

Mailing Address 2601 TOUCHMARK DR UNIT 241

City State Zip Code
APPLETON WI 54914

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

969.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 1 / 2 0 0 7

Transaction ID: INC.A.871

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
MR HENRY L WELLS

Mailing Address 6018 MADRA AVE

City State Zip Code
SAN DIEGO CA 92120

FEC ID number of contributing
federal political committee.

C

Name of Employer
SAN DIEGO TRUCK CENTER

Occupation
RETIRED MECHANIC/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

858.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 1 / 2 0 0 7

Transaction ID: INC.A.373

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)
MR WILSON E ANDREWS

Mailing Address 6727 40TH ST NE

City State Zip Code
MARYSVILLE WA 98270

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 0 7

Transaction ID: INC.A.420

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

250.00

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS RUBY BAYLESS

Mailing Address 9810 S ALTA AVE

City

REEDLEY

State

CA

Zip Code

93654

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	0	7

Transaction ID: INC.A.841

Amount of Each Receipt this Period

110.00

B.

Full Name (Last, First, Middle Initial)

MS VIOLET V CHEAL

Mailing Address 354 KENDAL DR

City

KENNETT SQUARE

State

PA

Zip Code

19348

FEC ID number of contributing
federal political committee.

C

Name of Employer
STATE OF DELEWAREOccupation
RETIRED TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	0	7

Transaction ID: INC.A.615

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MS VERA RUTH GOODRICH

Mailing Address 25738 COUNTY ROAD Z

City

LA JUNTA

State

CO

Zip Code

81050

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
HOSPICE VOLUNTEER/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	0	7

Transaction ID: INC.A.1119

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

240.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS EILEEN KELLEY

Mailing Address 1201 N WARREN AVE

City

OKLAHOMA CITY

State

OK

Zip Code

73107

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 4 / 2 0 0 7

Transaction ID: INC.A.1182

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MRS RUTH A MERILLAT

Mailing Address 860 RICHLYN DR

City

ADRIAN

State

MI

Zip Code

49221

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 4 / 2 0 0 7

Transaction ID: INC.A.457

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MISS MARIAN L PATTERSON

Mailing Address 5001 W FLORIDA AVE SPC 264

City

HEMET

State

CA

Zip Code

92545

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 4 / 2 0 0 7

Transaction ID: INC.A.353

Amount of Each Receipt this Period

110.00

SUBTOTAL of Receipts This Page (optional)

410.00

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 140 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

FATHER JAMES P RYAN

Mailing Address 2828 SLOAT RD

City

PEBBLE BEACH

State

CA

Zip Code

93953

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

RETIRED CATHOLIC PRIEST/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 0 7

Transaction ID: INC.A.224

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MRS JEANETTE F YANDOW

Mailing Address 1133 LONG POND RD

City

ROCHESTER

State

NY

Zip Code

14626

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 0 7

Transaction ID: INC.A.894

Amount of Each Receipt this Period

220.00

C.

Full Name (Last, First, Middle Initial)

MRS JEANETTE F YANDOW

Mailing Address 1133 LONG POND RD

City

ROCHESTER

State

NY

Zip Code

14626

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 0 7

Transaction ID: INC.A.895

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

320.00

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 141 / 428

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR SMITH L ELDER

Mailing Address 10604 BIG THICKET DR

City

DALLAS

State

TX

Zip Code

75217

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	0	7

Transaction ID: INC.A.708

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

MR ALDEN T HARRIS, SR

Mailing Address 226 WILLIAMS LN

City

BIGFORK

State

MT

Zip Code

59911

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
RETIRED/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	0	7

Transaction ID: INC.A.1145

Amount of Each Receipt this Period

110.00

C.

Full Name (Last, First, Middle Initial)

MR LOUIS J HAZLEWOOD

Mailing Address 11041 ACADEMY RIDGE RD NE

City

ALBUQUERQUE

State

NM

Zip Code

87111

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

737.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	0	7

Transaction ID: INC.A.398

Amount of Each Receipt this Period

137.00

SUBTOTAL of Receipts This Page (optional)

302.00

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
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS FERN B HILSTAD

Mailing Address PO BOX 193

City

CIRCLE

State

MT

Zip Code

59215

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

397.75

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 5 / 2 0 0 7

Transaction ID: INC.A.847

Amount of Each Receipt this Period

52.75

B.

Full Name (Last, First, Middle Initial)

MR ADRIAN H HUERTER

Mailing Address 841 TEXAS AVE

City

SAN ANTONIO

State

TX

Zip Code

78201

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.75

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 5 / 2 0 0 7

Transaction ID: INC.A.251

Amount of Each Receipt this Period

162.75

C.

Full Name (Last, First, Middle Initial)

MRS CONSTANCE D HUNTER

Mailing Address 4329 S ATLANTIC AVE

City

PORT ORANGE

State

FL

Zip Code

32127

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

426.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 5 / 2 0 0 7

Transaction ID: INC.A.176

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

250.50

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
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR GUY T MCBRIDE, JR

Mailing Address 2615 OAK DR UNIT 13

City

LAKEWOOD

State

CO

Zip Code

80215

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

591.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 5 / 2 0 0 7

Transaction ID: INC.A.958

Amount of Each Receipt this Period

137.00

B.

Full Name (Last, First, Middle Initial)

MS DOROTHY J MILLER

Mailing Address 13575 COFFEE RD

City

WILMOT

State

SD

Zip Code

57279

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.75

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 5 / 2 0 0 7

Transaction ID: INC.A.620

Amount of Each Receipt this Period

137.00

C.

Full Name (Last, First, Middle Initial)

MISS C VIRGINIA PIERREPONT

Mailing Address 201 CROSSWICKS ST
CLAREEST M001

City

BORDENTOWN

State

NJ

Zip Code

8505

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 5 / 2 0 0 7

Transaction ID: INC.A.730

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

314.00

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
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS BETTE J POLIQUIN

Mailing Address 49220 SUNROSE LN

City

PALM DESERT

State

CA

Zip Code

92260

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

337.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 5 / 2 0 0 7

Transaction ID: INC.A.555

Amount of Each Receipt this Period

137.00

B.

Full Name (Last, First, Middle Initial)

MRS BETTY J ALSON

Mailing Address 819 PARADISE LN

City

BROOKINGS

State

OR

Zip Code

97415

FEC ID number of contributing
federal political committee.

C

Name of Employer
US ARMY/FORT RICHARDSON,
AL

Occupation

RETIRED BUDGET OFFICER/HOMEMAKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1062.75

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 6 / 2 0 0 7

Transaction ID: INC.A.575

Amount of Each Receipt this Period

110.00

C.

Full Name (Last, First, Middle Initial)

MR KENNETH L BATCHELDER

Mailing Address 813 S CANYON BLVD
C/O COUNTRY SPICE RCF

City

JOHN DAY

State

OR

Zip Code

97845

FEC ID number of contributing
federal political committee.

C

Name of Employer
COUNTRY SPICE RCF

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

620.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 6 / 2 0 0 7

Transaction ID: INC.A.546

Amount of Each Receipt this Period

110.00

SUBTOTAL of Receipts This Page (optional)

357.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR JOHN A BRUNET

Mailing Address 15038 SULTANA ST

City

HESPERIA

State

CA

Zip Code

92345

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 6 / 2 0 0 7

Transaction ID: INC.A.1031

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MS ARLENE K BUCK

Mailing Address 701 85TH AVE NE APT 309

City

MINNEAPOLIS

State

MN

Zip Code

55434

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 6 / 2 0 0 7

Transaction ID: INC.A.914

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

MRS THEODORA DENNING

Mailing Address 1515 W OKLAHOMA AVE

City

ENID

State

OK

Zip Code

73703

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 6 / 2 0 0 7

Transaction ID: INC.A.854

Amount of Each Receipt this Period

110.00

SUBTOTAL of Receipts This Page (optional)

235.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR SMITH L ELDER

Mailing Address 10604 BIG THICKET DR

City

DALLAS

State

TX

Zip Code

75217

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	6		2	0	0	7

Transaction ID: INC.A.709

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MRS BETTE J POLIQUIN

Mailing Address 49220 SUNROSE LN

City

PALM DESERT

State

CA

Zip Code

92260

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	6		2	0	0	7

Transaction ID: INC.A.556

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MRS MARGARET L BROWN

Mailing Address 2001 W RUDASILL RD APT 5301

City

TUCSON

State

AZ

Zip Code

85704

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	7		2	0	0	7

Transaction ID: INC.A.972

Amount of Each Receipt this Period

52.75

SUBTOTAL of Receipts This Page (optional)

177.75

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR JOHN H GEIMAN

Mailing Address 541 W WALNUT ST

City

HANOVER

State

PA

Zip Code

17331

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 7 / 2 0 0 7

Transaction ID: INC.A.206

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MRS BLANCHE BEA ALLEN

Mailing Address 34117 DUNE RD

City

NEWBERRY SPRINGS

State

CA

Zip Code

92365

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: INC.A.700

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MRS RUTH B BRIER

Mailing Address 605 CUMBERLAND RD E

City

MOBILE

State

AL

Zip Code

36608

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

NURSE EDUCATOR/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: INC.A.919

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS VERNIE J DAVIDSON

Mailing Address 12552 CHARDIN PL APT 2

City

SAINT LOUIS

State

MO

Zip Code

63128

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

X-RAY TECHNOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: INC.A.817

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR SMITH L ELDER

Mailing Address 10604 BIG THICKET DR

City

DALLAS

State

TX

Zip Code

75217

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: INC.A.710

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR JAMES WISNER GALLE

Mailing Address 7933 CHADWICK ST

City

PRAIRIE VILLAGE

State

KS

Zip Code

66208

FEC ID number of contributing
federal political committee.

C

Name of Employer
USAF

Occupation

RETIRED LT COL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1890.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: INC.A.1172

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR JAMES WISNER GALLE

Mailing Address 7933 CHADWICK ST

City

PRAIRIE VILLAGE

State

KS

Zip Code

66208

FEC ID number of contributing
federal political committee.

C

Name of Employer
USAF

Occupation

RETIRED LT COL

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1890.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: INC.A.1173

Amount of Each Receipt this Period

110.00

B.

Full Name (Last, First, Middle Initial)

MR SAMUEL L PECKHAM

Mailing Address 10405 COUNTY HIGHWAY A

City

LA FARGE

State

WI

Zip Code

54639

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: INC.A.760

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MRS BEVERLY J RAZOOK

Mailing Address 5150 E COPA DE ORO DR

City

ANAHEIM

State

CA

Zip Code

92807

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

RETIRED PROPERTY MANAGER/HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: INC.A.477

Amount of Each Receipt this Period

692.00

SUBTOTAL of Receipts This Page (optional)

902.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS GLENNA K ROBERTS

Mailing Address 4100 E FLETCHER AVE APT 805

City

TAMPA

State

FL

Zip Code

33613

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: INC.A.746

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MRS ELIZABETH M RUFFIN

Mailing Address 1707 JARVIS ST

City

RALEIGH

State

NC

Zip Code

27608

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: INC.A.1205

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR CALVIN R ARNOLD

Mailing Address 1010 REED AVE

City

CHEYENNE

State

WY

Zip Code

82007

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 1 / 2 0 0 7

Transaction ID: INC.A.996

Amount of Each Receipt this Period

110.00

SUBTOTAL of Receipts This Page (optional)

210.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS MARIE E HINCKLEY

Mailing Address 1054 WOODBRIDGE ST

City

SAINT CLAIR SHORES

State

MI

Zip Code

48080

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.75

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 0 7

Transaction ID: INC.A.795

Amount of Each Receipt this Period

52.75

B.

Full Name (Last, First, Middle Initial)

MRS HELEN A MAHURIN

Mailing Address 501 W 107TH ST APT 211

City

KANSAS CITY

State

MO

Zip Code

64114

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.75

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 0 7

Transaction ID: INC.A.985

Amount of Each Receipt this Period

52.75

C.

Full Name (Last, First, Middle Initial)

MR SAMUEL L PECKHAM

Mailing Address 10405 COUNTY HIGHWAY A

City

LA FARGE

State

WI

Zip Code

54639

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 0 7

Transaction ID: INC.A.761

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

130.50

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MISS C VIRGINIA PIERREPONT

Mailing Address 201 CROSSWICKS ST
CLAREEST M001

City State Zip Code
BORDENTOWN NJ 8505

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 1 / 2 0 0 7

Transaction ID: INC.A.731

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MRS KATHERINE S SMOOT

Mailing Address 1 JEFFERSON FERRY DR
APT. # 6169

City State Zip Code
CENTEREACH NY 11720

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.75

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 1 / 2 0 0 7

Transaction ID: INC.A.581

Amount of Each Receipt this Period

52.75

C.

Full Name (Last, First, Middle Initial)

MR & MRS JOHN R BOON

Mailing Address 8304 FRANCONIA RD

City State Zip Code
RICHMOND VA 23227

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 7

Transaction ID: INC.A.646

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

112.75

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 153 / 428

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR JOHN A BRUNET

Mailing Address 15038 SULTANA ST

City

HESPERIA

State

CA

Zip Code

92345

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	2	/	2	0	0	7

Transaction ID: INC.A.1032

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

DR JOHN CHESNICK, JR DO

Mailing Address 5110 CREEKMONT DR

City

CORPUS CHRISTI

State

TX

Zip Code

78413

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	2	/	2	0	0	7

Transaction ID: INC.A.1100

Amount of Each Receipt this Period

52.75

C.

Full Name (Last, First, Middle Initial)

DR JOHN CHESNICK, JR DO

Mailing Address 5110 CREEKMONT DR

City

CORPUS CHRISTI

State

TX

Zip Code

78413

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	2	/	2	0	0	7

Transaction ID: INC.A.1099

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

122.75

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 154 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR SMITH L ELDER

Mailing Address 10604 BIG THICKET DR

City

DALLAS

State

TX

Zip Code

75217

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 7

Transaction ID: INC.A.711

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MS WILHELMINE E LONG

Mailing Address 1817 W NORWOOD ST

City

CHICAGO

State

IL

Zip Code

60660

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 7

Transaction ID: INC.A.751

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

MS DOROTHY J MILLER

Mailing Address 13575 COFFEE RD

City

WILMOT

State

SD

Zip Code

57279

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.75

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 7

Transaction ID: INC.A.621

Amount of Each Receipt this Period

52.75

SUBTOTAL of Receipts This Page (optional)

157.75

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS GERTRUDE PETROSE

Mailing Address 2905 W 71ST ST

City

CHICAGO

State

IL

Zip Code

60629

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

377.75

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 7

Transaction ID: INC.A.625

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

MRS GLENNA K ROBERTS

Mailing Address 4100 E FLETCHER AVE APT 805

City

TAMPA

State

FL

Zip Code

33613

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 7

Transaction ID: INC.A.747

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MRS FRANCES S TAYLOR

Mailing Address 62 TAYLOR LN

City

SPRUCE PINE

State

AL

Zip Code

35585

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 7

Transaction ID: INC.A.1064

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

255.00

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS ARLENE K BUCK

Mailing Address 701 85TH AVE NE APT 309

City

MINNEAPOLIS

State

MN

Zip Code

55434

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 7

Transaction ID: INC.A.915

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR SMITH L ELDER

Mailing Address 10604 BIG THICKET DR

City

DALLAS

State

TX

Zip Code

75217

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 7

Transaction ID: INC.A.712

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

MRS GLENNA K ROBERTS

Mailing Address 4100 E FLETCHER AVE APT 805

City

TAMPA

State

FL

Zip Code

33613

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 7

Transaction ID: INC.A.748

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

230.00

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 157 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS CONSTANCE D HUNTER

Mailing Address 4329 S ATLANTIC AVE

City

PORT ORANGE

State

FL

Zip Code

32127

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

426.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 7

Transaction ID: INC.A.177

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MRS MARJORIE J KING

Mailing Address 50 VIEW POINT DR

City

GREENVILLE

State

SC

Zip Code

29609

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

439.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 7

Transaction ID: INC.A.291

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MR PAUL REMICK, JR

Mailing Address 55 UPPER LANDING RD
PO BOX 729

City

WELLS

State

ME

Zip Code

4090

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 7

Transaction ID: INC.A.253

Amount of Each Receipt this Period

600.00

SUBTOTAL of Receipts This Page (optional)

670.00

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 158 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR DAVID K ROBINSON

Mailing Address 842 E VILLA ST APT 219

City

PASADENA

State

CA

Zip Code

91101

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

RETIRED ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 7

Transaction ID: INC.A.950

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MS HELEN W SKATRUD

Mailing Address 2601 TOUCHMARK DR UNIT 241

City

APPLETON

State

WI

Zip Code

54914

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

969.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 7

Transaction ID: INC.A.872

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MRS RUTH W BURKE

Mailing Address 2541 STRATFORD RD

City

RICHMOND

State

VA

Zip Code

23225

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 7

Transaction ID: INC.A.391

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

200.00

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
MS KATE JOHNSTON

Mailing Address 139 HORTON

City State Zip Code
KYLE TX 78640

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 7

Transaction ID: INC.A.1194

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)
MS MARGERY L KEIDEL

Mailing Address 27765 CALLE VALDES

City State Zip Code
MISSION VIEJO CA 92692

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 7

Transaction ID: INC.A.650

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)
MS MARION W PARKS, JR

Mailing Address 2534 N MORRISON RD

City State Zip Code
MUNCIE IN 47304

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.S. ARMY

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 7

Transaction ID: INC.A.636

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

245.00

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 160 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS GERTRUDE PETROSE

Mailing Address 2905 W 71ST ST

City

CHICAGO

State

IL

Zip Code

60629

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.75

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 7

Transaction ID: INC.A.627

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MRS GERTRUDE PETROSE

Mailing Address 2905 W 71ST ST

City

CHICAGO

State

IL

Zip Code

60629

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.75

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 7

Transaction ID: INC.A.626

Amount of Each Receipt this Period

52.75

C.

Full Name (Last, First, Middle Initial)

MR GEORGE L AMOS

Mailing Address 177 COOPER ST

City

DANVILLE

State

VA

Zip Code

24540

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.S. ARMY

Occupation

RETIRED SSG E6/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 8 / 2 0 0 7

Transaction ID: INC.A.1154

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

187.75

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR JOHN K BAKER

Mailing Address 79 SHORELINE DR

City

HILTON HEAD ISLAND

State

SC

Zip Code

29928

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	8	/	2	0	0	7

Transaction ID: INC.A.1011

Amount of Each Receipt this Period

52.75

B.

Full Name (Last, First, Middle Initial)

MS LILLIE K BELK DAVIS

Mailing Address 2340 WHITES MILL RD

City

SUMTER

State

SC

Zip Code

29153

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	8	/	2	0	0	7

Transaction ID: INC.A.899

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR DAVID H BURROWS

Mailing Address 2301 STANLEY AVE SE
PO BOX 24233

City

ROANOKE

State

VA

Zip Code

24014

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	8	/	2	0	0	7

Transaction ID: INC.A.275

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

202.75

TOTAL This Period (last page this line number only)

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

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for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS PATRICIA B CARMODY

Mailing Address 900 UNIVERSITY ST APT 17H

City

SEATTLE

State

WA

Zip Code

98101

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 8 / 2 0 0 7

Transaction ID: INC.A.631

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MRS JOYCE A CROWTHER

Mailing Address 23500 CRISTO REY DR UNIT 208C

City

CUPERTINO

State

CA

Zip Code

95014

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 8 / 2 0 0 7

Transaction ID: INC.A.1113

Amount of Each Receipt this Period

110.00

C.

Full Name (Last, First, Middle Initial)

MRS WILMA N DEMOSS

Mailing Address 104 SAINT JO TER

City

NOCONA

State

TX

Zip Code

76255

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 8 / 2 0 0 7

Transaction ID: INC.A.281

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)

175.00

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 163 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS VERA RUTH GOODRICH

Mailing Address 25738 COUNTY ROAD Z

City

LA JUNTA

State

CO

Zip Code

81050

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOSPICE VOLUNTEER/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.75

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 8 / 2 0 0 7

Transaction ID: INC.A.1120

Amount of Each Receipt this Period

52.75

B.

Full Name (Last, First, Middle Initial)

MR LOUIS J HAZLEWOOD

Mailing Address 11041 ACADEMY RIDGE RD NE

City

ALBUQUERQUE

State

NM

Zip Code

87111

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

737.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 8 / 2 0 0 7

Transaction ID: INC.A.399

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

MRS KATRINA A MATLOCK

Mailing Address 3665 S RIVER CHURCH RD

City

WOODLEAF

State

NC

Zip Code

27054

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 8 / 2 0 0 7

Transaction ID: INC.A.793

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

387.75

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 164 / 428

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS PRISCILLA A PARNIN

Mailing Address 922 MILTON ST

City

FORT WAYNE

State

IN

Zip Code

46806

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	8	/	2	0	0	7

Transaction ID: INC.A.475

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

DR PAUL M PEPPER, PHD

Mailing Address 47 W COOKE RD

City

COLUMBUS

State

OH

Zip Code

43214

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	8	/	2	0	0	7

Transaction ID: INC.A.532

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

MR KENNETH SALTZ

Mailing Address 441 CIRCLE DR

City

GREER

State

SC

Zip Code

29650

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.S.A.F./FAA

Occupation

RETIRED/HOMEMAKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	8	/	2	0	0	7

Transaction ID: INC.A.1050

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

160.00

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 165 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS MILDRED F SOUTHERN

Mailing Address 933 KENLEIGH CIR

City

WINSTON SALEM

State

NC

Zip Code

27106

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

727.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 8 / 2 0 0 7

Transaction ID: INC.A.1018

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR JOHN M SWORD

Mailing Address 1914 B AVE NE

City

CEDAR RAPIDS

State

IA

Zip Code

52402

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.75

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 8 / 2 0 0 7

Transaction ID: INC.A.1092

Amount of Each Receipt this Period

52.75

C.

Full Name (Last, First, Middle Initial)

MRS HELEN M WILKS

Mailing Address 459 NW RAYMOND LN

City

PORT SAINT LUCIE

State

FL

Zip Code

34983

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.75

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 8 / 2 0 0 7

Transaction ID: INC.A.426

Amount of Each Receipt this Period

52.75

SUBTOTAL of Receipts This Page (optional)

155.50

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 166 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR SMITH L ELDER

Mailing Address 10604 BIG THICKET DR

City

DALLAS

State

TX

Zip Code

75217

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 9 / 2 0 0 7

Transaction ID: INC.A.713

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MRS ANGELA HAVERLY

Mailing Address 24 MOSSWOOD TRL

City

DENVILLE

State

NJ

Zip Code

7834

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

363.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 9 / 2 0 0 7

Transaction ID: INC.A.195

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MRS ELVA B LENDT

Mailing Address 3967 GRAPEFRUIT CIR

City

LAS VEGAS

State

NV

Zip Code

89103

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

578.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 9 / 2 0 0 7

Transaction ID: INC.A.1148

Amount of Each Receipt this Period

110.00

SUBTOTAL of Receipts This Page (optional)

210.00

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 167 / 428

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS JENNIE R PODBIELSKI

Mailing Address 34 MERILINE AVE

City

METHUEN

State

MA

Zip Code

1844

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	9		2	0	0	7

Transaction ID: INC.A.1060

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MRS BEVERLY J RAZOOK

Mailing Address 5150 E COPA DE ORO DR

City

ANAHEIM

State

CA

Zip Code

92807

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYEDOccupation
RETIRED PROPERTY MANAGER/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	9		2	0	0	7

Transaction ID: INC.A.478

Amount of Each Receipt this Period

162.75

C.

Full Name (Last, First, Middle Initial)

MR HENRY L WELLS

Mailing Address 6018 MADRA AVE

City

SAN DIEGO

State

CA

Zip Code

92120

FEC ID number of contributing
federal political committee.

C

Name of Employer
SAN DIEGO TRUCK CENTEROccupation
RETIRED MECHANIC/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

858.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	9		2	0	0	7

Transaction ID: INC.A.374

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

287.75

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
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FOR LINE NUMBER: PAGE 168 / 428
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS BARBARA L WILBURN

Mailing Address 221 HARWOOD HTS

City

UNION

State

SC

Zip Code

29379

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 9 / 2 0 0 7

Transaction ID: INC.A.1041

Amount of Each Receipt this Period

110.00

B.

Full Name (Last, First, Middle Initial)

MRS LEOLA Z CLARK

Mailing Address 701 10TH ST SE RM 34-18

City

CEDAR RAPIDS

State

IA

Zip Code

52403

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 0 / 2 0 0 7

Transaction ID: INC.A.689

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MS KATHLYN C DUNAGAN

Mailing Address 1107 S DWIGHT ST

City

MONAHANS

State

TX

Zip Code

79756

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 0 / 2 0 0 7

Transaction ID: INC.A.566

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

310.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR JOHN H GEIMAN

Mailing Address 541 W WALNUT ST

City

HANOVER

State

PA

Zip Code

17331

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

535.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 0 / 2 0 0 7

Transaction ID: INC.A.207

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MS MARIE E HINCKLEY

Mailing Address 1054 WOODBRIDGE ST

City

SAINT CLAIR SHORES

State

MI

Zip Code

48080

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

252.75

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 0 / 2 0 0 7

Transaction ID: INC.A.796

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MRS RUTH E JOHNSON

Mailing Address 212 S 3RD ST

City

NEODESHA

State

KS

Zip Code

66757

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

408.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 0 / 2 0 0 7

Transaction ID: INC.A.766

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

220.00

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 170 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS HERMIONE W LEWIS

Mailing Address 17502 102ND AVE NE APT 112

City

BOTHELL

State

WA

Zip Code

98011

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 0 / 2 0 0 7

Transaction ID: INC.A.241

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MRS HELEN A MAHURIN

Mailing Address 501 W 107TH ST APT 211

City

KANSAS CITY

State

MO

Zip Code

64114

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.75

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 0 / 2 0 0 7

Transaction ID: INC.A.986

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

MS MARY W NEWTON

Mailing Address 625 ESKATON CIR APT 215

City

GRASS VALLEY

State

CA

Zip Code

95945

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 0 / 2 0 0 7

Transaction ID: INC.A.558

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

185.00

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
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FOR LINE NUMBER: PAGE 171 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR LYNN O ROHDE

Mailing Address 400 N A1A LOT 71

City

JUPITER

State

FL

Zip Code

33477

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 0 / 2 0 0 7

Transaction ID: INC.A.562

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR RODNEY ROWLAND

Mailing Address 505 N MAIN ST

City

SMITH CENTER

State

KS

Zip Code

66967

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 0 / 2 0 0 7

Transaction ID: INC.A.1124

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

MRS CLAUDIA C SHANKS

Mailing Address 4215 HARDING PIKE APT 310
WINDSOR TOWERS

City

NASHVILLE

State

TN

Zip Code

37205

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.75

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 0 / 2 0 0 7

Transaction ID: INC.A.536

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR ELBERT C SMITH

Mailing Address PO BOX 856

City

RENTON

State

WA

Zip Code

98057

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

844.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 0 / 2 0 0 7

Transaction ID: INC.A.1000

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR ROBERT SUNDERLAND

Mailing Address 953 PYRITE AVE

City

HENDERSON

State

NV

Zip Code

89011

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1122.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 0 / 2 0 0 7

Transaction ID: INC.A.673

Amount of Each Receipt this Period

32.00

C.

Full Name (Last, First, Middle Initial)

MRS FRANCES S TAYLOR

Mailing Address 62 TAYLOR LN

City

SPRUCE PINE

State

AL

Zip Code

35585

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 0 / 2 0 0 7

Transaction ID: INC.A.1065

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

167.00

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
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS AURORA VEGA

Mailing Address 251 S WALNUT AVE APT 111

City

SAN DIMAS

State

CA

Zip Code

91773

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 0 / 2 0 0 7

Transaction ID: INC.A.806

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MS BARBARA L WILBURN

Mailing Address 221 HARWOOD HTS

City

UNION

State

SC

Zip Code

29379

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 0 / 2 0 0 7

Transaction ID: INC.A.1042

Amount of Each Receipt this Period

5.00

C.

Full Name (Last, First, Middle Initial)

MRS KATHERINE E BROADSTONE

Mailing Address 1834 W NEWMAN PKWY

City

PEORIA

State

IL

Zip Code

61604

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 7

Transaction ID: INC.A.607

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

65.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR WALTER R CHANDLER

Mailing Address 608 SNUGGS ST

City

ALBEMARLE

State

NC

Zip Code

28001

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 7

Transaction ID: INC.A.963

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

MRS LEOLA Z CLARK

Mailing Address 701 10TH ST SE RM 34-18

City

CEDAR RAPIDS

State

IA

Zip Code

52403

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 7

Transaction ID: INC.A.690

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

MS VERNIE J DAVIDSON

Mailing Address 12552 CHARDIN PL APT 2

City

SAINT LOUIS

State

MO

Zip Code

63128

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

X-RAY TECHNOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 7

Transaction ID: INC.A.818

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

120.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS JENNIE LOU DICKSON

Mailing Address 411 E HOADLEY RD

City

PINE BLUFF

State

AR

Zip Code

71602

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIRED

Occupation

NURSE/BIOLOGY AND CHEMISTRY TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	1		2	0	0	7

Transaction ID: INC.A.909

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

MR LUNS福德 RICHARDSON, JR

Mailing Address 7 INDIAN SPRING RD

City

NORWALK

State

CT

Zip Code

6853

FEC ID number of contributing
federal political committee.**C**Name of Employer
SELF-EMPLOYED

Occupation

DIRECTOR OF SEVERAL FAMILY COMPANIES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	1		2	0	0	7

Transaction ID: INC.A.258

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

MRS JO AN RIEDLINGER

Mailing Address PO BOX 3006

City

TROY

State

MT

Zip Code

59935

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	1		2	0	0	7

Transaction ID: INC.A.594

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

825.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR DAVID K ROBINSON

Mailing Address 842 E VILLA ST APT 219

City

PASADENA

State

CA

Zip Code

91101

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

RETIRED ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 7

Transaction ID: INC.A.951

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

MS MILDRED F SOUTHERN

Mailing Address 933 KENLEIGH CIR

City

WINSTON SALEM

State

NC

Zip Code

27106

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

727.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 7

Transaction ID: INC.A.1019

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MRS MACEL H WILLIAMS

Mailing Address 7342 HIGHWAY 9 W

City

CLINTON

State

AR

Zip Code

72031

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

TEACHER/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 7

Transaction ID: INC.A.975

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

105.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR GEORGE L AMOS

Mailing Address 177 COOPER ST

City

DANVILLE

State

VA

Zip Code

24540

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.S. ARMY

Occupation

RETIRED SSG E6/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 7

Transaction ID: INC.A.1155

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

MRS EDDITH G DOWELL

Mailing Address 3513 GILLESPIE AVE

City

NASHVILLE

State

TN

Zip Code

37205

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

860.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 7

Transaction ID: INC.A.1189

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR CHARLES R DRUMMOND

Mailing Address 17527 COUNTY ROAD 448

City

MOUNT DORA

State

FL

Zip Code

32757

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 7

Transaction ID: INC.A.1123

Amount of Each Receipt this Period

137.00

SUBTOTAL of Receipts This Page (optional)

272.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR CLIFFORD N HALL

Mailing Address 9047 DICKENSON RD

City

WINNEBAGO

State

IL

Zip Code

61088

FEC ID number of contributing
federal political committee.

C

Name of Employer
SUNDSTRAND CORP

Occupation

SELF-EMPLOYED/RETIRED/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 0 7

Transaction ID: INC.A.414

Amount of Each Receipt this Period

120.00

B.

Full Name (Last, First, Middle Initial)

MRS ISABELLE HENRY

Mailing Address 1818 STATE ST

City

WASHINGTON

State

IN

Zip Code

47501

FEC ID number of contributing
federal political committee.

C

Name of Employer
MISSIONARY

Occupation

MISSIONARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 0 7

Transaction ID: INC.A.723

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MRS FERN B HILSTAD

Mailing Address PO BOX 193

City

CIRCLE

State

MT

Zip Code

59215

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

397.75

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 0 7

Transaction ID: INC.A.848

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

255.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR DAVID L LUKE, III

Mailing Address 775 PARK AVE

City

NEW YORK

State

NY

Zip Code

10021

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 0 7

Transaction ID: INC.A.852

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR GUY T MCBRIDE, JR

Mailing Address 2615 OAK DR UNIT 13

City

LAKEWOOD

State

CO

Zip Code

80215

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

591.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 0 7

Transaction ID: INC.A.959

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MRS JENNIE R PODBIELSKI

Mailing Address 34 MERILINE AVE

City

METHUEN

State

MA

Zip Code

1844

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 0 7

Transaction ID: INC.A.1061

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

335.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS BARBARA J PORBE

Mailing Address 2649 N DUNFIELD ST

City

ORANGE

State

CA

Zip Code

92865

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

RETIRED PRIVATE VIOLIN TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 7

Transaction ID: INC.A.1128

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

MRS BEVERLY J RAZOOK

Mailing Address 5150 E COPA DE ORO DR

City

ANAHEIM

State

CA

Zip Code

92807

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

RETIRED PROPERTY MANAGER/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 7

Transaction ID: INC.A.479

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

MR PAUL REMICK, JR

Mailing Address 55 UPPER LANDING RD
PO BOX 729

City

WELLS

State

ME

Zip Code

4090

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 7

Transaction ID: INC.A.254

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1035.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS CLAUDIA C SHANKS

Mailing Address 4215 HARDING PIKE APT 310
WINDSOR TOWERS

City State Zip Code
NASHVILLE TN 37205

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.75

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 7

Transaction ID: INC.A.537

Amount of Each Receipt this Period

162.75

B.

Full Name (Last, First, Middle Initial)

MS BARBARA L WILBURN

Mailing Address 221 HARWOOD HTS

City State Zip Code
UNION SC 29379

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 7

Transaction ID: INC.A.1043

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR GEORGE L AMOS

Mailing Address 177 COOPER ST

City State Zip Code
DANVILLE VA 24540

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.S. ARMY

Occupation
RETIRED SSG E6/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 7

Transaction ID: INC.A.1156

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)

277.75

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR WILSON E ANDREWS

Mailing Address 6727 40TH ST NE

City

MARYSVILLE

State

WA

Zip Code

98270

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 7

Transaction ID: INC.A.421

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR LOUIS R BUCKLEY

Mailing Address 1905 NE 108TH AVE

City

PORTLAND

State

OR

Zip Code

97220

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
CHURCH PASTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 7

Transaction ID: INC.A.341

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MS MABEL O FIELDS

Mailing Address 801 HUNTINGTON AVE

City

WARREN

State

IN

Zip Code

46792

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.75

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 7

Transaction ID: INC.A.1028

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

225.00

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 183 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR JAMES WISNER GALLE

Mailing Address 7933 CHADWICK ST

City

PRAIRIE VILLAGE

State

KS

Zip Code

66208

FEC ID number of contributing
federal political committee.

C

Name of Employer
USAF

Occupation

RETIRED LT COL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1890.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 7

Transaction ID: INC.A.1174

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

MS ALDEN A HANSEN

Mailing Address 849 E 2ND ST
APT 19

City

MINDEN

State

NE

Zip Code

68959

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 7

Transaction ID: INC.A.755

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MS ALICE K HAYES

Mailing Address 4014 QUAIL RIDGE DR N APT A

City

BOYNTON BEACH

State

FL

Zip Code

33436

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1481.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 7

Transaction ID: INC.A.837

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

400.00

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 184 / 428
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS ALICE K HAYES

Mailing Address 4014 QUAIL RIDGE DR N APT A

City

BOYNTON BEACH

State

FL

Zip Code

33436

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1481.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 7

Transaction ID: INC.A.835

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MS ALICE K HAYES

Mailing Address 4014 QUAIL RIDGE DR N APT A

City

BOYNTON BEACH

State

FL

Zip Code

33436

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1481.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 7

Transaction ID: INC.A.836

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MRS ELVA B LENDT

Mailing Address 3967 GRAPEFRUIT CIR

City

LAS VEGAS

State

NV

Zip Code

89103

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

578.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 7

Transaction ID: INC.A.1149

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

250.00

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 185 / 428

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS BEVERLY J RAZOOK

Mailing Address 5150 E COPA DE ORO DR

City

ANAHEIM

State

CA

Zip Code

92807

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

RETIRED PROPERTY MANAGER/HOMEMAKER

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	0	7

Transaction ID: INC.A.480

Amount of Each Receipt this Period

3645.25

B.

Full Name (Last, First, Middle Initial)

MS PAULINE SALYERS

Mailing Address 2916 HOYLAK CT

City

DAYTON

State

OH

Zip Code

45439

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

362.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	0	7

Transaction ID: INC.A.784

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MISS LILLIAN T SLADEWSKI

Mailing Address 469 LAKE RD

City

NEW WINDSOR

State

NY

Zip Code

12553

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	0	7

Transaction ID: INC.A.568

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

3870.25

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 186 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS KATHERINE S SMOOT

Mailing Address 1 JEFFERSON FERRY DR
APT. # 6169

City State Zip Code
CENTEREACH NY 11720

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.75

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 7

Transaction ID: INC.A.582

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MRS VERNA LEE STEWART

Mailing Address 16795 COUNTRY KNOLL DR

City State Zip Code
NORTHVILLE MI 48168

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 7

Transaction ID: INC.A.695

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

DR MILDRED M THOMAS

Mailing Address 2935 N WILLAMETTE BLVD

City State Zip Code
PORTLAND OR 97217

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 7

Transaction ID: INC.A.684

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

75.00

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 187 / 428

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS MACEL H WILLIAMS

Mailing Address 7342 HIGHWAY 9 W

City

CLINTON

State

AR

Zip Code

72031

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

TEACHER/HOMEMAKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	0	7

Transaction ID: INC.A.976

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MRS OLETHA E YOUNG

Mailing Address 730 W JEFFERSON ST APT 242

City

MORTON

State

IL

Zip Code

61550

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	0	7

Transaction ID: INC.A.521

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

MR GEORGE L AMOS

Mailing Address 177 COOPER ST

City

DANVILLE

State

VA

Zip Code

24540

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.S. ARMY

Occupation

RETIRED SSG E6/HOMEMAKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

323.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	7

Transaction ID: INC.A.1157

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

110.00

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
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR WALTER R CHANDLER

Mailing Address 608 SNUGGS ST

City

ALBEMARLE

State

NC

Zip Code

28001

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 7

Transaction ID: INC.A.964

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MRS ORA M DOSS

Mailing Address 285 BILL BENNETT RD

City

JOHNSON CITY

State

TN

Zip Code

37604

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 7

Transaction ID: INC.A.585

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN H GEIMAN

Mailing Address 541 W WALNUT ST

City

HANOVER

State

PA

Zip Code

17331

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 7

Transaction ID: INC.A.208

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

85.00

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 189 / 428

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS LESLEY LINSTEADER

Mailing Address 23871 WILLOWS DR APT 135

City

LAGUNA HILLS

State

CA

Zip Code

92653

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED/HOMEMAKER

Occupation

RETIRED BUSINESS FINANCIAL MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

822.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	6	/	2	0	0	7

Transaction ID: INC.A.886

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

FATHER JAMES P RYAN

Mailing Address 2828 SLOAT RD

City

PEBBLE BEACH

State

CA

Zip Code

93953

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

RETIRED CATHOLIC PRIEST/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	6	/	2	0	0	7

Transaction ID: INC.A.225

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MRS FRANCES S TAYLOR

Mailing Address 62 TAYLOR LN

City

SPRUCE PINE

State

AL

Zip Code

35585

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	6	/	2	0	0	7

Transaction ID: INC.A.1066

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

205.00

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 190 / 428

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR JAMES F WYCHGEL

Mailing Address 109 RIDGE RD

City

CHOCOWINITY

State

NC

Zip Code

27817

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	7

Transaction ID: INC.A.1088

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

MRS JUANITA L ALEXANDER

Mailing Address 2724 ALCAZAR ST NE

City

ALBUQUERQUE

State

NM

Zip Code

87110

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
ELEMENTARY TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	7		2	0	0	7

Transaction ID: INC.A.443

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR WILSON E ANDREWS

Mailing Address 6727 40TH ST NE

City

MARYSVILLE

State

WA

Zip Code

98270

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	7		2	0	0	7

Transaction ID: INC.A.422

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

110.00

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
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FOR LINE NUMBER: PAGE 191 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS WILMA N DEMOSS

Mailing Address 104 SAINT JO TER

City

NOCONA

State

TX

Zip Code

76255

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 7

Transaction ID: INC.A.282

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

MS JENNIE LOU DICKSON

Mailing Address 411 E HOADLEY RD

City

PINE BLUFF

State

AR

Zip Code

71602

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
NURSE/BIOLOGY AND CHEMISTRY TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 7

Transaction ID: INC.A.910

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MRS KATHERINE C S DOWNES

Mailing Address 106 LAURISTON ST

City

PROVIDENCE

State

RI

Zip Code

2906

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 7

Transaction ID: INC.A.1199

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

110.00

TOTAL This Period (last page this line number only)

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS EDITH FLEMINBERG

Mailing Address 805 LONDONDERRY RD

City

SCHENECTADY

State

NY

Zip Code

12309

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

658.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 7

Transaction ID: INC.A.660

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR JAMES WISNER GALLE

Mailing Address 7933 CHADWICK ST

City

PRAIRIE VILLAGE

State

KS

Zip Code

66208

FEC ID number of contributing
federal political committee.

C

Name of Employer
USAF

Occupation

RETIRED LT COL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1890.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 7

Transaction ID: INC.A.1175

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR GEORGE K GATES

Mailing Address 3473 N COUNTY ROAD 1100 W

City

NORMAN

State

IN

Zip Code

47264

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 7

Transaction ID: INC.A.462

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

185.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR JOHN H GEIMAN

Mailing Address 541 W WALNUT ST

City

HANOVER

State

PA

Zip Code

17331

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 7

Transaction ID: INC.A.209

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR JOHN H GEIMAN

Mailing Address 541 W WALNUT ST

City

HANOVER

State

PA

Zip Code

17331

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 7

Transaction ID: INC.A.210

Amount of Each Receipt this Period

15.00

C.

Full Name (Last, First, Middle Initial)

DR JOHN J HARTFORD, MD

Mailing Address 3644 TERRA GRANADA DR
#2A

City

WALNUT CREEK

State

CA

Zip Code

94595

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

RETIRED M.D.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 7

Transaction ID: INC.A.183

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS MARGERY L KEIDEL

Mailing Address 27765 CALLE VALDES

City

MISSION VIEJO

State

CA

Zip Code

92692

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 7

Transaction ID: INC.A.651

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MRS FELIPA A KLYN

Mailing Address 668 SAN BERNARDINO AVE

City

POMONA

State

CA

Zip Code

91767

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1029.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 7

Transaction ID: INC.A.772

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

MRS HERMIONE W LEWIS

Mailing Address 17502 102ND AVE NE APT 112

City

BOTHELL

State

WA

Zip Code

98011

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 7

Transaction ID: INC.A.242

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

110.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS PRISCILLA A PARNIN

Mailing Address 922 MILTON ST

City

FORT WAYNE

State

IN

Zip Code

46806

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 7

Transaction ID: INC.A.476

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

FATHER JAMES P RYAN

Mailing Address 2828 SLOAT RD

City

PEBBLE BEACH

State

CA

Zip Code

93953

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

RETIRED CATHOLIC PRIEST/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 7

Transaction ID: INC.A.226

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

MR ADELBERT I SLOCUM

Mailing Address 14314 SE WEBSTER RD APT D2

City

MILWAUKIE

State

OR

Zip Code

97267

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 7

Transaction ID: INC.A.259

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

275.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR ELBERT C SMITH

Mailing Address PO BOX 856

City

RENTON

State

WA

Zip Code

98057

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

844.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 7

Transaction ID: INC.A.1001

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MS MILDRED F SOUTHERN

Mailing Address 933 KENLEIGH CIR

City

WINSTON SALEM

State

NC

Zip Code

27106

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

727.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 7

Transaction ID: INC.A.1020

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MRS HELEN M WILKS

Mailing Address 459 NW RAYMOND LN

City

PORT SAINT LUCIE

State

FL

Zip Code

34983

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.75

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 7

Transaction ID: INC.A.427

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS LILLIE K BELK DAVIS

Mailing Address 2340 WHITES MILL RD

City

SUMTER

State

SC

Zip Code

29153

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 0 7

Transaction ID: INC.A.900

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MRS RONNIE BERRY

Mailing Address 15225 SOBEY RD

City

SARATOGA

State

CA

Zip Code

95070

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 0 7

Transaction ID: INC.A.1107

Amount of Each Receipt this Period

110.00

C.

Full Name (Last, First, Middle Initial)

MRS KATHERINE E BROADSTONE

Mailing Address 1834 W NEWMAN PKWY

City

PEORIA

State

IL

Zip Code

61604

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 0 7

Transaction ID: INC.A.608

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

195.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS KATHERINE E BROADSTONE

Mailing Address 1834 W NEWMAN PKWY

City

PEORIA

State

IL

Zip Code

61604

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 0 7

Transaction ID: INC.A.609

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MRS EDNA P HARRISON

Mailing Address 12153 GLENCOE ST

City

THORNTON

State

CO

Zip Code

80241

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 0 7

Transaction ID: INC.A.267

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MRS MARJORIE J KING

Mailing Address 50 VIEW POINT DR

City

GREENVILLE

State

SC

Zip Code

29609

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

439.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 0 7

Transaction ID: INC.A.292

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS LESLEY LINSTEADER

Mailing Address 23871 WILLOWS DR APT 135

City

LAGUNA HILLS

State

CA

Zip Code

92653

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED/HOMEMAKER

Occupation

RETIRED BUSINESS FINANCIAL MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

822.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 0 7

Transaction ID: INC.A.887

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

DR GORDON D MYERS, MD

Mailing Address 25 EASTGATE DR

City

CAMP HILL

State

PA

Zip Code

17011

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

SURGEON

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 0 7

Transaction ID: INC.A.339

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MS ELLEN M NOFTZ

Mailing Address 1238 BALMORAL AVE

City

WESTCHESTER

State

IL

Zip Code

60154

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 0 7

Transaction ID: INC.A.1039

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS MARION W PARKS, JR

Mailing Address 2534 N MORRISON RD

City State Zip Code
MUNCIE IN 47304

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.S. ARMY

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 0 7

Transaction ID: INC.A.637

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MRS GERTRUDE PETROSE

Mailing Address 2905 W 71ST ST

City State Zip Code
CHICAGO IL 60629

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.75

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 0 7

Transaction ID: INC.A.628

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MS BARBARA L WILBURN

Mailing Address 221 HARWOOD HTS

City State Zip Code
UNION SC 29379

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 0 7

Transaction ID: INC.A.1044

Amount of Each Receipt this Period

5.00

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS ANNIE D WILSON

Mailing Address 254 NORMAN DR

City

CRANBERRY TWP

State

PA

Zip Code

16066

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 0 7

Transaction ID: INC.A.384

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MRS JEAN B CANAIY

Mailing Address 2688 ELDORADO SPRINGS DR

City

LOVELAND

State

CO

Zip Code

80538

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 7

Transaction ID: INC.A.927

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

DR JOHN CHESNICK, JR DO

Mailing Address 5110 CREEKMONT DR

City

CORPUS CHRISTI

State

TX

Zip Code

78413

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.75

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 7

Transaction ID: INC.A.1101

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

85.00

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 202 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS KATHERINE C S DOWNES

Mailing Address 106 LAURISTON ST

City

PROVIDENCE

State

RI

Zip Code

2906

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 7

Transaction ID: INC.A.1200

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

MS MABEL O FIELDS

Mailing Address 801 HUNTINGTON AVE

City

WARREN

State

IN

Zip Code

46792

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

TEACHER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.75

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 7

Transaction ID: INC.A.1029

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MRS THERESA FIORENTINO

Mailing Address 1515 HILL DR

City

LOS ANGELES

State

CA

Zip Code

90041

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 7

Transaction ID: INC.A.496

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

160.00

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 203 / 428

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR ROBERT J FREDETTE, SR

Mailing Address 552-850 DAY RD

City

MCARTHUR

State

CA

Zip Code

96056

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.S.N.

Occupation

RETIRED/HOMEMAKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	9		2	0	0	7

Transaction ID: INC.A.514

Amount of Each Receipt this Period

110.00

B.

Full Name (Last, First, Middle Initial)

MISS BILLIE F HINES

Mailing Address 2811 FULTON ST

City

SHREVEPORT

State

LA

Zip Code

71109

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	9		2	0	0	7

Transaction ID: INC.A.362

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

MRS HERMIONE W LEWIS

Mailing Address 17502 102ND AVE NE APT 112

City

BOTHILL

State

WA

Zip Code

98011

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	9		2	0	0	7

Transaction ID: INC.A.243

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

200.00

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 204 / 428
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MISS MARIAN L PATTERSON

Mailing Address 5001 W FLORIDA AVE SPC 264

City

HEMET

State

CA

Zip Code

92545

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 7

Transaction ID: INC.A.354

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MS ELLEN C ROUTSON

Mailing Address 1401 HERMITS WAY

City

THE DALLES

State

OR

Zip Code

97058

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

732.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 7

Transaction ID: INC.A.327

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

MS PAULINE SALYERS

Mailing Address 2916 HOYLAK CT

City

DAYTON

State

OH

Zip Code

45439

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 7

Transaction ID: INC.A.785

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

385.00

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 205 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS DOROTHY L SAPLATA

Mailing Address 5304 HARRY S TRUMAN DR APT 304

City

GRANDVIEW

State

MO

Zip Code

64030

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 7

Transaction ID: INC.A.349

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

MR RODGER C SCOTT

Mailing Address 20405 SE 344TH ST

City

AUBURN

State

WA

Zip Code

98092

FEC ID number of contributing
federal political committee.

C

Name of Employer
SCOTTY'S GENERAL CONSTRUC-
TION

Occupation

SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1650.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 7

Transaction ID: INC.A.238

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

MRS EUTEVA C SKOW

Mailing Address 17200 W BELL RD LOT 2311

City

SURPRISE

State

AZ

Zip Code

85374

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 7

Transaction ID: INC.A.606

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

640.00

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
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS JUNE L WELSH

Mailing Address 1111 N COLLEGE AVE

City

CLARKSVILLE

State

AR

Zip Code

72830

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 7

Transaction ID: INC.A.770

Amount of Each Receipt this Period

15.00

B.

Full Name (Last, First, Middle Initial)

MR MYRON C YOCKY

Mailing Address 5102 DOWNEY AVE

City

LAKEWOOD

State

CA

Zip Code

90712

FEC ID number of contributing
federal political committee.

C

Name of Employer
DOUGLAS AIRCRAFT CO.

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 7

Transaction ID: INC.A.460

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MRS OLETHA E YOUNG

Mailing Address 730 W JEFFERSON ST APT 242

City

MORTON

State

IL

Zip Code

61550

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 7

Transaction ID: INC.A.522

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

70.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS OLETHA E YOUNG

Mailing Address 730 W JEFFERSON ST APT 242

City

MORTON

State

IL

Zip Code

61550

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	9		2	0	0	7

Transaction ID: INC.A.523

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

MR WILSON E ANDREWS

Mailing Address 6727 40TH ST NE

City

MARYSVILLE

State

WA

Zip Code

98270

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	2		2	0	0	7

Transaction ID: INC.A.423

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MRS AGNES M ANNEN

Mailing Address 705 TAYLOR ST

City

MOUNT ANGEL

State

OR

Zip Code

97362

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

414.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	2		2	0	0	7

Transaction ID: INC.A.542

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

225.00

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
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FOR LINE NUMBER: PAGE 208 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR ARTHUR E BURGNER

Mailing Address 808 HIGHLAND DR SE

City

TUMWATER

State

WA

Zip Code

98501

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 7

Transaction ID: INC.A.923

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MS VIOLET V CHEAL

Mailing Address 354 KENDAL DR

City

KENNETT SQUARE

State

PA

Zip Code

19348

FEC ID number of contributing
federal political committee.

C

Name of Employer
STATE OF DELEWARE

Occupation
RETIRED TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 7

Transaction ID: INC.A.616

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

MRS WILMA N DEMOSS

Mailing Address 104 SAINT JO TER

City

NOCONA

State

TX

Zip Code

76255

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 7

Transaction ID: INC.A.283

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

160.00

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 209 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS JENNIE LOU DICKSON

Mailing Address 411 E HOADLEY RD

City

PINE BLUFF

State

AR

Zip Code

71602

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

NURSE/BIOLOGY AND CHEMISTRY TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 7

Transaction ID: INC.A.911

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

MRS ALICE R FINNERTY

Mailing Address 5 SUTTON PL

City

ISLIP

State

NY

Zip Code

11751

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 7

Transaction ID: INC.A.803

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MRS MAYME L KAUFFELD

Mailing Address 1512 BROOKHOLLOW DR

City

BATON ROUGE

State

LA

Zip Code

70810

FEC ID number of contributing
federal political committee.

C

Name of Employer
USDA

Occupation

RETIRED RESEARCH ENTOMOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 7

Transaction ID: INC.A.434

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

85.00

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
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR FRED W KERR

Mailing Address 5310 HIGHWAY 65

City

CHILLICOTHE

State

MO

Zip Code

64601

FEC ID number of contributing
federal political committee.

C

Name of Employer
K FARMS, INC

Occupation

SELF-EMPLOYED FARMER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 7

Transaction ID: INC.A.200

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

MS JANE LANDAU

Mailing Address 25 W 81ST ST
APT 12B

City

NEW YORK

State

NY

Zip Code

10024

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

RETIRED SECRETARY/HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 7

Transaction ID: INC.A.318

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

MS MARY W NEWTON

Mailing Address 625 ESKATON CIR APT 215

City

GRASS VALLEY

State

CA

Zip Code

95945

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 7

Transaction ID: INC.A.559

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

570.00

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 211 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS JENNIE R PODBIELSKI

Mailing Address 34 MERILINE AVE

City

METHUEN

State

MA

Zip Code

1844

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 7

Transaction ID: INC.A.1062

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

FATHER JAMES P RYAN

Mailing Address 2828 SLOAT RD

City

PEBBLE BEACH

State

CA

Zip Code

93953

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
RETIRED CATHOLIC PRIEST/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 7

Transaction ID: INC.A.227

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MRS CLAUDIA C SHANKS

Mailing Address 4215 HARDING PIKE APT 310
WINDSOR TOWERS

City

NASHVILLE

State

TN

Zip Code

37205

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.75

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 7

Transaction ID: INC.A.538

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

110.00

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 212 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS BARBARA J SNODGRASS

Mailing Address PO BOX 31

City

ATWOOD

State

KS

Zip Code

67730

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 7

Transaction ID: INC.A.1034

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

MS JANYCE SORBELLO

Mailing Address 833 PRISM VALLEY DR

City

MISHAWAKA

State

IN

Zip Code

46544

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

REGISTERED NURSE/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 7

Transaction ID: INC.A.1229

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

DR MILDRED M THOMAS

Mailing Address 2935 N WILLAMETTE BLVD

City

PORTLAND

State

OR

Zip Code

97217

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 7

Transaction ID: INC.A.685

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

115.00

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS JUANITA L ALEXANDER

Mailing Address 2724 ALCAZAR ST NE

City

ALBUQUERQUE

State

NM

Zip Code

87110

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

ELEMENTARY TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 7

Transaction ID: INC.A.444

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR GEORGE L AMOS

Mailing Address 177 COOPER ST

City

DANVILLE

State

VA

Zip Code

24540

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.S. ARMY

Occupation

RETIRED SSG E6/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 7

Transaction ID: INC.A.1158

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MS VERNA E BLACK

Mailing Address 1109 WILSON AVE TRLR 17

City

POCATELLO

State

ID

Zip Code

83201

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 7

Transaction ID: INC.A.600

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS FUMIE BOYCE

Mailing Address 4532 INTELCO LOOP SE APT 354

City

LACEY

State

WA

Zip Code

98503

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4020.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 7

Transaction ID: INC.A.571

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

MRS JEAN B CANAIY

Mailing Address 2688 ELDORADO SPRINGS DR

City

LOVELAND

State

CO

Zip Code

80538

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 7

Transaction ID: INC.A.928

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

MRS THERESA FIORENTINO

Mailing Address 1515 HILL DR

City

LOS ANGELES

State

CA

Zip Code

90041

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 7

Transaction ID: INC.A.497

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

1060.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR ROBERT C KELLER

Mailing Address 403 E 200 N BOX 58

City

MANTI

State

UT

Zip Code

84642

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 7

Transaction ID: INC.A.257

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MRS FELIPA A KLYN

Mailing Address 668 SAN BERNARDINO AVE

City

POMONA

State

CA

Zip Code

91767

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1029.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 7

Transaction ID: INC.A.773

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR ELBERT C SMITH

Mailing Address PO BOX 856

City

RENTON

State

WA

Zip Code

98057

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

844.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 7

Transaction ID: INC.A.1002

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

275.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR ROBERT E STAIRS

Mailing Address 10443 TAM O SHANTER RD

City

PENSACOLA

State

FL

Zip Code

32514

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 7

Transaction ID: INC.A.1073

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

MS LILLIE K BELK DAVIS

Mailing Address 2340 WHITES MILL RD

City

SUMTER

State

SC

Zip Code

29153

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 7

Transaction ID: INC.A.901

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MS JANE COMBS WARNOCK

Mailing Address 309 MIDVALE TERRACE

City

SEBASTIAN

State

FL

Zip Code

32958

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 7

Transaction ID: INC.A.940

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional)

2085.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR BRICEL CONGEMI

Mailing Address 2835 CONSTANCE ST

City

NEW ORLEANS

State

LA

Zip Code

70115

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 7

Transaction ID: INC.A.973

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MRS MARY L FLORY

Mailing Address 26 MEADOW LN

City

FLEMINGTON

State

NJ

Zip Code

8822

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 7

Transaction ID: INC.A.1231

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MS CAROLYN P HAMAN

Mailing Address 8917 S PALMER RD
PO BOX 176

City

NEW CARLISLE

State

OH

Zip Code

45344

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

662.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 7

Transaction ID: INC.A.551

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

350.00

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
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(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR WILLIAM S MILLSPAUGH

Mailing Address 254 SEQUOIA CT APT 17

City

THOUSAND OAKS

State

CA

Zip Code

91360

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
MEDICAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	4	/	2	0	0	7

Transaction ID: INC.A.1224

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MS BESSIE MULLEN

Mailing Address 24130 FRIAR ST

City

WOODLAND HILLS

State

CA

Zip Code

91367

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	4	/	2	0	0	7

Transaction ID: INC.A.1233

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MRS DOROTHY NIELSON

Mailing Address 1368 DEVENTER DR

City

LA VERNE

State

CA

Zip Code

91750

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	4	/	2	0	0	7

Transaction ID: INC.A.393

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

200.00

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
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS JENIFER M SAMPSON

Mailing Address 5300 S MAIN ST APT 58

City

CEDAR FALLS

State

IA

Zip Code

50613

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

472.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 7

Transaction ID: INC.A.944

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

MS DORIS SHORT

Mailing Address 12011 RHODE ISLAND AVE

City

LOS ANGELES

State

CA

Zip Code

90025

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 7

Transaction ID: INC.A.1208

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MRS FRANCES S TAYLOR

Mailing Address 62 TAYLOR LN

City

SPRUCE PINE

State

AL

Zip Code

35585

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 7

Transaction ID: INC.A.1067

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

95.00

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

DR MILDRED M THOMAS

Mailing Address 2935 N WILLAMETTE BLVD

City

PORTLAND

State

OR

Zip Code

97217

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	0	7

Transaction ID: INC.A.686

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR DON W WADE

Mailing Address 6 LINDA VISTA

City

ORINDA

State

CA

Zip Code

94563

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	0	7

Transaction ID: INC.A.231

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MRS MACEL H WILLIAMS

Mailing Address 7342 HIGHWAY 9 W

City

CLINTON

State

AR

Zip Code

72031

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

TEACHER/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	0	7

Transaction ID: INC.A.977

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS PATRICIA B CARMODY

Mailing Address 900 UNIVERSITY ST APT 17H

City

SEATTLE

State

WA

Zip Code

98101

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 7

Transaction ID: INC.A.632

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MS MARGERY L KEIDEL

Mailing Address 27765 CALLE VALDES

City

MISSION VIEJO

State

CA

Zip Code

92692

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 7

Transaction ID: INC.A.652

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

MRS JO AN RIEDLINGER

Mailing Address PO BOX 3006

City

TROY

State

MT

Zip Code

59935

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 7

Transaction ID: INC.A.595

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

115.00

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 222 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS MARY JANE RUSH

Mailing Address 352 E 328TH ST

City

WILLOWICK

State

OH

Zip Code

44095

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 7

Transaction ID: INC.A.1141

Amount of Each Receipt this Period

110.00

B.

Full Name (Last, First, Middle Initial)

MRS MARY JANE RUSH

Mailing Address 352 E 328TH ST

City

WILLOWICK

State

OH

Zip Code

44095

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 7

Transaction ID: INC.A.1142

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

MRS JANICE E SHALLENBERG

Mailing Address 140 WINDSOR PARK DR APT E301

City

CAROL STREAM

State

IL

Zip Code

60188

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 7

Transaction ID: INC.A.719

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

155.00

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 223 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS BLANCHE BEA ALLEN

Mailing Address 34117 DUNE RD

City

NEWBERRY SPRINGS

State

CA

Zip Code

92365

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 0 7

Transaction ID: INC.A.701

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MRS KATHERINE C S DOWNES

Mailing Address 106 LAURISTON ST

City

PROVIDENCE

State

RI

Zip Code

2906

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 0 7

Transaction ID: INC.A.1201

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

MR LORAIN E HENDERSON

Mailing Address 2974 RIDGE CT

City

SANTA CLARA

State

CA

Zip Code

95051

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
ELECTRONICS SUPERVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 0 7

Transaction ID: INC.A.188

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

110.00

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 224 / 428

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS FERN B HILSTAD

Mailing Address PO BOX 193

City

CIRCLE

State

MT

Zip Code

59215

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

397.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	6		2	0	0	7

Transaction ID: INC.A.849

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

MS JOSIE P ODOM

Mailing Address 1674 GALE LN

City

KINGSPORT

State

TN

Zip Code

37660

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	6		2	0	0	7

Transaction ID: INC.A.1162

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

DR PAUL M PEPPER, PHD

Mailing Address 47 W COOKE RD

City

COLUMBUS

State

OH

Zip Code

43214

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	6		2	0	0	7

Transaction ID: INC.A.533

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

285.00

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 225 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MISS AGATHA K SALVIN

Mailing Address 1900 LAKE MICHIGAN DR NW

City

GRAND RAPIDS

State

MI

Zip Code

49504

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 0 7

Transaction ID: INC.A.321

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR EDWARD C SHERLING, JR

Mailing Address PO BOX 311450

City

ENTERPRISE

State

AL

Zip Code

36331

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 0 7

Transaction ID: INC.A.1236

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MS HELEN W SKATRUD

Mailing Address 2601 TOUCHMARK DR UNIT 241

City

APPLETON

State

WI

Zip Code

54914

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

969.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 0 7

Transaction ID: INC.A.873

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

300.00

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 226 / 428

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS OLETHA E YOUNG

Mailing Address 730 W JEFFERSON ST APT 242

City

MORTON

State

IL

Zip Code

61550

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	6		2	0	0	7

Transaction ID: INC.A.524

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

MRS BETTY J ALSON

Mailing Address 819 PARADISE LN

City

BROOKINGS

State

OR

Zip Code

97415

FEC ID number of contributing
federal political committee.

C

Name of Employer
US ARMY/FORT RICHARDSON,
AL

Occupation

RETIRED BUDGET OFFICER/HOMEMAKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1062.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	9		2	0	0	7

Transaction ID: INC.A.576

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

MS PEGGY J BARTON

Mailing Address 1135 MANFELD DR

City

COLUMBUS

State

OH

Zip Code

43227

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	9		2	0	0	7

Transaction ID: INC.A.812

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

390.00

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS LEOLA Z CLARK

Mailing Address 701 10TH ST SE RM 34-18

City

CEDAR RAPIDS

State

IA

Zip Code

52403

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 7

Transaction ID: INC.A.691

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MS BETSY H DEBEVOISE

Mailing Address 628 HANCOCK RD

City

WILLIAMSTOWN

State

MA

Zip Code

1267

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 7

Transaction ID: INC.A.857

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MS MABEL O FIELDS

Mailing Address 801 HUNTINGTON AVE

City

WARREN

State

IN

Zip Code

46792

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.75

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 7

Transaction ID: INC.A.1030

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

335.00

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
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FOR LINE NUMBER: PAGE 228 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR GEORGE K GATES

Mailing Address 3473 N COUNTY ROAD 1100 W

City

NORMAN

State

IN

Zip Code

47264

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 7

Transaction ID: INC.A.463

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MRS CONSTANCE D HUNTER

Mailing Address 4329 S ATLANTIC AVE

City

PORT ORANGE

State

FL

Zip Code

32127

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

426.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 7

Transaction ID: INC.A.179

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MRS CONSTANCE D HUNTER

Mailing Address 4329 S ATLANTIC AVE

City

PORT ORANGE

State

FL

Zip Code

32127

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

426.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 7

Transaction ID: INC.A.178

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

165.00

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 229 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
MS MARGERY L KEIDEL

Mailing Address 27765 CALLE VALDES

City State Zip Code
MISSION VIEJO CA 92692

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 7

Transaction ID: INC.A.653

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)
MS DOROTHY J MILLER

Mailing Address 13575 COFFEE RD

City State Zip Code
WILMOT SD 57279

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.75

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 7

Transaction ID: INC.A.622

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
MR HENRY O ODEGARD

Mailing Address 89518 FIR BUTTE RD

City State Zip Code
EUGENE OR 97402

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 7

Transaction ID: INC.A.330

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

170.00

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
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FOR LINE NUMBER: PAGE 230 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MISS MARIAN L PATTERSON

Mailing Address 5001 W FLORIDA AVE SPC 264

City

HEMET

State

CA

Zip Code

92545

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 7

Transaction ID: INC.A.355

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR JEFFREY D SACHS

Mailing Address 15013 HUNTINGTON GATE DR

City

POWAY

State

CA

Zip Code

92064

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 7

Transaction ID: INC.A.1237

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

MS HELEN W SKATRUD

Mailing Address 2601 TOUCHMARK DR UNIT 241

City

APPLETON

State

WI

Zip Code

54914

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

969.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 7

Transaction ID: INC.A.874

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

625.00

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 231 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS MILDRED F SOUTHERN

Mailing Address 933 KENLEIGH CIR

City

WINSTON SALEM

State

NC

Zip Code

27106

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

727.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 7

Transaction ID: INC.A.1021

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR WILLIAM C STONUM

Mailing Address 814 DOGWOOD ST
C/O LINDA EDWARDS

City

EXCELSIOR SPRINGS

State

MO

Zip Code

64024

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 7

Transaction ID: INC.A.482

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR WILLIAM J WALTON

Mailing Address 12 SUNSET VIEW ST

City

SABATTUS

State

ME

Zip Code

4280

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

SERVICE MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 7

Transaction ID: INC.A.408

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

170.00

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 232 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS MACEL H WILLIAMS

Mailing Address 7342 HIGHWAY 9 W

City

CLINTON

State

AR

Zip Code

72031

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

TEACHER/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 7

Transaction ID: INC.A.978

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MRS OLETHA E YOUNG

Mailing Address 730 W JEFFERSON ST APT 242

City

MORTON

State

IL

Zip Code

61550

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 7

Transaction ID: INC.A.525

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR ELBERT C SMITH

Mailing Address PO BOX 856

City

RENTON

State

WA

Zip Code

98057

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

844.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 7

Transaction ID: INC.A.1003

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

175.00

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 233 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS MACEL H WILLIAMS

Mailing Address 7342 HIGHWAY 9 W

City

CLINTON

State

AR

Zip Code

72031

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

TEACHER/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 7

Transaction ID: INC.A.979

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR JAMES WISNER GALLE

Mailing Address 7933 CHADWICK ST

City

PRAIRIE VILLAGE

State

KS

Zip Code

66208

FEC ID number of contributing
federal political committee.

C

Name of Employer
USAF

Occupation

RETIRED LT COL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1890.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 7

Transaction ID: INC.A.1176

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

MS LILLIE K BELK DAVIS

Mailing Address 2340 WHITES MILL RD

City

SUMTER

State

SC

Zip Code

29153

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 0 7

Transaction ID: INC.A.902

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

600.00

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 234 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS KATHERINE E BROADSTONE

Mailing Address 1834 W NEWMAN PKWY

City

PEORIA

State

IL

Zip Code

61604

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 0 7

Transaction ID: INC.A.610

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

MR CONRAD C DE LEEUW

Mailing Address 11 CHAPMAN DR

City

LITTLE FERRY

State

NJ

Zip Code

7643

FEC ID number of contributing
federal political committee.

C

Name of Employer
COACH USA

Occupation
DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 0 7

Transaction ID: INC.A.666

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MS JOYCE B HEINRICH

Mailing Address 1035 HILL ST APT 224

City

WATERTOWN

State

WI

Zip Code

53098

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 0 7

Transaction ID: INC.A.417

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

235.00

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 235 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR FRED J HELWIG, SR

Mailing Address 5655 W 220TH ST

City

CLEVELAND

State

OH

Zip Code

44126

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 0 7

Transaction ID: INC.A.808

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MISS MARIAN L PATTERSON

Mailing Address 5001 W FLORIDA AVE SPC 264

City

HEMET

State

CA

Zip Code

92545

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 0 7

Transaction ID: INC.A.356

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

MR PAUL REMICK, JR

Mailing Address 55 UPPER LANDING RD
PO BOX 729

City

WELLS

State

ME

Zip Code

4090

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 0 7

Transaction ID: INC.A.255

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

190.00

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 236 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
MS ALICE K HAYES

Mailing Address 4014 QUAIL RIDGE DR N APT A

City State Zip Code
BOYNTON BEACH FL 33436

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1481.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 0 7

Transaction ID: INC.A.838

Amount of Each Receipt this Period

120.00

B.

Full Name (Last, First, Middle Initial)
MRS GERTRUDE PETROSE

Mailing Address 2905 W 71ST ST

City State Zip Code
CHICAGO IL 60629

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.75

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 0 7

Transaction ID: INC.A.629

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)
MS DORIS SHORT

Mailing Address 12011 RHODE ISLAND AVE

City State Zip Code
LOS ANGELES CA 90025

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 0 7

Transaction ID: INC.A.1209

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

210.00

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 237 / 428

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR WILLIAM M STEWART

Mailing Address 811 MORNINGSIDE DR

City

FULLERTON

State

CA

Zip Code

92835

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	2	/	2	0	0	7

Transaction ID: INC.A.893

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MRS JUANITA L ALEXANDER

Mailing Address 2724 ALCAZAR ST NE

City

ALBUQUERQUE

State

NM

Zip Code

87110

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

ELEMENTARY TEACHER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	5	/	2	0	0	7

Transaction ID: INC.A.445

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MRS BETTY J ALSON

Mailing Address 819 PARADISE LN

City

BROOKINGS

State

OR

Zip Code

97415

FEC ID number of contributing
federal political committee.

C

Name of Employer
US ARMY/FORT RICHARDSON,
AL

Occupation

RETIRED BUDGET OFFICER/HOMEMAKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1062.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	5	/	2	0	0	7

Transaction ID: INC.A.578

Amount of Each Receipt this Period

120.00

SUBTOTAL of Receipts This Page (optional)

340.00

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
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FOR LINE NUMBER: PAGE 238 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS BETTY J ALSON

Mailing Address 819 PARADISE LN

City

BROOKINGS

State

OR

Zip Code

97415

FEC ID number of contributing
federal political committee.

C

Name of Employer

US ARMY/FORT RICHARDSON,
AL

Occupation

RETIRED BUDGET OFFICER/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1062.75

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 0 7

Transaction ID: INC.A.577

Amount of Each Receipt this Period

162.75

B.

Full Name (Last, First, Middle Initial)

MS LILLIE K BELK DAVIS

Mailing Address 2340 WHITES MILL RD

City

SUMTER

State

SC

Zip Code

29153

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 0 7

Transaction ID: INC.A.903

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MR & MRS JOHN R BOON

Mailing Address 8304 FRANCONIA RD

City

RICHMOND

State

VA

Zip Code

23227

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 0 7

Transaction ID: INC.A.647

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)

197.75

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 239 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS RUTH B BRIER

Mailing Address 605 CUMBERLAND RD E

City

MOBILE

State

AL

Zip Code

36608

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

NURSE EDUCATOR/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 0 7

Transaction ID: INC.A.920

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MRS KATHERINE C S DOWNES

Mailing Address 106 LAURISTON ST

City

PROVIDENCE

State

RI

Zip Code

2906

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 0 7

Transaction ID: INC.A.1202

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR IRWIN J ELESON

Mailing Address 816 ROCHESTER DR

City

BILLINGS

State

MT

Zip Code

59101

FEC ID number of contributing
federal political committee.

C

Name of Employer
YELLOWSTONE BOYS AND GIRLS
RANCH

Occupation

SEMI-RETIRED MAINTENANCE/PUBLIC RELATI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 0 7

Transaction ID: INC.A.491

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

300.00

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 240 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR JAMES WISNER GALLE

Mailing Address 7933 CHADWICK ST

City

PRAIRIE VILLAGE

State

KS

Zip Code

66208

FEC ID number of contributing
federal political committee.

C

Name of Employer
USAF

Occupation

RETIRED LT COL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1890.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 0 7

Transaction ID: INC.A.1177

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

MR RICHARD S GRIFFITH

Mailing Address PO BOX 91610

City

LAFAYETTE

State

LA

Zip Code

70509

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

INVESTOR/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 0 7

Transaction ID: INC.A.470

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MRS FERN B HILSTAD

Mailing Address PO BOX 193

City

CIRCLE

State

MT

Zip Code

59215

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

397.75

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 0 7

Transaction ID: INC.A.850

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

215.00

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 241 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS EILEEN KELLEY

Mailing Address 1201 N WARREN AVE

City

OKLAHOMA CITY

State

OK

Zip Code

73107

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 0 7

Transaction ID: INC.A.1183

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

MRS FELIPA A KLYN

Mailing Address 668 SAN BERNARDINO AVE

City

POMONA

State

CA

Zip Code

91767

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1029.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 0 7

Transaction ID: INC.A.774

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MR LEE O LESTER

Mailing Address 56 PADGETT DR

City

OKATIE

State

SC

Zip Code

29909

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 0 7

Transaction ID: INC.A.714

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

340.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR ELDRED METZGER

Mailing Address 12223 S STATE ROAD 13

City

CLAYPOOL

State

IN

Zip Code

46510

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 0 7

Transaction ID: INC.A.503

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

MS MARION W PARKS, JR

Mailing Address 2534 N MORRISON RD

City

MUNCIE

State

IN

Zip Code

47304

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.S. ARMY

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 0 7

Transaction ID: INC.A.638

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

DR PAUL M PEPPER, PHD

Mailing Address 47 W COOKE RD

City

COLUMBUS

State

OH

Zip Code

43214

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 0 7

Transaction ID: INC.A.534

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

110.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS MARGARET W PIERCE

Mailing Address 2725 SENECA CIR

City

WEST PALM BEACH

State

FL

Zip Code

33409

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

768.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 0 7

Transaction ID: INC.A.830

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MRS JEANETTE M RODEGHIER

Mailing Address 1440 TOWNSHIP AVE

City

WISCONSIN RAPIDS

State

WI

Zip Code

54494

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

708.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 0 7

Transaction ID: INC.A.735

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR CHARLES H ROSE, JR

Mailing Address 702 ONTARIO ST

City

SHREVEPORT

State

LA

Zip Code

71106

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 0 7

Transaction ID: INC.A.1068

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

335.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR KENNETH SALTZ

Mailing Address 441 CIRCLE DR

City

GREER

State

SC

Zip Code

29650

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.S.A.F./FAA

Occupation

RETIRED/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 0 7

Transaction ID: INC.A.1051

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

MR KENNETH SALTZ

Mailing Address 441 CIRCLE DR

City

GREER

State

SC

Zip Code

29650

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.S.A.F./FAA

Occupation

RETIRED/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 0 7

Transaction ID: INC.A.1052

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

MR LOYL R THOMAS

Mailing Address 9172 JULIE BETH ST

City

CYPRESS

State

CA

Zip Code

90630

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 0 7

Transaction ID: INC.A.448

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

125.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR ALLEN D ADAMS

Mailing Address 12524 SPRING FALLS CT

City

LOUISVILLE

State

KY

Zip Code

40229

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 7

Transaction ID: INC.A.1228

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MRS BLANCHE BEA ALLEN

Mailing Address 34117 DUNE RD

City

NEWBERRY SPRINGS

State

CA

Zip Code

92365

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 7

Transaction ID: INC.A.702

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

MRS RONNIE BERRY

Mailing Address 15225 SOBEY RD

City

SARATOGA

State

CA

Zip Code

95070

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 7

Transaction ID: INC.A.1108

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

230.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS JEAN B CANAIY

Mailing Address 2688 ELDORADO SPRINGS DR

City

LOVELAND

State

CO

Zip Code

80538

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 7

Transaction ID: INC.A.929

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MRS JOYCE A CROWTHER

Mailing Address 23500 CRISTO REY DR UNIT 208C

City

CUPERTINO

State

CA

Zip Code

95014

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 7

Transaction ID: INC.A.1114

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

MR JAMES WISNER GALLE

Mailing Address 7933 CHADWICK ST

City

PRAIRIE VILLAGE

State

KS

Zip Code

66208

FEC ID number of contributing
federal political committee.

C

Name of Employer
USAF

Occupation

RETIRED LT COL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1890.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 7

Transaction ID: INC.A.1178

Amount of Each Receipt this Period

88.00

SUBTOTAL of Receipts This Page (optional)

153.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR LYNN O ROHDE

Mailing Address 400 N A1A LOT 71

City

JUPITER

State

FL

Zip Code

33477

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 7

Transaction ID: INC.A.563

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

MS MILDRED F SOUTHERN

Mailing Address 933 KENLEIGH CIR

City

WINSTON SALEM

State

NC

Zip Code

27106

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

727.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 7

Transaction ID: INC.A.1022

Amount of Each Receipt this Period

44.00

C.

Full Name (Last, First, Middle Initial)

MR WILLIAM C STONUM

Mailing Address 814 DOGWOOD ST
C/O LINDA EDWARDS

City

EXCELSIOR SPRINGS

State

MO

Zip Code

64024

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 7

Transaction ID: INC.A.483

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

124.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR JOHN M SWORD

Mailing Address 1914 B AVE NE

City

CEDAR RAPIDS

State

IA

Zip Code

52402

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.75

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 7 / 2 0 0 7

Transaction ID: INC.A.1093

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR FRANK M TAYLOR

Mailing Address PO BOX 1367

City

LYNNWOOD

State

WA

Zip Code

98046

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 7 / 2 0 0 7

Transaction ID: INC.A.1195

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MRS OLETHA E YOUNG

Mailing Address 730 W JEFFERSON ST APT 242

City

MORTON

State

IL

Zip Code

61550

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 7 / 2 0 0 7

Transaction ID: INC.A.526

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

125.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR JOHN J BROGAN

Mailing Address 400 N FLAGLER DR APT 1906

City

WEST PALM BEACH

State

FL

Zip Code

33401

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 0 7

Transaction ID: INC.A.992

Amount of Each Receipt this Period

120.00

B.

Full Name (Last, First, Middle Initial)

MS MARJORIE DAVIS

Mailing Address 6 HUCKLEBERRY LN

City

AUGUSTA

State

ME

Zip Code

4330

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 0 7

Transaction ID: INC.A.1187

Amount of Each Receipt this Period

220.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN H GEIMAN

Mailing Address 541 W WALNUT ST

City

HANOVER

State

PA

Zip Code

17331

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 0 7

Transaction ID: INC.A.211

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

390.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR RICHARD E MEEKER

Mailing Address 605 NE 70TH ST

City

GLADSTONE

State

MO

Zip Code

64118

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 8 / 2 0 0 7

Transaction ID: INC.A.510

Amount of Each Receipt this Period

220.00

B.

Full Name (Last, First, Middle Initial)

MS HELEN W SKATRUD

Mailing Address 2601 TOUCHMARK DR UNIT 241

City

APPLETON

State

WI

Zip Code

54914

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

969.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 8 / 2 0 0 7

Transaction ID: INC.A.875

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MRS THERESA FIORENTINO

Mailing Address 1515 HILL DR

City

LOS ANGELES

State

CA

Zip Code

90041

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: INC.A.498

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

295.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR JOHN H GEIMAN

Mailing Address 541 W WALNUT ST

City

HANOVER

State

PA

Zip Code

17331

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: INC.A.212

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MRS EDNA P HARRISON

Mailing Address 12153 GLENCOE ST

City

THORNTON

State

CO

Zip Code

80241

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: INC.A.268

Amount of Each Receipt this Period

44.00

C.

Full Name (Last, First, Middle Initial)

MRS MARJORIE J KING

Mailing Address 50 VIEW POINT DR

City

GREENVILLE

State

SC

Zip Code

29609

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

439.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: INC.A.293

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

84.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS ELVA B LENDT

Mailing Address 3967 GRAPEFRUIT CIR

City

LAS VEGAS

State

NV

Zip Code

89103

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

578.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: INC.A.1150

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MRS KATRINA A MATLOCK

Mailing Address 3665 S RIVER CHURCH RD

City

WOODLEAF

State

NC

Zip Code

27054

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: INC.A.794

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MISS MARIAN L PATTERSON

Mailing Address 5001 W FLORIDA AVE SPC 264

City

HEMET

State

CA

Zip Code

92545

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: INC.A.357

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

220.00

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 253 / 428

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR ROBERT G ROHWER

Mailing Address 1700 HIDDEN OAKS DR

City

STILLWATER

State

OK

Zip Code

74074

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	9	/	2	0	0	7

Transaction ID: INC.A.991

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR WILLIAM C STONUM

Mailing Address 814 DOGWOOD ST
C/O LINDA EDWARDS

City

EXCELSIOR SPRINGS

State

MO

Zip Code

64024

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	9	/	2	0	0	7

Transaction ID: INC.A.484

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MRS TRUDY S WEBB

Mailing Address PO BOX 1147

City

KASILOF

State

AK

Zip Code

99610

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	9	/	2	0	0	7

Transaction ID: INC.A.247

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

250.00

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
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS RUTH B BRIER

Mailing Address 605 CUMBERLAND RD E

City

MOBILE

State

AL

Zip Code

36608

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

NURSE EDUCATOR/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 2 / 2 0 0 7

Transaction ID: INC.A.921

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

MRS JO AN RIEDLINGER

Mailing Address PO BOX 3006

City

TROY

State

MT

Zip Code

59935

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 2 / 2 0 0 7

Transaction ID: INC.A.597

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MRS JO AN RIEDLINGER

Mailing Address PO BOX 3006

City

TROY

State

MT

Zip Code

59935

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 2 / 2 0 0 7

Transaction ID: INC.A.596

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR GEORGE L AMOS

Mailing Address 177 COOPER ST

City

DANVILLE

State

VA

Zip Code

24540

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.S. ARMY

Occupation

RETIRED SSG E6/HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 7

Transaction ID: INC.A.1159

Amount of Each Receipt this Period

44.00

B.

Full Name (Last, First, Middle Initial)

MS CAROLYN P HAMAN

Mailing Address 8917 S PALMER RD
PO BOX 176

City

NEW CARLISLE

State

OH

Zip Code

45344

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

662.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 7

Transaction ID: INC.A.552

Amount of Each Receipt this Period

80.00

C.

Full Name (Last, First, Middle Initial)

MS ALICE K HAYES

Mailing Address 4014 QUAIL RIDGE DR N APT A

City

BOYNTON BEACH

State

FL

Zip Code

33436

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1481.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 7

Transaction ID: INC.A.839

Amount of Each Receipt this Period

44.00

SUBTOTAL of Receipts This Page (optional)

168.00

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
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FOR LINE NUMBER: PAGE 256 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MISS BILLIE F HINES

Mailing Address 2811 FULTON ST

City

SHREVEPORT

State

LA

Zip Code

71109

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 3 / 2 0 0 7

Transaction ID: INC.A.363

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR ELBERT C SMITH

Mailing Address PO BOX 856

City

RENTON

State

WA

Zip Code

98057

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

844.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 3 / 2 0 0 7

Transaction ID: INC.A.1004

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

MRS MACEL H WILLIAMS

Mailing Address 7342 HIGHWAY 9 W

City

CLINTON

State

AR

Zip Code

72031

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

TEACHER/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 3 / 2 0 0 7

Transaction ID: INC.A.980

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

400.00

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
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FOR LINE NUMBER: PAGE 257 / 428
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR WILSON E ANDREWS

Mailing Address 6727 40TH ST NE

City

MARYSVILLE

State

WA

Zip Code

98270

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 7

Transaction ID: INC.A.424

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MS VERNIE J DAVIDSON

Mailing Address 12552 CHARDIN PL APT 2

City

SAINT LOUIS

State

MO

Zip Code

63128

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
X-RAY TECHNOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 7

Transaction ID: INC.A.819

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MRS WILMA N DEMOSS

Mailing Address 104 SAINT JO TER

City

NOCONA

State

TX

Zip Code

76255

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 7

Transaction ID: INC.A.284

Amount of Each Receipt this Period

44.00

SUBTOTAL of Receipts This Page (optional)

114.00

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 258 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS MAXINE DUFF

Mailing Address 415 TUSCULUM RD APT K20
MCMURRAY MONOR APTS

City State Zip Code
NASHVILLE TN 37211

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 7

Transaction ID: INC.A.1219

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR JAMES WISNER GALLE

Mailing Address 7933 CHADWICK ST

City State Zip Code
PRAIRIE VILLAGE KS 66208

FEC ID number of contributing
federal political committee.

C

Name of Employer
USAF

Occupation
RETIRED LT COL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1890.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 7

Transaction ID: INC.A.1179

Amount of Each Receipt this Period

88.00

C.

Full Name (Last, First, Middle Initial)

MS MARIE E HINCKLEY

Mailing Address 1054 WOODBRIDGE ST

City State Zip Code
SAINT CLAIR SHORES MI 48080

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.75

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 7

Transaction ID: INC.A.797

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

238.00

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
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS GERTIE MORRIS

Mailing Address 307 SHADOW LN

City

EULESS

State

TX

Zip Code

76039

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 7

Transaction ID: INC.A.411

Amount of Each Receipt this Period

440.00

B.

Full Name (Last, First, Middle Initial)

FATHER JAMES P RYAN

Mailing Address 2828 SLOAT RD

City

PEBBLE BEACH

State

CA

Zip Code

93953

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

RETIRED CATHOLIC PRIEST/HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 7

Transaction ID: INC.A.228

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MS MILDRED F SOUTHERN

Mailing Address 933 KENLEIGH CIR

City

WINSTON SALEM

State

NC

Zip Code

27106

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

727.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 7

Transaction ID: INC.A.1023

Amount of Each Receipt this Period

44.00

SUBTOTAL of Receipts This Page (optional)

504.00

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
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR WILSON E VANDERBURG

Mailing Address 2133 NW BEECHWOOD PL

City

CORVALLIS

State

OR

Zip Code

97330

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 7

Transaction ID: INC.A.508

Amount of Each Receipt this Period

88.00

B.

Full Name (Last, First, Middle Initial)

MR HENRY L WELLS

Mailing Address 6018 MADRA AVE

City

SAN DIEGO

State

CA

Zip Code

92120

FEC ID number of contributing
federal political committee.

C

Name of Employer
SAN DIEGO TRUCK CENTER

Occupation
RETIRED MECHANIC/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

858.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 7

Transaction ID: INC.A.375

Amount of Each Receipt this Period

44.00

C.

Full Name (Last, First, Middle Initial)

MRS HELEN M WILKS

Mailing Address 459 NW RAYMOND LN

City

PORT SAINT LUCIE

State

FL

Zip Code

34983

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.75

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 7

Transaction ID: INC.A.428

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

167.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS OLETHA E YOUNG

Mailing Address 730 W JEFFERSON ST APT 242

City

MORTON

State

IL

Zip Code

61550

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 7

Transaction ID: INC.A.527

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MS PATRICIA B CARMODY

Mailing Address 900 UNIVERSITY ST APT 17H

City

SEATTLE

State

WA

Zip Code

98101

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 5 / 2 0 0 7

Transaction ID: INC.A.633

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR FRED J HELWIG, SR

Mailing Address 5655 W 220TH ST

City

CLEVELAND

State

OH

Zip Code

44126

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 5 / 2 0 0 7

Transaction ID: INC.A.809

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

225.00

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
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FOR LINE NUMBER: PAGE 262 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR HARRY E KNOX, JR

Mailing Address 101 N WOODGREEN WAY

City

GREENVILLE

State

SC

Zip Code

29615

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 5 / 2 0 0 7

Transaction ID: INC.A.306

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MRS LESLEY LINSTEADER

Mailing Address 23871 WILLOWS DR APT 135

City

LAGUNA HILLS

State

CA

Zip Code

92653

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED/HOMEMAKER

Occupation
RETIRED BUSINESS FINANCIAL MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

822.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 5 / 2 0 0 7

Transaction ID: INC.A.888

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MRS JUANITA L ALEXANDER

Mailing Address 2724 ALCAZAR ST NE

City

ALBUQUERQUE

State

NM

Zip Code

87110

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
ELEMENTARY TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 0 7

Transaction ID: INC.A.446

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

120.00

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 263 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR DAVID H BURROWS

Mailing Address 2301 STANLEY AVE SE
PO BOX 24233

City State Zip Code
ROANOKE VA 24014

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 0 7

Transaction ID: INC.A.276

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MRS JEAN B CANAIY

Mailing Address 2688 ELDORADO SPRINGS DR

City State Zip Code
LOVELAND CO 80538

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 0 7

Transaction ID: INC.A.930

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR WALTER R CHANDLER

Mailing Address 608 SNUGGS ST

City State Zip Code
ALBEMARLE NC 28001

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 0 7

Transaction ID: INC.A.965

Amount of Each Receipt this Period

44.00

SUBTOTAL of Receipts This Page (optional)

119.00

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 264 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS JOYCE A CROWTHER

Mailing Address 23500 CRISTO REY DR UNIT 208C

City

CUPERTINO

State

CA

Zip Code

95014

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 0 7

Transaction ID: INC.A.1115

Amount of Each Receipt this Period

44.00

B.

Full Name (Last, First, Middle Initial)

MRS KATHERINE C S DOWNES

Mailing Address 106 LAURISTON ST

City

PROVIDENCE

State

RI

Zip Code

2906

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 0 7

Transaction ID: INC.A.1203

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MRS HERMIONE W LEWIS

Mailing Address 17502 102ND AVE NE APT 112

City

BOTHELL

State

WA

Zip Code

98011

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 0 7

Transaction ID: INC.A.244

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

179.00

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 265 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS VERNAL LEE STEWART

Mailing Address 16795 COUNTRY KNOLL DR

City

NORTHVILLE

State

MI

Zip Code

48168

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 0 7

Transaction ID: INC.A.696

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR ROBERT SUNDERLAND

Mailing Address 953 PYRITE AVE

City

HENDERSON

State

NV

Zip Code

89011

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1122.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 0 7

Transaction ID: INC.A.674

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MRS AGNES M ANNEN

Mailing Address 705 TAYLOR ST

City

MOUNT ANGEL

State

OR

Zip Code

97362

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

414.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 7

Transaction ID: INC.A.543

Amount of Each Receipt this Period

88.00

SUBTOTAL of Receipts This Page (optional)

163.00

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 266 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS EDDITH G DOWELL

Mailing Address 3513 GILLESPIE AVE

City

NASHVILLE

State

TN

Zip Code

37205

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

860.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 7

Transaction ID: INC.A.1190

Amount of Each Receipt this Period

240.00

B.

Full Name (Last, First, Middle Initial)

FATHER JAMES P RYAN

Mailing Address 2828 SLOAT RD

City

PEBBLE BEACH

State

CA

Zip Code

93953

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

RETIRED CATHOLIC PRIEST/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 7

Transaction ID: INC.A.229

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MISS AGATHA K SALVIN

Mailing Address 1900 LAKE MICHIGAN DR NW

City

GRAND RAPIDS

State

MI

Zip Code

49504

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 7

Transaction ID: INC.A.322

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

310.00

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 267 / 428

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS MILDRED F SOUTHERN

Mailing Address 933 KENLEIGH CIR

City

WINSTON SALEM

State

NC

Zip Code

27106

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

727.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	9	/	2	0	0	7

Transaction ID: INC.A.1024

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR ROBERT SUNDERLAND

Mailing Address 953 PYRITE AVE

City

HENDERSON

State

NV

Zip Code

89011

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1122.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	9	/	2	0	0	7

Transaction ID: INC.A.675

Amount of Each Receipt this Period

36.00

C.

Full Name (Last, First, Middle Initial)

MRS EDDITH G DOWELL

Mailing Address 3513 GILLESPIE AVE

City

NASHVILLE

State

TN

Zip Code

37205

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

860.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	0	/	2	0	0	7

Transaction ID: INC.A.1191

Amount of Each Receipt this Period

220.00

SUBTOTAL of Receipts This Page (optional)

356.00

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
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FOR LINE NUMBER: PAGE 268 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS MAXINE DUFF

Mailing Address 415 TUSCULUM RD APT K20
MCMURRAY MONOR APTS

City State Zip Code
NASHVILLE TN 37211

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 0 / 2 0 0 7

Transaction ID: INC.A.1220

Amount of Each Receipt this Period

88.00

B.

Full Name (Last, First, Middle Initial)

MRS JANET W HADDEN

Mailing Address 5406 MAGNOLIA ST

City State Zip Code
PEARLAND TX 77584

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 0 / 2 0 0 7

Transaction ID: INC.A.738

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

MISS MARIAN L PATTERSON

Mailing Address 5001 W FLORIDA AVE SPC 264

City State Zip Code
HEMET CA 92545

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 0 / 2 0 0 7

Transaction ID: INC.A.358

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

288.00

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS BARBARA J PORBE

Mailing Address 2649 N DUNFIELD ST

City

ORANGE

State

CA

Zip Code

92865

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

RETIRED PRIVATE VIOLIN TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	0	/	2	0	0	7

Transaction ID: INC.A.1129

Amount of Each Receipt this Period

44.00

B.

Full Name (Last, First, Middle Initial)

MRS DOROTHY L SAPLATA

Mailing Address 5304 HARRY S TRUMAN DR APT 304

City

GRANDVIEW

State

MO

Zip Code

64030

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	0	/	2	0	0	7

Transaction ID: INC.A.350

Amount of Each Receipt this Period

44.00

C.

Full Name (Last, First, Middle Initial)

MR JAMES WISNER GALLE

Mailing Address 7933 CHADWICK ST

City

PRAIRIE VILLAGE

State

KS

Zip Code

66208

FEC ID number of contributing
federal political committee.

C

Name of Employer
USAF

Occupation

RETIRED LT COL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1890.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	1	/	2	0	0	7

Transaction ID: INC.A.1180

Amount of Each Receipt this Period

80.00

SUBTOTAL of Receipts This Page (optional)

168.00

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR LEE O LESTER

Mailing Address 56 PADGETT DR

City

OKATIE

State

SC

Zip Code

29909

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 1 / 2 0 0 7

Transaction ID: INC.A.715

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MS VIOLET V CHEAL

Mailing Address 354 KENDAL DR

City

KENNETT SQUARE

State

PA

Zip Code

19348

FEC ID number of contributing
federal political committee.

C

Name of Employer
STATE OF DELEWARE

Occupation
RETIRED TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 3 / 2 0 0 7

Transaction ID: INC.A.617

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR IRWIN J ELESON

Mailing Address 816 ROCHESTER DR

City

BILLINGS

State

MT

Zip Code

59101

FEC ID number of contributing
federal political committee.

C

Name of Employer
YELLOWSTONE BOYS AND GIRLS
RANCH

Occupation
SEMI-RETIRED MAINTENANCE/PUBLIC RELATI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 3 / 2 0 0 7

Transaction ID: INC.A.492

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

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

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for each category of the
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FOR LINE NUMBER: PAGE 271 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS MAYME L KAUFFELD

Mailing Address 1512 BROOKHOLLOW DR

City

BATON ROUGE

State

LA

Zip Code

70810

FEC ID number of contributing
federal political committee.

C

Name of Employer
USDA

Occupation

RETIRED RESEARCH ENTOMOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 3 / 2 0 0 7

Transaction ID: INC.A.435

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MRS BETTE J POLIQUIN

Mailing Address 49220 SUNROSE LN

City

PALM DESERT

State

CA

Zip Code

92260

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 3 / 2 0 0 7

Transaction ID: INC.A.557

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR KENNETH SALTZ

Mailing Address 441 CIRCLE DR

City

GREER

State

SC

Zip Code

29650

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.S.A.F./FAA

Occupation

RETIRED/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 3 / 2 0 0 7

Transaction ID: INC.A.1053

Amount of Each Receipt this Period

44.00

SUBTOTAL of Receipts This Page (optional)

194.00

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 272 / 428

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS JANICE E SHALLENBERG

Mailing Address 140 WINDSOR PARK DR APT E301

City

CAROL STREAM

State

IL

Zip Code

60188

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	3	/	2	0	0	7

Transaction ID: INC.A.720

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MRS JEANETTE F YANDOW

Mailing Address 1133 LONG POND RD

City

ROCHESTER

State

NY

Zip Code

14626

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	3	/	2	0	0	7

Transaction ID: INC.A.896

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN RODGERS CAMP, JR

Mailing Address 2532 SW 50TH BLVD

City

GAINESVILLE

State

FL

Zip Code

32608

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
RETIRED ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	6	/	2	0	0	7

Transaction ID: INC.A.388

Amount of Each Receipt this Period

37.00

SUBTOTAL of Receipts This Page (optional)

112.00

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 273 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR RICHARD S GRIFFITH

Mailing Address PO BOX 91610

City

LAFAYETTE

State

LA

Zip Code

70509

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

INVESTOR/HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 6 / 2 0 0 7

Transaction ID: INC.A.471

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MRS ANGELA HAVERLY

Mailing Address 24 MOSSWOOD TRL

City

DENVILLE

State

NJ

Zip Code

7834

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

363.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 6 / 2 0 0 7

Transaction ID: INC.A.196

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

MRS MARJORIE J KING

Mailing Address 50 VIEW POINT DR

City

GREENVILLE

State

SC

Zip Code

29609

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

439.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 6 / 2 0 0 7

Transaction ID: INC.A.294

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

295.00

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 274 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR ELDRED METZGER

Mailing Address 12223 S STATE ROAD 13

City

CLAYPOOL

State

IN

Zip Code

46510

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 6 / 2 0 0 7

Transaction ID: INC.A.504

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MISS JO ANN MUIR

Mailing Address 298 MUIR RANCH RD

City

ALEDO

State

TX

Zip Code

76008

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

RETIRED RANCHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 6 / 2 0 0 7

Transaction ID: INC.A.1165

Amount of Each Receipt this Period

220.00

C.

Full Name (Last, First, Middle Initial)

MR RODNEY ROWLAND

Mailing Address 505 N MAIN ST

City

SMITH CENTER

State

KS

Zip Code

66967

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 6 / 2 0 0 7

Transaction ID: INC.A.1125

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

320.00

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 275 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS OLETHA E YOUNG

Mailing Address 730 W JEFFERSON ST APT 242

City

MORTON

State

IL

Zip Code

61550

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 6 / 2 0 0 7

Transaction ID: INC.A.528

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MRS KATHERINE C S DOWNES

Mailing Address 106 LAURISTON ST

City

PROVIDENCE

State

RI

Zip Code

2906

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 7

Transaction ID: INC.A.1204

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR GEORGE L AMOS

Mailing Address 177 COOPER ST

City

DANVILLE

State

VA

Zip Code

24540

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.S. ARMY

Occupation

RETIRED SSG E6/HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 8 / 2 0 0 7

Transaction ID: INC.A.1160

Amount of Each Receipt this Period

44.00

SUBTOTAL of Receipts This Page (optional)

144.00

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 276 / 428

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR ARTHUR E BURGNER

Mailing Address 808 HIGHLAND DR SE

City

TUMWATER

State

WA

Zip Code

98501

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	8	/	2	0	0	7

Transaction ID: INC.A.924

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MS BETSY H DEBEVOISE

Mailing Address 628 HANCOCK RD

City

WILLIAMSTOWN

State

MA

Zip Code

1267

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	8	/	2	0	0	7

Transaction ID: INC.A.858

Amount of Each Receipt this Period

44.00

C.

Full Name (Last, First, Middle Initial)

MRS ORA M DOSS

Mailing Address 285 BILL BENNETT RD

City

JOHNSON CITY

State

TN

Zip Code

37604

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	8	/	2	0	0	7

Transaction ID: INC.A.586

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

184.00

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 277 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR ELBERT C SMITH

Mailing Address PO BOX 856

City

RENTON

State

WA

Zip Code

98057

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

844.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 8 / 2 0 0 7

Transaction ID: INC.A.1005

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR & MRS JOHN R BOON

Mailing Address 8304 FRANCONIA RD

City

RICHMOND

State

VA

Zip Code

23227

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 9 / 2 0 0 7

Transaction ID: INC.A.648

Amount of Each Receipt this Period

15.00

C.

Full Name (Last, First, Middle Initial)

MRS HELEN A MAHURIN

Mailing Address 501 W 107TH ST APT 211

City

KANSAS CITY

State

MO

Zip Code

64114

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.75

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 9 / 2 0 0 7

Transaction ID: INC.A.987

Amount of Each Receipt this Period

44.00

SUBTOTAL of Receipts This Page (optional)

159.00

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 278 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS ELLEN M NOFTZ

Mailing Address 1238 BALMORAL AVE

City

WESTCHESTER

State

IL

Zip Code

60154

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 9 / 2 0 0 7

Transaction ID: INC.A.1040

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MRS GLENNA K ROBERTS

Mailing Address 4100 E FLETCHER AVE APT 805

City

TAMPA

State

FL

Zip Code

33613

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 9 / 2 0 0 7

Transaction ID: INC.A.749

Amount of Each Receipt this Period

5.00

C.

Full Name (Last, First, Middle Initial)

MRS HELEN M WILKS

Mailing Address 459 NW RAYMOND LN

City

PORT SAINT LUCIE

State

FL

Zip Code

34983

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.75

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 7

Transaction ID: INC.A.429

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

105.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS RUTH W BURKE

Mailing Address 2541 STRATFORD RD

City

RICHMOND

State

VA

Zip Code

23225

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 3 / 2 0 0 7

Transaction ID: INC.A.392

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MRS JEAN B CANAIY

Mailing Address 2688 ELDORADO SPRINGS DR

City

LOVELAND

State

CO

Zip Code

80538

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 3 / 2 0 0 7

Transaction ID: INC.A.931

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MRS WILMA N DEMOSS

Mailing Address 104 SAINT JO TER

City

NOCONA

State

TX

Zip Code

76255

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 3 / 2 0 0 7

Transaction ID: INC.A.285

Amount of Each Receipt this Period

44.00

SUBTOTAL of Receipts This Page (optional)

164.00

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
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FOR LINE NUMBER: PAGE 280 / 428

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS PHYLLIS M GORMAN

Mailing Address 4700 TOWN RIDGE DR

City

GREENSBORO

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	3	/	2	0	0	7

Transaction ID: INC.A.302

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

MRS FELIPA A KLYN

Mailing Address 668 SAN BERNARDINO AVE

City

POMONA

State

CA

Zip Code

91767

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1029.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	3	/	2	0	0	7

Transaction ID: INC.A.775

Amount of Each Receipt this Period

44.00

C.

Full Name (Last, First, Middle Initial)

MRS ADRIANNA LEYENDEKKER

Mailing Address 9001 AVENUE 360

City

VISALIA

State

CA

Zip Code

93291

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	3	/	2	0	0	7

Transaction ID: INC.A.273

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

129.00

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
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR ELDRED METZGER

Mailing Address 12223 S STATE ROAD 13

City

CLAYPOOL

State

IN

Zip Code

46510

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 7

Transaction ID: INC.A.505

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

MS MARION W PARKS, JR

Mailing Address 2534 N MORRISON RD

City

MUNCIE

State

IN

Zip Code

47304

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.S. ARMY

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 7

Transaction ID: INC.A.639

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MRS JENIFER M SAMPSON

Mailing Address 5300 S MAIN ST APT 58

City

CEDAR FALLS

State

IA

Zip Code

50613

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

472.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 7

Transaction ID: INC.A.946

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

240.00

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 282 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS JENIFER M SAMPSON

Mailing Address 5300 S MAIN ST APT 58

City

CEDAR FALLS

State

IA

Zip Code

50613

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

472.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 3 / 2 0 0 7

Transaction ID: INC.A.945

Amount of Each Receipt this Period

88.00

B.

Full Name (Last, First, Middle Initial)

MS DORIS SHORT

Mailing Address 12011 RHODE ISLAND AVE

City

LOS ANGELES

State

CA

Zip Code

90025

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 3 / 2 0 0 7

Transaction ID: INC.A.1210

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MS HELEN W SKATRUD

Mailing Address 2601 TOUCHMARK DR UNIT 241

City

APPLETON

State

WI

Zip Code

54914

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

969.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 3 / 2 0 0 7

Transaction ID: INC.A.876

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

318.00

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 283 / 428

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR WILLIAM C STONUM

Mailing Address 814 DOGWOOD ST
C/O LINDA EDWARDSCity State Zip Code
EXCELSIOR SPRINGS MO 64024FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	3	/	2	0	0	7

Transaction ID: INC.A.485

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

MRS JEAN B CANAIY

Mailing Address 2688 ELDORADO SPRINGS DR

City State Zip Code
LOVELAND CO 80538FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIREDOccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	4	/	2	0	0	7

Transaction ID: INC.A.932

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR KENNETH SALTZ

Mailing Address 441 CIRCLE DR

City State Zip Code
GREER SC 29650FEC ID number of contributing
federal political committee.**C**Name of Employer
U.S.A.F./FAAOccupation
RETIRED/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	4	/	2	0	0	7

Transaction ID: INC.A.1054

Amount of Each Receipt this Period

44.00

SUBTOTAL of Receipts This Page (optional)

109.00

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 284 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR HENRY L WELLS

Mailing Address 6018 MADRA AVE

City

SAN DIEGO

State

CA

Zip Code

92120

FEC ID number of contributing
federal political committee.

C

Name of Employer
SAN DIEGO TRUCK CENTER

Occupation

RETIRED MECHANIC/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

858.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 4 / 2 0 0 7

Transaction ID: INC.A.376

Amount of Each Receipt this Period

44.00

B.

Full Name (Last, First, Middle Initial)

MR FRED J HELWIG, SR

Mailing Address 5655 W 220TH ST

City

CLEVELAND

State

OH

Zip Code

44126

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 7

Transaction ID: INC.A.810

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MRS ELVA B LENDT

Mailing Address 3967 GRAPEFRUIT CIR

City

LAS VEGAS

State

NV

Zip Code

89103

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

578.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 7

Transaction ID: INC.A.1151

Amount of Each Receipt this Period

80.00

SUBTOTAL of Receipts This Page (optional)

174.00

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 285 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

FATHER JAMES P RYAN

Mailing Address 2828 SLOAT RD

City

PEBBLE BEACH

State

CA

Zip Code

93953

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

RETIRED CATHOLIC PRIEST/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 7

Transaction ID: INC.A.230

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MRS OLETHA E YOUNG

Mailing Address 730 W JEFFERSON ST APT 242

City

MORTON

State

IL

Zip Code

61550

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 7

Transaction ID: INC.A.529

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

MS WILHELMINE E LONG

Mailing Address 1817 W NORWOOD ST

City

CHICAGO

State

IL

Zip Code

60660

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 7 / 2 0 0 7

Transaction ID: INC.A.752

Amount of Each Receipt this Period

44.00

SUBTOTAL of Receipts This Page (optional)

129.00

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 286 / 428
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS ALICE E SUMIDA

Mailing Address 2309 SW 1ST AVE APT 1545

City

PORTLAND

State

OR

Zip Code

97201

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 7 / 2 0 0 7

Transaction ID: INC.A.1207

Amount of Each Receipt this Period

220.00

B.

Full Name (Last, First, Middle Initial)

MS DONNA P WOOLLEY

Mailing Address PO BOX 43

City

DRAIN

State

OR

Zip Code

97435

FEC ID number of contributing
federal political committee.

C

Name of Employer
EAGLE'S VIEW MANAGEMENT
CO.

Occupation

EXECUTIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 7 / 2 0 0 7

Transaction ID: INC.A.235

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR CALVIN R ARNOLD

Mailing Address 1010 REED AVE

City

CHEYENNE

State

WY

Zip Code

82007

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: INC.A.997

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

290.00

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 287 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS VIRGINIA H BARNES

Mailing Address 101 COUNTRY COVE DR

City

CLINTON

State

MS

Zip Code

39056

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

788.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: INC.A.1084

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

MRS VIRGINIA H BARNES

Mailing Address 101 COUNTRY COVE DR

City

CLINTON

State

MS

Zip Code

39056

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

788.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: INC.A.1083

Amount of Each Receipt this Period

44.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN RODGERS CAMP, JR

Mailing Address 2532 SW 50TH BLVD

City

GAINESVILLE

State

FL

Zip Code

32608

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

RETIRED ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: INC.A.389

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

444.00

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 288 / 428

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS WILMA N DEMOSS

Mailing Address 104 SAINT JO TER

City

NOCONA

State

TX

Zip Code

76255

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	0	/	2	0	0	7

Transaction ID: INC.A.286

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR IRWIN J ELESON

Mailing Address 816 ROCHESTER DR

City

BILLINGS

State

MT

Zip Code

59101

FEC ID number of contributing
federal political committee.

C

Name of Employer
YELLOWSTONE BOYS AND GIRLS
RANCHOccupation
SEMI-RETIRED MAINTENANCE/PUBLIC RELATI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	0	/	2	0	0	7

Transaction ID: INC.A.493

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

MS PHYLLIS M GORMAN

Mailing Address 4700 TOWN RIDGE DR

City

GREENSBORO

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	0	/	2	0	0	7

Transaction ID: INC.A.303

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

160.00

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
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR RICHARD S GRIFFITH

Mailing Address PO BOX 91610

City

LAFAYETTE

State

LA

Zip Code

70509

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

INVESTOR/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: INC.A.472

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MRS JANET W HADDEN

Mailing Address 5406 MAGNOLIA ST

City

PEARLAND

State

TX

Zip Code

77584

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: INC.A.739

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MS MARGERY L KEIDEL

Mailing Address 27765 CALLE VALDES

City

MISSION VIEJO

State

CA

Zip Code

92692

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: INC.A.654

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

320.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS EILEEN KELLEY

Mailing Address 1201 N WARREN AVE

City

OKLAHOMA CITY

State

OK

Zip Code

73107

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: INC.A.1184

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MRS MARJORIE J KING

Mailing Address 50 VIEW POINT DR

City

GREENVILLE

State

SC

Zip Code

29609

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

439.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: INC.A.296

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

MRS MARJORIE J KING

Mailing Address 50 VIEW POINT DR

City

GREENVILLE

State

SC

Zip Code

29609

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

439.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: INC.A.295

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

145.00

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
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FOR LINE NUMBER: PAGE 291 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS LESLEY LINSTEADER

Mailing Address 23871 WILLOWS DR APT 135

City

LAGUNA HILLS

State

CA

Zip Code

92653

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED/HOMEMAKER

Occupation

RETIRED BUSINESS FINANCIAL MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

822.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: INC.A.889

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

MS JEAN B MASTERS

Mailing Address 1150 OAK KNOLL DR

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: INC.A.512

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

MR DAVID K ROBINSON

Mailing Address 842 E VILLA ST APT 219

City

PASADENA

State

CA

Zip Code

91101

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

RETIRED ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: INC.A.952

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

335.00

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 292 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR CHARLES H ROSE, JR

Mailing Address 702 ONTARIO ST

City

SHREVEPORT

State

LA

Zip Code

71106

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: INC.A.1069

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MRS BARBARA J SNODGRASS

Mailing Address PO BOX 31

City

ATWOOD

State

KS

Zip Code

67730

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: INC.A.1035

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

MR FRANK M TAYLOR

Mailing Address PO BOX 1367

City

LYNNWOOD

State

WA

Zip Code

98046

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: INC.A.1196

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

185.00

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 293 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR LOYL R THOMAS

Mailing Address 9172 JULIE BETH ST

City

CYPRESS

State

CA

Zip Code

90630

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: INC.A.449

Amount of Each Receipt this Period

220.00

B.

Full Name (Last, First, Middle Initial)

MR WILLIAM J WALTON

Mailing Address 12 SUNSET VIEW ST

City

SABATTUS

State

ME

Zip Code

4280

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
SERVICE MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: INC.A.409

Amount of Each Receipt this Period

44.00

C.

Full Name (Last, First, Middle Initial)

MR ROGERS A WELLS

Mailing Address 6884 WINDLASS LN

City

GIG HARBOR

State

WA

Zip Code

98335

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: INC.A.1222

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

464.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS MACEL H WILLIAMS

Mailing Address 7342 HIGHWAY 9 W

City

CLINTON

State

AR

Zip Code

72031

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

TEACHER/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: INC.A.981

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR MYRON C YOCKY

Mailing Address 5102 DOWNEY AVE

City

LAKEWOOD

State

CA

Zip Code

90712

FEC ID number of contributing
federal political committee.

C

Name of Employer
DOUGLAS AIRCRAFT CO.

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: INC.A.461

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MR AUBREY J BOURGEOIS

Mailing Address 10100 HILLVIEW DR APT 608

City

PENSACOLA

State

FL

Zip Code

32514

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 1 / 2 0 0 7

Transaction ID: INC.A.1138

Amount of Each Receipt this Period

88.00

SUBTOTAL of Receipts This Page (optional)

308.00

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 295 / 428

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR JOHN J BROGAN

Mailing Address 400 N FLAGLER DR APT 1906

City

WEST PALM BEACH

State

FL

Zip Code

33401

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 1 / 2 0 0 7

Transaction ID: INC.A.993

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MS KATHLYN C DUNAGAN

Mailing Address 1107 S DWIGHT ST

City

MONAHANS

State

TX

Zip Code

79756

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 1 / 2 0 0 7

Transaction ID: INC.A.567

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR IRWIN J ELESON

Mailing Address 816 ROCHESTER DR

City

BILLINGS

State

MT

Zip Code

59101

FEC ID number of contributing
federal political committee.

C

Name of Employer
YELLOWSTONE BOYS AND GIRLS
RANCH

Occupation
SEMI-RETIRED MAINTENANCE/PUBLIC RELATI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 1 / 2 0 0 7

Transaction ID: INC.A.494

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

225.00

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
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FOR LINE NUMBER: PAGE 296 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR BOYD L FUGAL

Mailing Address 504 W 1100 N

City

PLEASANT GROVE

State

UT

Zip Code

84062

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

RETIRED FARMER/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 1 / 2 0 0 7

Transaction ID: INC.A.369

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR JOHN H GEIMAN

Mailing Address 541 W WALNUT ST

City

HANOVER

State

PA

Zip Code

17331

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 1 / 2 0 0 7

Transaction ID: INC.A.213

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MS MAUDE L HOLDEN

Mailing Address 8352 PONDVIEW LN

City

ENGLEWOOD

State

FL

Zip Code

34224

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 1 / 2 0 0 7

Transaction ID: INC.A.592

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS FRANCES B HUME

Mailing Address 489 VILLAGE PL

City

LONGWOOD

State

FL

Zip Code

32779

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 1 / 2 0 0 7

Transaction ID: INC.A.1216

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MRS CONSTANCE D HUNTER

Mailing Address 4329 S ATLANTIC AVE

City

PORT ORANGE

State

FL

Zip Code

32127

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

426.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 1 / 2 0 0 7

Transaction ID: INC.A.180

Amount of Each Receipt this Period

88.00

C.

Full Name (Last, First, Middle Initial)

MR FRANCIS P LEHAR

Mailing Address 11 NORWOOD AVE
PO BOX 1482

City

MANCHESTER

State

MA

Zip Code

1944

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

RETIRED MUSIC PUBLISHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 1 / 2 0 0 7

Transaction ID: INC.A.263

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

288.00

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
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS MARY JANE RUSH

Mailing Address 352 E 328TH ST

City

WILLOWICK

State

OH

Zip Code

44095

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 1 / 2 0 0 7

Transaction ID: INC.A.1143

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

MRS JENIFER M SAMPSON

Mailing Address 5300 S MAIN ST APT 58

City

CEDAR FALLS

State

IA

Zip Code

50613

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

472.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 1 / 2 0 0 7

Transaction ID: INC.A.947

Amount of Each Receipt this Period

44.00

C.

Full Name (Last, First, Middle Initial)

MR ROBERT SUNDERLAND

Mailing Address 953 PYRITE AVE

City

HENDERSON

State

NV

Zip Code

89011

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1122.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 1 / 2 0 0 7

Transaction ID: INC.A.676

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

184.00

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR FRANK M TAYLOR

Mailing Address PO BOX 1367

City

LYNNWOOD

State

WA

Zip Code

98046

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	1	/	2	0	0	7

Transaction ID: INC.A.1197

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MRS ANNIE D WILSON

Mailing Address 254 NORMAN DR

City

CRANBERRY TWP

State

PA

Zip Code

16066

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	1	/	2	0	0	7

Transaction ID: INC.A.385

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MRS VALERIE M WOODARD

Mailing Address 4000 SW 78TH ST

City

GAINESVILLE

State

FL

Zip Code

32608

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	1	/	2	0	0	7

Transaction ID: INC.A.397

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

275.00

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
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS VALERIE M WOODARD

Mailing Address 4000 SW 78TH ST

City

GAINESVILLE

State

FL

Zip Code

32608

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 1 / 2 0 0 7

Transaction ID: INC.A.396

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

MR GEORGE L AMOS

Mailing Address 177 COOPER ST

City

DANVILLE

State

VA

Zip Code

24540

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.S. ARMY

Occupation
RETIRED SSG E6/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 2 / 2 0 0 7

Transaction ID: INC.A.1161

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MS RITA A BABIN

Mailing Address 710 W LE FEVRE RD APT 203

City

STERLING

State

IL

Zip Code

61081

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 2 / 2 0 0 7

Transaction ID: INC.A.864

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS FUMIE BOYCE

Mailing Address 4532 INTELCO LOOP SE APT 354

City

LACEY

State

WA

Zip Code

98503

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4020.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 2 / 2 0 0 7

Transaction ID: INC.A.572

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR LOUIS R BUCKLEY

Mailing Address 1905 NE 108TH AVE

City

PORTLAND

State

OR

Zip Code

97220

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

CHURCH PASTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 2 / 2 0 0 7

Transaction ID: INC.A.342

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

DR HENRY A DIEDERICHS

Mailing Address 252 N BROADMOOR BLVD

City

SPRINGFIELD

State

OH

Zip Code

45504

FEC ID number of contributing
federal political committee.

C

Name of Employer
LABORATORY MEDICINE ASSOC
INC

Occupation

RETIRED PATHOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 2 / 2 0 0 7

Transaction ID: INC.A.256

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS EDITH FLEMINBERG

Mailing Address 805 LONDONDERRY RD

City

SCHENECTADY

State

NY

Zip Code

12309

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

658.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 2 / 2 0 0 7

Transaction ID: INC.A.661

Amount of Each Receipt this Period

88.00

B.

Full Name (Last, First, Middle Initial)

MRS EDNA P HARRISON

Mailing Address 12153 GLENCOE ST

City

THORNTON

State

CO

Zip Code

80241

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 2 / 2 0 0 7

Transaction ID: INC.A.269

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

MS WILHELMINE E LONG

Mailing Address 1817 W NORWOOD ST

City

CHICAGO

State

IL

Zip Code

60660

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 2 / 2 0 0 7

Transaction ID: INC.A.753

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

173.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS MARION A MC GOWAN

Mailing Address 6216 TAPIA DR APT E

City

MALIBU

State

CA

Zip Code

90265

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 2 / 2 0 0 7

Transaction ID: INC.A.1227

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MS JOSIE P ODOM

Mailing Address 1674 GALE LN

City

KINGSPORT

State

TN

Zip Code

37660

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 2 / 2 0 0 7

Transaction ID: INC.A.1163

Amount of Each Receipt this Period

44.00

C.

Full Name (Last, First, Middle Initial)

MS JOSIE P ODOM

Mailing Address 1674 GALE LN

City

KINGSPORT

State

TN

Zip Code

37660

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 2 / 2 0 0 7

Transaction ID: INC.A.1164

Amount of Each Receipt this Period

44.00

SUBTOTAL of Receipts This Page (optional)

288.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS JO AN RIEDLINGER

Mailing Address PO BOX 3006

City

TROY

State

MT

Zip Code

59935

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 2 / 2 0 0 7

Transaction ID: INC.A.598

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MRS JEANETTE M RODEGHIER

Mailing Address 1440 TOWNSHIP AVE

City

WISCONSIN RAPIDS

State

WI

Zip Code

54494

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

708.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 2 / 2 0 0 7

Transaction ID: INC.A.736

Amount of Each Receipt this Period

88.00

C.

Full Name (Last, First, Middle Initial)

MRS DOROTHY L SAPLATA

Mailing Address 5304 HARRY S TRUMAN DR APT 304

City

GRANDVIEW

State

MO

Zip Code

64030

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 2 / 2 0 0 7

Transaction ID: INC.A.351

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

148.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR ROBERT E STAIRS

Mailing Address 10443 TAM O SHANTER RD

City

PENSACOLA

State

FL

Zip Code

32514

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 2 / 2 0 0 7

Transaction ID: INC.A.1074

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR FRANK M TAYLOR

Mailing Address PO BOX 1367

City

LYNNWOOD

State

WA

Zip Code

98046

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 2 / 2 0 0 7

Transaction ID: INC.A.1198

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR DON W WADE

Mailing Address 6 LINDA VISTA

City

ORINDA

State

CA

Zip Code

94563

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 2 / 2 0 0 7

Transaction ID: INC.A.232

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS JUNE L WELSH

Mailing Address 1111 N COLLEGE AVE

City

CLARKSVILLE

State

AR

Zip Code

72830

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 2 / 2 0 0 7

Transaction ID: INC.A.771

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MRS FUMIE BOYCE

Mailing Address 4532 INTELCO LOOP SE APT 354

City

LACEY

State

WA

Zip Code

98503

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4020.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 3 / 2 0 0 7

Transaction ID: INC.A.573

Amount of Each Receipt this Period

220.00

C.

Full Name (Last, First, Middle Initial)

MR WALTER R CHANDLER

Mailing Address 608 SNUGGS ST

City

ALBEMARLE

State

NC

Zip Code

28001

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 3 / 2 0 0 7

Transaction ID: INC.A.966

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

305.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR FRANK CUSUMANO

Mailing Address 2009 N COMMERCE ST
PO BOX 4718

City State Zip Code
STOCKTON CA 95204

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 3 / 2 0 0 7

Transaction ID: INC.A.1104

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MRS CLARA R DISNEY

Mailing Address 7541 BALTIMORE ANNAPOLIS BLVD

City State Zip Code
GLEN BURNIE MD 21060

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 3 / 2 0 0 7

Transaction ID: INC.A.1048

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

MRS ORA M DOSS

Mailing Address 285 BILL BENNETT RD

City State Zip Code
JOHNSON CITY TN 37604

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 3 / 2 0 0 7

Transaction ID: INC.A.587

Amount of Each Receipt this Period

44.00

SUBTOTAL of Receipts This Page (optional)

394.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR OBERLIN J EVENSON

Mailing Address 580 SAN GORGONIO ST

City

SAN DIEGO

State

CA

Zip Code

92106

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 3 / 2 0 0 7

Transaction ID: INC.A.337

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MRS MARY L FLORY

Mailing Address 26 MEADOW LN

City

FLEMINGTON

State

NJ

Zip Code

8822

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 3 / 2 0 0 7

Transaction ID: INC.A.1232

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN H GEIMAN

Mailing Address 541 W WALNUT ST

City

HANOVER

State

PA

Zip Code

17331

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 3 / 2 0 0 7

Transaction ID: INC.A.214

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
MS MARGERY L KEIDEL

Mailing Address 27765 CALLE VALDES

City State Zip Code
MISSION VIEJO CA 92692

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 3 / 2 0 0 7

Transaction ID: INC.A.656

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)
MS MARGERY L KEIDEL

Mailing Address 27765 CALLE VALDES

City State Zip Code
MISSION VIEJO CA 92692

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 3 / 2 0 0 7

Transaction ID: INC.A.655

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)
MRS FELIPA A KLYN

Mailing Address 668 SAN BERNARDINO AVE

City State Zip Code
POMONA CA 91767

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1029.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 3 / 2 0 0 7

Transaction ID: INC.A.776

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

360.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR RAYMOND J MULCH

Mailing Address 25970 N WRANGLER RD

City

SCOTTSDALE

State

AZ

Zip Code

85255

FEC ID number of contributing
federal political committee.

C

Name of Employer
AIDANT FIRE PROTECTION

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 3 / 2 0 0 7

Transaction ID: INC.A.1223

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR HENRY O ODEGARD

Mailing Address 89518 FIR BUTTE RD

City

EUGENE

State

OR

Zip Code

97402

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 3 / 2 0 0 7

Transaction ID: INC.A.331

Amount of Each Receipt this Period

44.00

C.

Full Name (Last, First, Middle Initial)

MS ELLEN C ROUTSON

Mailing Address 1401 HERMITS WAY

City

THE DALLES

State

OR

Zip Code

97058

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

732.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 3 / 2 0 0 7

Transaction ID: INC.A.328

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

494.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS PAULINE SALYERS

Mailing Address 2916 HOYLAK CT

City

DAYTON

State

OH

Zip Code

45439

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 3 / 2 0 0 7

Transaction ID: INC.A.786

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MS HELEN W SKATRUD

Mailing Address 2601 TOUCHMARK DR UNIT 241

City

APPLETON

State

WI

Zip Code

54914

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

969.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 3 / 2 0 0 7

Transaction ID: INC.A.877

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

DR MILDRED M THOMAS

Mailing Address 2935 N WILLAMETTE BLVD

City

PORTLAND

State

OR

Zip Code

97217

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

PHYSICIAN

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 3 / 2 0 0 7

Transaction ID: INC.A.687

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS AMANDA D WILLIAMS

Mailing Address 118 W MOUNTAIN VIEW DR

City

CHULA VISTA

State

CA

Zip Code

91910

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 3 / 2 0 0 7

Transaction ID: INC.A.343

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR JOHN K BAKER

Mailing Address 79 SHORELINE DR

City

HILTON HEAD ISLAND

State

SC

Zip Code

29928

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.75

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 7

Transaction ID: INC.A.1012

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MRS KATHERINE E BROADSTONE

Mailing Address 1834 W NEWMAN PKWY

City

PEORIA

State

IL

Zip Code

61604

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 7

Transaction ID: INC.A.611

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

270.00

TOTAL This Period (last page this line number only)

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

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR JOHN A BRUNET

Mailing Address 15038 SULTANA ST

City

HESPERIA

State

CA

Zip Code

92345

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 4 / 2 0 0 7

Transaction ID: INC.A.1033

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MRS JEAN B CANAIY

Mailing Address 2688 ELDORADO SPRINGS DR

City

LOVELAND

State

CO

Zip Code

80538

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 4 / 2 0 0 7

Transaction ID: INC.A.933

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

MR BRICEL CONGEMI

Mailing Address 2835 CONSTANCE ST

City

NEW ORLEANS

State

LA

Zip Code

70115

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 4 / 2 0 0 7

Transaction ID: INC.A.974

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

235.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS CLARA R DISNEY

Mailing Address 7541 BALTIMORE ANNAPOLIS BLVD

City

GLEN BURNIE

State

MD

Zip Code

21060

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 4 / 2 0 0 7

Transaction ID: INC.A.1049

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR JOHN H GEIMAN

Mailing Address 541 W WALNUT ST

City

HANOVER

State

PA

Zip Code

17331

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 4 / 2 0 0 7

Transaction ID: INC.A.215

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MRS REBA GOLPHENEE

Mailing Address 6007 COLDBROOK AVE

City

LAKEWOOD

State

CA

Zip Code

90713

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 4 / 2 0 0 7

Transaction ID: INC.A.1080

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS CAROLYN P HAMAN

Mailing Address 8917 S PALMER RD
PO BOX 176

City State Zip Code
NEW CARLISLE OH 45344

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

662.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 4 / 2 0 0 7

Transaction ID: INC.A.553

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

MS JOYCE B HEINRICH

Mailing Address 1035 HILL ST APT 224

City State Zip Code
WATERTOWN WI 53098

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 4 / 2 0 0 7

Transaction ID: INC.A.418

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR KENNETH SALTZ

Mailing Address 441 CIRCLE DR

City State Zip Code
GREER SC 29650

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.S.A.F./FAA

Occupation
RETIRED/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 4 / 2 0 0 7

Transaction ID: INC.A.1055

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS DOROTHY L SAPLATA

Mailing Address 5304 HARRY S TRUMAN DR APT 304

City

GRANDVIEW

State

MO

Zip Code

64030

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 4 / 2 0 0 7

Transaction ID: INC.A.352

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR THOMAS A SCHOWALTER

Mailing Address N 21 W 26693 CATTAIL CT

City

PEWAUKEE

State

WI

Zip Code

53072

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 4 / 2 0 0 7

Transaction ID: INC.A.823

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR THOMAS A SCHOWALTER

Mailing Address N 21 W 26693 CATTAIL CT

City

PEWAUKEE

State

WI

Zip Code

53072

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 4 / 2 0 0 7

Transaction ID: INC.A.824

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

85.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR ROBERT E STAIRS

Mailing Address 10443 TAM O SHANTER RD

City

PENSACOLA

State

FL

Zip Code

32514

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 4 / 2 0 0 7

Transaction ID: INC.A.1075

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

MRS MARIE STAMPS

Mailing Address 955 HARPERSVILLE RD APT 2052

City

NEWPORT NEWS

State

VA

Zip Code

23601

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 4 / 2 0 0 7

Transaction ID: INC.A.960

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MR A KENNY D VALLIA, JR

Mailing Address 119 DAULPHINE ST

City

MOBILE

State

AL

Zip Code

36602

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

RETIRED/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 4 / 2 0 0 7

Transaction ID: INC.A.602

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

475.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS AURORA VEGA

Mailing Address 251 S WALNUT AVE APT 111

City

SAN DIMAS

State

CA

Zip Code

91773

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 7

Transaction ID: INC.A.807

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MRS OLETHA E YOUNG

Mailing Address 730 W JEFFERSON ST APT 242

City

MORTON

State

IL

Zip Code

61550

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 7

Transaction ID: INC.A.530

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MS RUBY BAYLESS

Mailing Address 9810 S ALTA AVE

City

REEDLEY

State

CA

Zip Code

93654

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Transaction ID: INC.A.842

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS VERNA E BLACK

Mailing Address 1109 WILSON AVE TRLR 17

City

POCATELLO

State

ID

Zip Code

83201

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Transaction ID: INC.A.601

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MRS LEOLA Z CLARK

Mailing Address 701 10TH ST SE RM 34-18

City

CEDAR RAPIDS

State

IA

Zip Code

52403

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Transaction ID: INC.A.692

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

MS JANE COMBS WARNOCK

Mailing Address 309 MIDVALE TERRACE

City

SEBASTIAN

State

FL

Zip Code

32958

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Transaction ID: INC.A.941

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

830.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS BETSY H DEBEVOISE

Mailing Address 628 HANCOCK RD

City

WILLIAMSTOWN

State

MA

Zip Code

1267

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Transaction ID: INC.A.859

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR VERN M GIBSON

Mailing Address 1001 N PASADENA UNIT 27

City

MESA

State

AZ

Zip Code

85201

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Transaction ID: INC.A.360

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

MRS EDNA P HARRISON

Mailing Address 12153 GLENCOE ST

City

THORNTON

State

CO

Zip Code

80241

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Transaction ID: INC.A.270

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

625.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS FELIPA A KLYN

Mailing Address 668 SAN BERNARDINO AVE

City

POMONA

State

CA

Zip Code

91767

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1029.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Transaction ID: INC.A.777

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MRS ELVA B LENDT

Mailing Address 3967 GRAPEFRUIT CIR

City

LAS VEGAS

State

NV

Zip Code

89103

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

578.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Transaction ID: INC.A.1152

Amount of Each Receipt this Period

88.00

C.

Full Name (Last, First, Middle Initial)

MR WILLIAM S MILLSPAUGH

Mailing Address 254 SEQUOIA CT APT 17

City

THOUSAND OAKS

State

CA

Zip Code

91360

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
MEDICAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Transaction ID: INC.A.1225

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

288.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS BESSIE MULLEN

Mailing Address 24130 FRIAR ST

City

WOODLAND HILLS

State

CA

Zip Code

91367

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Transaction ID: INC.A.1234

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MRS DOROTHY NIELSON

Mailing Address 1368 DEVENTER DR

City

LA VERNE

State

CA

Zip Code

91750

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Transaction ID: INC.A.394

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

MR LYNN O ROHDE

Mailing Address 400 N A1A LOT 71

City

JUPITER

State

FL

Zip Code

33477

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Transaction ID: INC.A.564

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

440.00

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 323 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR THOMAS A SCHOWALTER

Mailing Address N 21 W 26693 CATTAIL CT

City

PEWAUKEE

State

WI

Zip Code

53072

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Transaction ID: INC.A.825

Amount of Each Receipt this Period

15.00

B.

Full Name (Last, First, Middle Initial)

MR ELBERT C SMITH

Mailing Address PO BOX 856

City

RENTON

State

WA

Zip Code

98057

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

844.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Transaction ID: INC.A.1006

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN M SWORD

Mailing Address 1914 B AVE NE

City

CEDAR RAPIDS

State

IA

Zip Code

52402

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.75

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Transaction ID: INC.A.1094

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

215.00

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR HENRY L WELLS

Mailing Address 6018 MADRA AVE

City

SAN DIEGO

State

CA

Zip Code

92120

FEC ID number of contributing
federal political committee.

C

Name of Employer
SAN DIEGO TRUCK CENTER

Occupation

RETIRED MECHANIC/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

858.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Transaction ID: INC.A.377

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MS BARBARA L WILBURN

Mailing Address 221 HARWOOD HTS

City

UNION

State

SC

Zip Code

29379

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Transaction ID: INC.A.1045

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

MRS HELEN M WILKS

Mailing Address 459 NW RAYMOND LN

City

PORT SAINT LUCIE

State

FL

Zip Code

34983

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.75

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Transaction ID: INC.A.430

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

200.00

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
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS MACEL H WILLIAMS

Mailing Address 7342 HIGHWAY 9 W

City

CLINTON

State

AR

Zip Code

72031

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

TEACHER/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Transaction ID: INC.A.982

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MRS JUANITA L ALEXANDER

Mailing Address 2724 ALCAZAR ST NE

City

ALBUQUERQUE

State

NM

Zip Code

87110

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

ELEMENTARY TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 7

Transaction ID: INC.A.447

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MR CALVIN R ARNOLD

Mailing Address 1010 REED AVE

City

CHEYENNE

State

WY

Zip Code

82007

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 7

Transaction ID: INC.A.998

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

90.00

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS KATHERINE E BROADSTONE

Mailing Address 1834 W NEWMAN PKWY

City

PEORIA

State

IL

Zip Code

61604

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	8	/	2	0	0	7

Transaction ID: INC.A.612

Amount of Each Receipt this Period

44.00

B.

Full Name (Last, First, Middle Initial)

MRS JEAN B CANAIY

Mailing Address 2688 ELDORADO SPRINGS DR

City

LOVELAND

State

CO

Zip Code

80538

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	8	/	2	0	0	7

Transaction ID: INC.A.935

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

MRS JEAN B CANAIY

Mailing Address 2688 ELDORADO SPRINGS DR

City

LOVELAND

State

CO

Zip Code

80538

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	8	/	2	0	0	7

Transaction ID: INC.A.934

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

74.00

TOTAL This Period (last page this line number only)

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

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for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS JEAN B CANAIY

Mailing Address 2688 ELDORADO SPRINGS DR

City

LOVELAND

State

CO

Zip Code

80538

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 7

Transaction ID: INC.A.936

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

DR JOHN CHESNICK, JR DO

Mailing Address 5110 CREEKMONT DR

City

CORPUS CHRISTI

State

TX

Zip Code

78413

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.75

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 7

Transaction ID: INC.A.1103

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

DR JOHN CHESNICK, JR DO

Mailing Address 5110 CREEKMONT DR

City

CORPUS CHRISTI

State

TX

Zip Code

78413

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.75

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 7

Transaction ID: INC.A.1102

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS JOYCE A CROWTHER

Mailing Address 23500 CRISTO REY DR UNIT 208C

City

CUPERTINO

State

CA

Zip Code

95014

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 7

Transaction ID: INC.A.1116

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR MARSHALL K CUSICK

Mailing Address 205 CHERRY
PO BOX 414

City

MINNEOLA

State

KS

Zip Code

67865

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 7

Transaction ID: INC.A.323

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MRS ORA M DOSS

Mailing Address 285 BILL BENNETT RD

City

JOHNSON CITY

State

TN

Zip Code

37604

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 7

Transaction ID: INC.A.588

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

330.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS EDDITH G DOWELL

Mailing Address 3513 GILLESPIE AVE

City

NASHVILLE

State

TN

Zip Code

37205

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

860.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 7

Transaction ID: INC.A.1192

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MRS EDDITH G DOWELL

Mailing Address 3513 GILLESPIE AVE

City

NASHVILLE

State

TN

Zip Code

37205

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

860.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 7

Transaction ID: INC.A.1193

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR IRWIN J ELESON

Mailing Address 816 ROCHESTER DR

City

BILLINGS

State

MT

Zip Code

59101

FEC ID number of contributing
federal political committee.

C

Name of Employer

YELLOWSTONE BOYS AND GIRLS
RANCH

Occupation

SEMI-RETIRED MAINTENANCE/PUBLIC RELATI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 7

Transaction ID: INC.A.495

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS THERESA FIORENTINO

Mailing Address 1515 HILL DR

City

LOS ANGELES

State

CA

Zip Code

90041

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 7

Transaction ID: INC.A.499

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MRS RUTH E JOHNSON

Mailing Address 212 S 3RD ST

City

NEODESHA

State

KS

Zip Code

66757

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 7

Transaction ID: INC.A.767

Amount of Each Receipt this Period

88.00

C.

Full Name (Last, First, Middle Initial)

MS MARGERY L KEIDEL

Mailing Address 27765 CALLE VALDES

City

MISSION VIEJO

State

CA

Zip Code

92692

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 7

Transaction ID: INC.A.657

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

208.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS FELIPA A KLYN

Mailing Address 668 SAN BERNARDINO AVE

City

POMONA

State

CA

Zip Code

91767

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1029.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 7

Transaction ID: INC.A.778

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

MR HENRY O ODEGARD

Mailing Address 89518 FIR BUTTE RD

City

EUGENE

State

OR

Zip Code

97402

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 7

Transaction ID: INC.A.332

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MISS MARIAN L PATTERSON

Mailing Address 5001 W FLORIDA AVE SPC 264

City

HEMET

State

CA

Zip Code

92545

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 7

Transaction ID: INC.A.359

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

500.00

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
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS BARBARA J PORBE

Mailing Address 2649 N DUNFIELD ST

City

ORANGE

State

CA

Zip Code

92865

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

RETIRED PRIVATE VIOLIN TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 7

Transaction ID: INC.A.1130

Amount of Each Receipt this Period

44.00

B.

Full Name (Last, First, Middle Initial)

MR DAVID K ROBINSON

Mailing Address 842 E VILLA ST APT 219

City

PASADENA

State

CA

Zip Code

91101

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

RETIRED ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 7

Transaction ID: INC.A.953

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR ERIC F ROSS

Mailing Address 2000 S OCEAN BLVD APT 104S

City

PALM BEACH

State

FL

Zip Code

33480

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 7

Transaction ID: INC.A.989

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

194.00

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 333 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS MARJORIE K SHEVLIN

Mailing Address 1148 MOUNTAIN CREEK RD APT 108

City

CHATTANOOGA

State

TN

Zip Code

37405

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 7

Transaction ID: INC.A.892

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MRS BARBARA J SNODGRASS

Mailing Address PO BOX 31

City

ATWOOD

State

KS

Zip Code

67730

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 7

Transaction ID: INC.A.1036

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

MS MILDRED F SOUTHERN

Mailing Address 933 KENLEIGH CIR

City

WINSTON SALEM

State

NC

Zip Code

27106

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

727.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 7

Transaction ID: INC.A.1026

Amount of Each Receipt this Period

44.00

SUBTOTAL of Receipts This Page (optional)

544.00

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 334 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS MILDRED F SOUTHERN

Mailing Address 933 KENLEIGH CIR

City

WINSTON SALEM

State

NC

Zip Code

27106

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

727.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 7

Transaction ID: INC.A.1025

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR LOUIS J HAZLEWOOD

Mailing Address 11041 ACADEMY RIDGE RD NE

City

ALBUQUERQUE

State

NM

Zip Code

87111

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

737.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 9 / 2 0 0 7

Transaction ID: INC.A.400

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MRS FELIPA A KLYN

Mailing Address 668 SAN BERNARDINO AVE

City

POMONA

State

CA

Zip Code

91767

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1029.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 9 / 2 0 0 7

Transaction ID: INC.A.779

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

325.00

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 335 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

DR GORDON D MYERS, MD

Mailing Address 25 EASTGATE DR

City

CAMP HILL

State

PA

Zip Code

17011

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
SURGEON

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 9 / 2 0 0 7

Transaction ID: INC.A.340

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

DR PAUL M PEPPER, PHD

Mailing Address 47 W COOKE RD

City

COLUMBUS

State

OH

Zip Code

43214

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 9 / 2 0 0 7

Transaction ID: INC.A.535

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR LYNN O ROHDE

Mailing Address 400 N A1A LOT 71

City

JUPITER

State

FL

Zip Code

33477

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 9 / 2 0 0 7

Transaction ID: INC.A.565

Amount of Each Receipt this Period

44.00

SUBTOTAL of Receipts This Page (optional)

344.00

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 336 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR CHARLES H ROSE, JR

Mailing Address 702 ONTARIO ST

City

SHREVEPORT

State

LA

Zip Code

71106

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 9 / 2 0 0 7

Transaction ID: INC.A.1071

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR CHARLES H ROSE, JR

Mailing Address 702 ONTARIO ST

City

SHREVEPORT

State

LA

Zip Code

71106

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 9 / 2 0 0 7

Transaction ID: INC.A.1072

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR CHARLES H ROSE, JR

Mailing Address 702 ONTARIO ST

City

SHREVEPORT

State

LA

Zip Code

71106

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 9 / 2 0 0 7

Transaction ID: INC.A.1070

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

165.00

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 337 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS JENIFER M SAMPSON

Mailing Address 5300 S MAIN ST APT 58

City

CEDAR FALLS

State

IA

Zip Code

50613

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

472.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 9 / 2 0 0 7

Transaction ID: INC.A.948

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MS DORIS SHORT

Mailing Address 12011 RHODE ISLAND AVE

City

LOS ANGELES

State

CA

Zip Code

90025

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 9 / 2 0 0 7

Transaction ID: INC.A.1211

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR ROBERT SUNDERLAND

Mailing Address 953 PYRITE AVE

City

HENDERSON

State

NV

Zip Code

89011

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1122.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 9 / 2 0 0 7

Transaction ID: INC.A.677

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

250.00

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 338 / 428

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR LOYL R THOMAS

Mailing Address 9172 JULIE BETH ST

City

CYPRESS

State

CA

Zip Code

90630

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	9	/	2	0	0	7

Transaction ID: INC.A.450

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MRS MACEL H WILLIAMS

Mailing Address 7342 HIGHWAY 9 W

City

CLINTON

State

AR

Zip Code

72031

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
TEACHER/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	9	/	2	0	0	7

Transaction ID: INC.A.983

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MS ELIZABETH WISKEMANN

Mailing Address 357 HIGHLAND AVE

City

SAN RAFAEL

State

CA

Zip Code

94901

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	9	/	2	0	0	7

Transaction ID: INC.A.486

Amount of Each Receipt this Period

1500.00

SUBTOTAL of Receipts This Page (optional)

1600.00

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS LILLIE K BELK DAVIS

Mailing Address 2340 WHITES MILL RD

City

SUMTER

State

SC

Zip Code

29153

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Transaction ID: INC.A.904

Amount of Each Receipt this Period

44.00

B.

Full Name (Last, First, Middle Initial)

MR WALTER R CHANDLER

Mailing Address 608 SNUGGS ST

City

ALBEMARLE

State

NC

Zip Code

28001

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Transaction ID: INC.A.967

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

MS VIOLET V CHEAL

Mailing Address 354 KENDAL DR

City

KENNETT SQUARE

State

PA

Zip Code

19348

FEC ID number of contributing
federal political committee.

C

Name of Employer
STATE OF DELEWARE

Occupation

RETIRED TEACHER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Transaction ID: INC.A.618

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

154.00

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 340 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR GEORGE K GATES

Mailing Address 3473 N COUNTY ROAD 1100 W

City

NORMAN

State

IN

Zip Code

47264

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Transaction ID: INC.A.464

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MRS ANNE M HARPER

Mailing Address 85 SCOTTSDALE DR

City

TROY

State

MI

Zip Code

48084

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
MUSIC TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Transaction ID: INC.A.488

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MR LOUIS J HAZLEWOOD

Mailing Address 11041 ACADEMY RIDGE RD NE

City

ALBUQUERQUE

State

NM

Zip Code

87111

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

737.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Transaction ID: INC.A.401

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

400.00

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 341 / 428

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR LORAIN E HENDERSON

Mailing Address 2974 RIDGE CT

City

SANTA CLARA

State

CA

Zip Code

95051

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

ELECTRONICS SUPERVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	0	/	2	0	0	7

Transaction ID: INC.A.189

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

MR LORAIN E HENDERSON

Mailing Address 2974 RIDGE CT

City

SANTA CLARA

State

CA

Zip Code

95051

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

ELECTRONICS SUPERVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	0	/	2	0	0	7

Transaction ID: INC.A.190

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR FRED W KERR

Mailing Address 5310 HIGHWAY 65

City

CHILLICOTHE

State

MO

Zip Code

64601

FEC ID number of contributing
federal political committee.

C

Name of Employer
K FARMS, INC

Occupation

SELF-EMPLOYED FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	0	/	2	0	0	7

Transaction ID: INC.A.201

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

160.00

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR HARRY E KNOX, JR

Mailing Address 101 N WOODGREEN WAY

City

GREENVILLE

State

SC

Zip Code

29615

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Transaction ID: INC.A.307

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MRS ELIZABETH M RUFFIN

Mailing Address 1707 JARVIS ST

City

RALEIGH

State

NC

Zip Code

27608

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Transaction ID: INC.A.1206

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MS HELEN W SKATRUD

Mailing Address 2601 TOUCHMARK DR UNIT 241

City

APPLETON

State

WI

Zip Code

54914

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

969.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Transaction ID: INC.A.878

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR WILLIAM J WALTON

Mailing Address 12 SUNSET VIEW ST

City

SABATTUS

State

ME

Zip Code

4280

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

SERVICE MANAGER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Transaction ID: INC.A.410

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MRS BLANCHE BEA ALLEN

Mailing Address 34117 DUNE RD

City

NEWBERRY SPRINGS

State

CA

Zip Code

92365

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 1 / 2 0 0 7

Transaction ID: INC.A.703

Amount of Each Receipt this Period

5.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN H GEIMAN

Mailing Address 541 W WALNUT ST

City

HANOVER

State

PA

Zip Code

17331

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 1 / 2 0 0 7

Transaction ID: INC.A.216

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS EILEEN KELLEY

Mailing Address 1201 N WARREN AVE

City

OKLAHOMA CITY

State

OK

Zip Code

73107

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 1 / 2 0 0 7

Transaction ID: INC.A.1185

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR WILLIAM S MILLSPAUGH

Mailing Address 254 SEQUOIA CT APT 17

City

THOUSAND OAKS

State

CA

Zip Code

91360

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

MEDICAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 1 / 2 0 0 7

Transaction ID: INC.A.1226

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MS BESSIE MULLEN

Mailing Address 24130 FRIAR ST

City

WOODLAND HILLS

State

CA

Zip Code

91367

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 1 / 2 0 0 7

Transaction ID: INC.A.1235

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS BLANCHE BEA ALLEN

Mailing Address 34117 DUNE RD

City

NEWBERRY SPRINGS

State

CA

Zip Code

92365

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: INC.A.704

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MR JOHN K BAKER

Mailing Address 79 SHORELINE DR

City

HILTON HEAD ISLAND

State

SC

Zip Code

29928

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.75

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: INC.A.1013

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

MRS THEODORA DENNING

Mailing Address 1515 W OKLAHOMA AVE

City

ENID

State

OK

Zip Code

73703

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: INC.A.855

Amount of Each Receipt this Period

120.00

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS ORA M DOSS

Mailing Address 285 BILL BENNETT RD

City

JOHNSON CITY

State

TN

Zip Code

37604

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

279.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: INC.A.589

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

MR CLIFFORD N HALL

Mailing Address 9047 DICKENSON RD

City

WINNEBAGO

State

IL

Zip Code

61088

FEC ID number of contributing
federal political committee.

C

Name of Employer
SUNDSTRAND CORP

Occupation

SELF-EMPLOYED/RETIRED/HOMEMAKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

464.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: INC.A.415

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MRS EDNA P HARRISON

Mailing Address 12153 GLENCOE ST

City

THORNTON

State

CO

Zip Code

80241

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: INC.A.271

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

160.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR LORAIN E HENDERSON

Mailing Address 2974 RIDGE CT

City

SANTA CLARA

State

CA

Zip Code

95051

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

ELECTRONICS SUPERVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: INC.A.191

Amount of Each Receipt this Period

44.00

B.

Full Name (Last, First, Middle Initial)

MRS CARROLL K KING

Mailing Address 2432 WINDROWS DR

City

PRINCETON

State

NJ

Zip Code

8540

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: INC.A.1146

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MRS MARJORIE J KING

Mailing Address 50 VIEW POINT DR

City

GREENVILLE

State

SC

Zip Code

29609

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

439.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: INC.A.297

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

279.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS MARJORIE J KING

Mailing Address 50 VIEW POINT DR

City

GREENVILLE

State

SC

Zip Code

29609

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

439.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: INC.A.298

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MS MARION W PARKS, JR

Mailing Address 2534 N MORRISON RD

City

MUNCIE

State

IN

Zip Code

47304

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.S. ARMY

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: INC.A.640

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MS MARION W PARKS, JR

Mailing Address 2534 N MORRISON RD

City

MUNCIE

State

IN

Zip Code

47304

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.S. ARMY

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: INC.A.641

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS MARTHA ANN PIERCY

Mailing Address 1146 SHENANDOAH RD

City

SAN MARINO

State

CA

Zip Code

91108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

937.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: INC.A.382

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

MR DAVID K ROBINSON

Mailing Address 842 E VILLA ST APT 219

City

PASADENA

State

CA

Zip Code

91101

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

RETIRED ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: INC.A.954

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

MR THOMAS A SCHOWALTER

Mailing Address N 21 W 26693 CATTAIL CT

City

PEWAUKEE

State

WI

Zip Code

53072

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: INC.A.826

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

555.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR RODGER C SCOTT

Mailing Address 20405 SE 344TH ST

City

AUBURN

State

WA

Zip Code

98092

FEC ID number of contributing
federal political committee.

C

Name of Employer

SCOTTY'S GENERAL CONSTRUC-
TION

Occupation

SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1650.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: INC.A.239

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

MRS JANICE E SHALLENBERG

Mailing Address 140 WINDSOR PARK DR APT E301

City

CAROL STREAM

State

IL

Zip Code

60188

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: INC.A.721

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MS HELEN W SKATRUD

Mailing Address 2601 TOUCHMARK DR UNIT 241

City

APPLETON

State

WI

Zip Code

54914

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

969.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: INC.A.880

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)

265.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS HELEN W SKATRUD

Mailing Address 2601 TOUCHMARK DR UNIT 241

City

APPLETON

State

WI

Zip Code

54914

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

969.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: INC.A.879

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

MR ADELBERT I SLOCUM

Mailing Address 14314 SE WEBSTER RD APT D2

City

MILWAUKIE

State

OR

Zip Code

97267

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: INC.A.260

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

MS JANYCE SORBELLO

Mailing Address 833 PRISM VALLEY DR

City

MISHAWAKA

State

IN

Zip Code

46544

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

REGISTERED NURSE/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: INC.A.1230

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

735.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS VERNAL LEE STEWART

Mailing Address 16795 COUNTRY KNOLL DR

City

NORTHVILLE

State

MI

Zip Code

48168

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: INC.A.697

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MRS JEANETTE F YANDOW

Mailing Address 1133 LONG POND RD

City

ROCHESTER

State

NY

Zip Code

14626

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: INC.A.897

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN K BAKER

Mailing Address 79 SHORELINE DR

City

HILTON HEAD ISLAND

State

SC

Zip Code

29928

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.75

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 7 / 2 0 0 7

Transaction ID: INC.A.1014

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

145.00

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 353 / 428

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS HELEN W SKATRUD

Mailing Address 2601 TOUCHMARK DR UNIT 241

City

APPLETON

State

WI

Zip Code

54914

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

969.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 7 / 2 0 0 7

Transaction ID: INC.A.881

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR EXCEL I SMITH

Mailing Address PO BOX 187

City

TRINCHERA

State

CO

Zip Code

81081

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 7 / 2 0 0 7

Transaction ID: INC.A.366

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

MRS VIRGINIA H BARNES

Mailing Address 101 COUNTRY COVE DR

City

CLINTON

State

MS

Zip Code

39056

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

788.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 8 / 2 0 0 7

Transaction ID: INC.A.1085

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

500.00

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS LESLEY LINSTEADER

Mailing Address 23871 WILLOWS DR APT 135

City

LAGUNA HILLS

State

CA

Zip Code

92653

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED/HOMEMAKER

Occupation

RETIRED BUSINESS FINANCIAL MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

822.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 8 / 2 0 0 7

Transaction ID: INC.A.890

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR HENRY L WELLS

Mailing Address 6018 MADRA AVE

City

SAN DIEGO

State

CA

Zip Code

92120

FEC ID number of contributing
federal political committee.

C

Name of Employer

SAN DIEGO TRUCK CENTER

Occupation

RETIRED MECHANIC/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

858.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 8 / 2 0 0 7

Transaction ID: INC.A.378

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MRS HELEN M WILKS

Mailing Address 459 NW RAYMOND LN

City

PORT SAINT LUCIE

State

FL

Zip Code

34983

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.75

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 8 / 2 0 0 7

Transaction ID: INC.A.431

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS RITA A BABIN

Mailing Address 710 W LE FEVRE RD APT 203

City

STERLING

State

IL

Zip Code

61081

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: INC.A.865

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR JOHN RODGERS CAMP, JR

Mailing Address 2532 SW 50TH BLVD

City

GAINESVILLE

State

FL

Zip Code

32608

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

RETIRED ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: INC.A.390

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MS VIOLET V CHEAL

Mailing Address 354 KENDAL DR

City

KENNETT SQUARE

State

PA

Zip Code

19348

FEC ID number of contributing
federal political committee.

C

Name of Employer
STATE OF DELEWARE

Occupation

RETIRED TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: INC.A.619

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

110.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS WILMA N DEMOSS

Mailing Address 104 SAINT JO TER

City

NOCONA

State

TX

Zip Code

76255

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: INC.A.287

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MRS ORA M DOSS

Mailing Address 285 BILL BENNETT RD

City

JOHNSON CITY

State

TN

Zip Code

37604

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: INC.A.590

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

MRS EDITH FLEMINBERG

Mailing Address 805 LONDONDERRY RD

City

SCHENECTADY

State

NY

Zip Code

12309

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

658.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: INC.A.662

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

260.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR FLOYD W GRAVES

Mailing Address PO BOX 186

City

AMANDA

State

OH

Zip Code

43102

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: INC.A.338

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR RICHARD S GRIFFITH

Mailing Address PO BOX 91610

City

LAFAYETTE

State

LA

Zip Code

70509

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
INVESTOR/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: INC.A.473

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR RICHARD S GRIFFITH

Mailing Address PO BOX 91610

City

LAFAYETTE

State

LA

Zip Code

70509

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
INVESTOR/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: INC.A.474

Amount of Each Receipt this Period

400.00

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS MARGARET E HOWELL

Mailing Address 1221 SW SHORELINE DR APT 2230

City

PALM CITY

State

FL

Zip Code

34990

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: INC.A.1214

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

MR WALTON JENNINGS

Mailing Address 1580 E RIVER RD APT 513

City

TUCSON

State

AZ

Zip Code

85718

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: INC.A.197

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

MRS EILEEN KELLEY

Mailing Address 1201 N WARREN AVE

City

OKLAHOMA CITY

State

OK

Zip Code

73107

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: INC.A.1186

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

835.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MR FRED W KERR

Mailing Address 5310 HIGHWAY 65

City

CHILLICOTHE

State

MO

Zip Code

64601

FEC ID number of contributing
federal political committee.

C

Name of Employer
K FARMS, INC

Occupation

SELF-EMPLOYED FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: INC.A.202

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MRS ELVA B LENDT

Mailing Address 3967 GRAPEFRUIT CIR

City

LAS VEGAS

State

NV

Zip Code

89103

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

578.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: INC.A.1153

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MRS JO AN RIEDLINGER

Mailing Address PO BOX 3006

City

TROY

State

MT

Zip Code

59935

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: INC.A.599

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MS DORIS SHORT

Mailing Address 12011 RHODE ISLAND AVE

City

LOS ANGELES

State

CA

Zip Code

90025

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: INC.A.1212

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR ELBERT C SMITH

Mailing Address PO BOX 856

City

RENTON

State

WA

Zip Code

98057

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

844.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: INC.A.1007

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

MS GRETCHEN E STRAUSS

Mailing Address 1269 NATIONAL RD APT 19

City

WHEELING

State

WV

Zip Code

26003

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: INC.A.1221

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

500.00

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
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

MRS OLETHA E YOUNG

Mailing Address 730 W JEFFERSON ST APT 242

City

MORTON

State

IL

Zip Code

61550

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: INC.A.531

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

25.00

TOTAL This Period (last page this line number only)

107262.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Washington Intelligence Bureau

Mailing Address 4128 Pepsi Place

City
Chantilly

State
VA

Zip Code
20151

Purpose of Disbursement
Account Services

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: EXP.B.93

Date of Disbursement

07 / 09 / 2007

Amount of Each Disbursement this Period

495.57

B.

Full Name (Last, First, Middle Initial)

The Best List, Inc.

Mailing Address 2070 Chain Bridge Rd., suite 520

City
Vienna

State
VA

Zip Code
22182

Purpose of Disbursement
Lists

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: EXP.B.97

Date of Disbursement

07 / 17 / 2007

Amount of Each Disbursement this Period

360.18

C.

Full Name (Last, First, Middle Initial)

Postmaster

Mailing Address Online Payments

City

State

Zip Code

Purpose of Disbursement
Postage

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: EXP.B.100

Date of Disbursement

07 / 20 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

1855.75

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)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Barrett Garcia

Mailing Address 32302 Camino Capistrano #214

City State Zip Code
San Juan Capistran CA 92675

Purpose of Disbursement
Accounting/Professional Services

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: EXP.B.61

Date of Disbursement

07 / 24 / 2007

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

James Lacy

Mailing Address 30011 Ivy Glenn Drive #223

City State Zip Code
Laguna Niguel CA 92677

Purpose of Disbursement
Consulting/Legal Fees

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: EXP.B.60

Date of Disbursement

07 / 24 / 2007

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Washington Intelligence Bureau

Mailing Address 4128 Pepsi Place

City State Zip Code
Chantilly VA 20151

Purpose of Disbursement
Account Services

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: EXP.B.101

Date of Disbursement

07 / 30 / 2007

Amount of Each Disbursement this Period

1409.61

SUBTOTAL of Disbursements This Page (optional)

3409.61

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

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)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Barrett Garcia

Mailing Address 32302 Camino Capistrano #214

City State Zip Code
San Juan Capistran CA 92675

Purpose of Disbursement
Accounting/professional services

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: EXP.B.63

Date of Disbursement

08 / 02 / 2007

Amount of Each Disbursement this Period

1918.70

B.

Full Name (Last, First, Middle Initial)

Direct Response Data

Mailing Address 2070 Chain Bridge Road, Suite 520

City State Zip Code
Vienna VA 22182

Purpose of Disbursement
Data Entry

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: EXP.B.112

Date of Disbursement

08 / 13 / 2007

Amount of Each Disbursement this Period

334.81

C.

Full Name (Last, First, Middle Initial)

The Best List, Inc.

Mailing Address 2070 Chain Bridge Rd., suite 520

City State Zip Code
Vienna VA 22182

Purpose of Disbursement
Lists

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: EXP.B.115

Date of Disbursement

08 / 13 / 2007

Amount of Each Disbursement this Period

2327.32

SUBTOTAL of Disbursements This Page (optional)

4580.83

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)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Washington Intelligence Bureau

Mailing Address 4128 Pepsi Place

City
Chantilly

State
VA

Zip Code
20151

Purpose of Disbursement
Account Services

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: EXP.B.110

Date of Disbursement

08 / 13 / 2007

Amount of Each Disbursement this Period

899.54

B.

Full Name (Last, First, Middle Initial)

Response Dynamics

Mailing Address 2070 Chain Bridge Rd., Suite 520

City
Vienna

State
VA

Zip Code
22182

Purpose of Disbursement
Mailing Services

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: EXP.B.120

Date of Disbursement

08 / 16 / 2007

Amount of Each Disbursement this Period

6570.56

C.

Full Name (Last, First, Middle Initial)

Floyd Brown

Mailing Address 4224 67th AVE CT W

City
University Place

State
WA

Zip Code
98466

Purpose of Disbursement
Consulting Fees

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: EXP.B.69

Date of Disbursement

08 / 28 / 2007

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

9470.10

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)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Wewer & Lacy

Mailing Address 30011 Ivy Glenn Dr., Ste 223

City Laguna Niguel State CA Zip Code 92677

Purpose of Disbursement

Legal Fees

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: EXP.B.70

Date of Disbursement

08 / 28 / 2007

Amount of Each Disbursement this Period

2000.00

B.

Full Name (Last, First, Middle Initial)

United Bank

Mailing Address 4501 Daly Drive

City Chantilly State VA Zip Code 20151

Purpose of Disbursement

Merchant Fees

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: EXP.B.124

Date of Disbursement

08 / 30 / 2007

Amount of Each Disbursement this Period

33.25

C.

Full Name (Last, First, Middle Initial)

United Bank

Mailing Address 4501 Daly Drive

City Chantilly State VA Zip Code 20151

Purpose of Disbursement

Merchant Fees

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: EXP.B.125

Date of Disbursement

08 / 31 / 2007

Amount of Each Disbursement this Period

2.31

SUBTOTAL of Disbursements This Page (optional)

2035.56

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)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

United Bank

Mailing Address 4501 Daly Drive

City
Chantilly

State
VA

Zip Code
20151

Purpose of Disbursement
Bank Fees

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: EXP.B.126

Date of Disbursement

08 / 31 / 2007

Amount of Each Disbursement this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Mid America Printing

Mailing Address 2070 Chain Bridge Road, Suite 520

City
Vienna

State
VA

Zip Code
22182

Purpose of Disbursement
Printing

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: EXP.B.128

Date of Disbursement

09 / 04 / 2007

Amount of Each Disbursement this Period

2537.63

C.

Full Name (Last, First, Middle Initial)

Washington Intelligence Bureau

Mailing Address 4128 Pepsi Place

City
Chantilly

State
VA

Zip Code
20151

Purpose of Disbursement
Account Services

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: EXP.B.133

Date of Disbursement

09 / 13 / 2007

Amount of Each Disbursement this Period

1961.04

SUBTOTAL of Disbursements This Page (optional)

4508.67

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)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mid America Printing

Mailing Address 2070 Chain Bridge Road, Suite 520

City Vienna State VA Zip Code 22182

Purpose of Disbursement
Printing

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: EXP.B.140

Date of Disbursement

09 / 24 / 2007

Amount of Each Disbursement this Period

6025.42

B.

Full Name (Last, First, Middle Initial)

Mid America Printing

Mailing Address 2070 Chain Bridge Road, Suite 520

City Vienna State VA Zip Code 22182

Purpose of Disbursement
Printing

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: EXP.B.143

Date of Disbursement

10 / 02 / 2007

Amount of Each Disbursement this Period

2393.59

C.

Full Name (Last, First, Middle Initial)

Postmaster

Mailing Address Online Payments

City State Zip Code

Purpose of Disbursement
Postage

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: EXP.B.145

Date of Disbursement

10 / 09 / 2007

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

10419.01

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 PageFOR 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)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Direct Response Data

Mailing Address 2070 Chain Bridge Road, Suite 520

City Vienna State VA Zip Code 22182

Purpose of Disbursement
Data Entry

Candidate Name

003
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: EXP.B.152

Date of Disbursement

10 / 22 / 2007

Amount of Each Disbursement this Period

856.43

B.

Full Name (Last, First, Middle Initial)

Fulfillment Management

Mailing Address 2070 Chain Bridge Rd., Ste 520

City Vienna State CA Zip Code 22182

Purpose of Disbursement
Mailings

Candidate Name

003
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: EXP.B.153

Date of Disbursement

10 / 22 / 2007

Amount of Each Disbursement this Period

1288.17

C.

Full Name (Last, First, Middle Initial)

Response Dynamics

Mailing Address 2070 Chain Bridge Rd., Suite 520

City Vienna State VA Zip Code 22182

Purpose of Disbursement
Mailing Services

Candidate Name

003
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: EXP.B.154

Date of Disbursement

10 / 22 / 2007

Amount of Each Disbursement this Period

9225.47

SUBTOTAL of Disbursements This Page (optional) ►

11370.07

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)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Washington Intelligence Bureau

Mailing Address 4128 Pepsi Place

City
Chantilly

State
VA

Zip Code
20151

Purpose of Disbursement
Account Services

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: EXP.B.151

Date of Disbursement

10 / 22 / 2007

Amount of Each Disbursement this Period

3262.97

B.

Full Name (Last, First, Middle Initial)

Excellentia Inc.

Mailing Address 4224 67th AVE CT W

City
University Place

State
WA

Zip Code
98466

Purpose of Disbursement
Evaluation, Coordination Work

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: EXP.B.78

Date of Disbursement

11 / 10 / 2007

Amount of Each Disbursement this Period

2000.00

C.

Full Name (Last, First, Middle Initial)

Barrett Garcia

Mailing Address 32302 Camino Capistrano #214

City
San Juan Capistran

State
CA

Zip Code
92675

Purpose of Disbursement
Accounting

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: EXP.B.81

Date of Disbursement

11 / 10 / 2007

Amount of Each Disbursement this Period

675.00

SUBTOTAL of Disbursements This Page (optional)

5937.97

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)

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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)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

James Lacy

Mailing Address 30011 Ivy Glenn Drive #223

City Laguna Niguel State CA Zip Code 92677

Purpose of Disbursement
Consulting/Legal Fees

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: EXP.B.79

Date of Disbursement

11 / 10 / 2007

Amount of Each Disbursement this Period

1500.00

B.

Full Name (Last, First, Middle Initial)

Deluxe Business Systems

Mailing Address P.O.Box 1186

City Lancaster State CA Zip Code 93584

Purpose of Disbursement
Checks

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: EXP.B.82

Date of Disbursement

11 / 13 / 2007

Amount of Each Disbursement this Period

80.02

C.

Full Name (Last, First, Middle Initial)

Washington Intelligence Bureau

Mailing Address 4128 Pepsi Place

City Chantilly State VA Zip Code 20151

Purpose of Disbursement
Account Services

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: EXP.B.165

Date of Disbursement

11 / 26 / 2007

Amount of Each Disbursement this Period

1775.96

SUBTOTAL of Disbursements This Page (optional)

3355.98

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)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Sills, James

Mailing Address P.O.Box 82303

City
San Diego

State
CA

Zip Code
92138

Purpose of Disbursement
Consulting

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: EXP.B.84

Date of Disbursement

12 / 05 / 2007

Amount of Each Disbursement this Period

750.00

B.

Full Name (Last, First, Middle Initial)

United Bank

Mailing Address 4501 Daly Drive

City
Chantilly

State
VA

Zip Code
20151

Purpose of Disbursement
Merchant Fee

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: EXP.B.1247

Date of Disbursement

12 / 17 / 2007

Amount of Each Disbursement this Period

408.33

C.

Full Name (Last, First, Middle Initial)

Washington Intelligence Bureau

Mailing Address 4128 Pepsi Place

City
Chantilly

State
VA

Zip Code
20151

Purpose of Disbursement
Account Services

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: EXP.B.1248

Date of Disbursement

12 / 17 / 2007

Amount of Each Disbursement this Period

3610.83

SUBTOTAL of Disbursements This Page (optional)

4769.16

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 PageFOR 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)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Postmaster

Mailing Address Online Payments

City State Zip Code

Purpose of Disbursement

Postage

Candidate Name

003

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: EXP.B.1251

Date of Disbursement

MM / DD / YYYY
12 / 28 / 2007

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

63712.71

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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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 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)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mike Pence Committee

Mailing Address PO Box 408

City
Anderson

State
IN

Zip Code
46015

Purpose of Disbursement
Campaign Contribution

Candidate Name
Mike Pence

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: IN District: 06

Transaction ID: EXP.B.56

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Norm Coleman For U.S. Senate

Mailing Address 7300 Hudson Blvd., Suite 270A

City
St. Paul

State
MN

Zip Code
55104

Purpose of Disbursement
Campaign Contribution

Candidate Name
Norm Coleman

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District:

Transaction ID: EXP.B.58

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Duncan D. Hunter for Congress

Mailing Address PO Box 3917

City
La Mesa

State
CA

Zip Code
91944

Purpose of Disbursement
Campaign contribution

Candidate Name
Duncan Hunter

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 52

Transaction ID: EXP.B.71

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

1500.00

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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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Committee To Re-Elect Congressman Dana Rohrabacher

Mailing Address 101 Main Street, Suite 380

City State Zip Code
Huntington Beach CA 92648

Purpose of Disbursement
Void Check for 500.00

Candidate Name
Dana Rohrabacher

Office Sought: ☒ House
☐ Senate
☐ President

State: CA District: 46

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: EXP.B.72

Date of Disbursement

09 / 28 / 2007

Amount of Each Disbursement this Period

0.00

B.

Full Name (Last, First, Middle Initial)

Committee To Re-Elect Congressman Dana Rohrabacher

Mailing Address 101 Main Street, Suite 380

City State Zip Code
Huntington Beach CA 92648

Purpose of Disbursement
Re-issue of check - original not cashed -re-issued 3/2008

Candidate Name
Dana Rohrabacher

Office Sought: ☒ House
☐ Senate
☐ President

State: CA District: 46

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: EXP.B.1257

Date of Disbursement

09 / 28 / 2007

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Issa For Congress

Mailing Address 1800 Thibodo Road #310

City State Zip Code
Vista CA 92081

Purpose of Disbursement
Political Contribution

Candidate Name
Darrell Issa

Office Sought: ☒ House
☐ Senate
☐ President

State: CA District: 49

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: EXP.B.73

Date of Disbursement

09 / 28 / 2007

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional)

750.00

TOTAL This Period (last page this line number only)

2250.00

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ C C00429084	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Direct Response Data		Date M M / D D / Y Y Y Y 0 7 / 1 7 / 2 0 0 7	
Mailing Address 2070 Chain Bridge Road, Suite 520		Amount 2360.03	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.30	
Purpose of Expenditure Data Entry		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		290648.96	
Full Name (Last, First, Middle, Initial) of Payee Direct Response Data		Date M M / D D / Y Y Y Y 0 7 / 1 7 / 2 0 0 7	
Mailing Address 2070 Chain Bridge Road, Suite 520		Amount 557.31	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.31	
Purpose of Expenditure Data Entry		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		65470.36	
(a) SUBTOTAL of Itemized Independent Expenditures		2917.34	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 377 / 428

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00429084</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Fulfillment Management		Date <div style="display: flex; justify-content: space-between;"> <div><small>M</small> <small>M</small> 07</div> <div><small>D</small> <small>D</small> 17</div> <div><small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small> 2007</div> </div>	
Mailing Address 2070 Chain Bridge Rd., Ste 520		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">948.24</div>	
City State Zip Code Vienna CA 22182		Transaction ID: EDT.EALC.39	
Purpose of Expenditure Mailings		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">290648.96</div>	
Full Name (Last, First, Middle, Initial) of Payee Fulfillment Management		Date <div style="display: flex; justify-content: space-between;"> <div><small>M</small> <small>M</small> 07</div> <div><small>D</small> <small>D</small> 17</div> <div><small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small> 2007</div> </div>	
Mailing Address 2070 Chain Bridge Rd., Ste 520		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">223.93</div>	
City State Zip Code Vienna CA 22182		Transaction ID: EDT.EALC.40	
Purpose of Expenditure Mailings		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">65470.36</div>	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;">1172.17</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date <div style="display: flex; justify-content: space-between;"> <div><small>M</small> <small>M</small> 05</div> <div><small>D</small> <small>D</small> 29</div> <div><small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small> 2008</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00429084</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Mid America Printing		Date <div style="display: flex; justify-content: space-between;"> <div><small>M</small> <small>M</small> 07</div> <div><small>D</small> <small>D</small> 17</div> <div><small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small> 2007</div> </div>	
Mailing Address 2070 Chain Bridge Road, Suite 520		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1263.88</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.49	
Purpose of Expenditure Printing		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">290648.96</div>	
Full Name (Last, First, Middle, Initial) of Payee Mid America Printing		Date <div style="display: flex; justify-content: space-between;"> <div><small>M</small> <small>M</small> 07</div> <div><small>D</small> <small>D</small> 17</div> <div><small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small> 2007</div> </div>	
Mailing Address 2070 Chain Bridge Road, Suite 520		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">298.46</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.50	
Purpose of Expenditure Printing		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">65470.36</div>	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;">1562.34</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date <div style="display: flex; justify-content: space-between;"> <div><small>M</small> <small>M</small> 05</div> <div><small>D</small> <small>D</small> 29</div> <div><small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small> 2008</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00429084</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date <div style="display: flex; justify-content: space-between;"> <div><small>M</small> <small>M</small> 07</div> <div><small>D</small> <small>D</small> 17</div> <div><small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small> 2007</div> </div>	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">10686.73</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.77	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">290648.96</div>	
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date <div style="display: flex; justify-content: space-between;"> <div><small>M</small> <small>M</small> 07</div> <div><small>D</small> <small>D</small> 17</div> <div><small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small> 2007</div> </div>	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2523.64</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.78	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">65470.36</div>	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;">13210.37</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date <div style="display: flex; justify-content: space-between;"> <div><small>M</small> <small>M</small> 05</div> <div><small>D</small> <small>D</small> 29</div> <div><small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small> 2008</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00429084</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 07</div> <div style="border: 1px solid black; padding: 2px;">D 17</div> <div style="border: 1px solid black; padding: 2px;">Y 2007</div> </div>	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1030.58</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.79	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">290648.96</div>	
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 07</div> <div style="border: 1px solid black; padding: 2px;">D 17</div> <div style="border: 1px solid black; padding: 2px;">Y 2007</div> </div>	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">243.37</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.80	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">65470.36</div>	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; text-align: right;">1273.95</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 05</div> <div style="border: 1px solid black; padding: 2px;">D 29</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00429084</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Direct Response Data		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 0 7</div> <div><small>D D</small> 3 0</div> <div><small>Y Y Y Y</small> 2 0 0 7</div> </div>	
Mailing Address 2070 Chain Bridge Road, Suite 520		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">3605.99</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.133 Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Purpose of Expenditure Data Entry		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">290648.96</div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Full Name (Last, First, Middle, Initial) of Payee Direct Response Data		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 0 7</div> <div><small>D D</small> 3 0</div> <div><small>Y Y Y Y</small> 2 0 0 7</div> </div>	
Mailing Address 2070 Chain Bridge Road, Suite 520		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">851.54</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.134 Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Purpose of Expenditure Data Entry		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">65470.36</div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;">4457.53</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 0 5</div> <div><small>D D</small> 2 9</div> <div><small>Y Y Y Y</small> 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00429084</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Mid America Printing		Date <div style="display: flex; justify-content: space-between;"> <div><small>M</small> <small>M</small> 07</div> <div><small>D</small> <small>D</small> 30</div> <div><small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small> 2007</div> </div>	
Mailing Address 2070 Chain Bridge Road, Suite 520		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">17791.55</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.51	
Purpose of Expenditure Printing		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">290648.96</div>	
Full Name (Last, First, Middle, Initial) of Payee Mid America Printing		Date <div style="display: flex; justify-content: space-between;"> <div><small>M</small> <small>M</small> 07</div> <div><small>D</small> <small>D</small> 30</div> <div><small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small> 2007</div> </div>	
Mailing Address 2070 Chain Bridge Road, Suite 520		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">4201.42</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.52	
Purpose of Expenditure Printing		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">65470.36</div>	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;">21992.97</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date <div style="display: flex; justify-content: space-between;"> <div><small>M</small> <small>M</small> 05</div> <div><small>D</small> <small>D</small> 29</div> <div><small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small> 2008</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00429084</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date <div style="display: flex; justify-content: space-between;"> <div><small>M</small> <small>M</small> 07</div> <div><small>D</small> <small>D</small> 30</div> <div><small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small> 2007</div> </div>	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1645.52</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.81	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">290648.96</div>	
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date <div style="display: flex; justify-content: space-between;"> <div><small>M</small> <small>M</small> 07</div> <div><small>D</small> <small>D</small> 30</div> <div><small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small> 2007</div> </div>	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">388.58</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.82	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">65470.36</div>	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;">2034.10</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date <div style="display: flex; justify-content: space-between;"> <div><small>M</small> <small>M</small> 05</div> <div><small>D</small> <small>D</small> 29</div> <div><small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small> 2008</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ C C00429084	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date MM / DD / YYYY 08 / 01 / 2007	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount 3331.52	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.83	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		290648.96	
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date MM / DD / YYYY 08 / 01 / 2007	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount 786.73	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.84	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		65470.36	
(a) SUBTOTAL of Itemized Independent Expenditures		4118.25	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date MM / DD / YYYY 05 / 29 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00429084</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee The Best List, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 0 8</div> <div><small>D D</small> 0 2</div> <div><small>Y Y Y Y</small> 2 0 0 7</div> </div>	
Mailing Address 2070 Chain Bridge Rd., suite 520		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">4611.10</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.121	
Purpose of Expenditure Lists		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">290648.96</div>			
Full Name (Last, First, Middle, Initial) of Payee The Best List, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 0 8</div> <div><small>D D</small> 0 2</div> <div><small>Y Y Y Y</small> 2 0 0 7</div> </div>	
Mailing Address 2070 Chain Bridge Rd., suite 520		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1088.90</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.122	
Purpose of Expenditure Lists		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">65470.36</div>			
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;">5700.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 0 5</div> <div><small>D D</small> 2 9</div> <div><small>Y Y Y Y</small> 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ C C00429084	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Mid America Printing		Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y 0 8 / 0 6 / 2 0 0 7</div> </div>	
Mailing Address 2070 Chain Bridge Road, Suite 520		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1536.90</div>	
<div style="display: flex; justify-content: space-between;"> <div>City Vienna</div> <div>State VA</div> <div>Zip Code 22182</div> </div>		Transaction ID: EDT.EALC.53	
Purpose of Expenditure Printing		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">290648.96</div>	
Full Name (Last, First, Middle, Initial) of Payee Mid America Printing		Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y 0 8 / 0 6 / 2 0 0 7</div> </div>	
Mailing Address 2070 Chain Bridge Road, Suite 520		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">362.93</div>	
<div style="display: flex; justify-content: space-between;"> <div>City Vienna</div> <div>State VA</div> <div>Zip Code 22182</div> </div>		Transaction ID: EDT.EALC.54	
Purpose of Expenditure Printing		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">65470.36</div>	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; text-align: right;">1899.83</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p>			
James Lacy Signature		Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ C C00429084	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee The Best List, Inc.		Date MM / DD / YYYY 08 / 06 / 2007	
Mailing Address 2070 Chain Bridge Rd., suite 520		Amount 4570.65	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.123	
Purpose of Expenditure Lists		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 290648.96			
Full Name (Last, First, Middle, Initial) of Payee The Best List, Inc.		Date MM / DD / YYYY 08 / 06 / 2007	
Mailing Address 2070 Chain Bridge Rd., suite 520		Amount 1079.35	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.124	
Purpose of Expenditure Lists		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 65470.36			
(a) SUBTOTAL of Itemized Independent Expenditures		5650.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date MM / DD / YYYY 05 / 29 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ C C00429084	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Mid America Printing		Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 7</div> </div>	
Mailing Address 2070 Chain Bridge Road, Suite 520		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">6309.93</div>	
<div style="display: flex; justify-content: space-between;"> <div>City Vienna</div> <div>State VA</div> <div>Zip Code 22182</div> </div>		Transaction ID: EDT.EALC.55	
Purpose of Expenditure Printing		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">290648.96</div>	
Full Name (Last, First, Middle, Initial) of Payee Mid America Printing		Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 7</div> </div>	
Mailing Address 2070 Chain Bridge Road, Suite 520		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1490.07</div>	
<div style="display: flex; justify-content: space-between;"> <div>City Vienna</div> <div>State VA</div> <div>Zip Code 22182</div> </div>		Transaction ID: EDT.EALC.56	
Purpose of Expenditure Printing		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">65470.36</div>	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; text-align: right;">7800.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p>			
James Lacy Signature		Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00429084</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Fulfillment Management		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 08</div> <div style="border: 1px solid black; padding: 2px;">D 13</div> <div style="border: 1px solid black; padding: 2px;">Y 2007</div> </div>	
Mailing Address 2070 Chain Bridge Rd., Ste 520		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1395.31</div>	
City Vienna State CA Zip Code 22182		Transaction ID: EDT.EALC.41	
Purpose of Expenditure Mailings		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">290648.96</div>	
Full Name (Last, First, Middle, Initial) of Payee Fulfillment Management		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 08</div> <div style="border: 1px solid black; padding: 2px;">D 13</div> <div style="border: 1px solid black; padding: 2px;">Y 2007</div> </div>	
Mailing Address 2070 Chain Bridge Rd., Ste 520		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">329.50</div>	
City Vienna State CA Zip Code 22182		Transaction ID: EDT.EALC.42	
Purpose of Expenditure Mailings		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">65470.36</div>	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; text-align: right;">1724.81</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 05</div> <div style="border: 1px solid black; padding: 2px;">D 29</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ C C00429084	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Mid America Printing		Date MM / DD / YYYY 08 / 13 / 2007	
Mailing Address 2070 Chain Bridge Road, Suite 520		Amount 2830.60	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.57	
Purpose of Expenditure Printing		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 290648.96			
Full Name (Last, First, Middle, Initial) of Payee Mid America Printing		Date MM / DD / YYYY 08 / 13 / 2007	
Mailing Address 2070 Chain Bridge Road, Suite 520		Amount 668.44	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.58	
Purpose of Expenditure Printing		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 65470.36			
(a) SUBTOTAL of Itemized Independent Expenditures		3499.04	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date MM / DD / YYYY 05 / 29 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ C C00429084	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date M M / D D / Y Y Y Y 0 8 / 1 3 / 2 0 0 7	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount 956.68	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.85	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		290648.96	
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date M M / D D / Y Y Y Y 0 8 / 1 3 / 2 0 0 7	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount 225.92	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.86	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		65470.36	
(a) SUBTOTAL of Itemized Independent Expenditures		1182.60	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ C C00429084	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date MM / DD / YYYY 08 / 13 / 2007	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount 8256.50	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.87	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		290648.96	
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date MM / DD / YYYY 08 / 13 / 2007	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount 1949.75	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.88	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		65470.36	
(a) SUBTOTAL of Itemized Independent Expenditures		10206.25	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date MM / DD / YYYY 05 / 29 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ C C00429084	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 7	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount 10559.46	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.89	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		290648.96	
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 7	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount 2493.58	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.90	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		65470.36	
(a) SUBTOTAL of Itemized Independent Expenditures		13053.04	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00429084</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 08</div> <div style="border: 1px solid black; padding: 2px;">D 20</div> <div style="border: 1px solid black; padding: 2px;">Y 2007</div> </div>	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5835.26</div>	
City Vienna		State VA	
Zip Code 22182		Transaction ID: EDT.EALC.91	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type		<div style="border: 1px solid black; padding: 2px; text-align: center;">003</div>	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
<div style="border: 1px solid black; padding: 2px; text-align: right;">290648.96</div>			
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 08</div> <div style="border: 1px solid black; padding: 2px;">D 20</div> <div style="border: 1px solid black; padding: 2px;">Y 2007</div> </div>	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1377.98</div>	
City Vienna		State VA	
Zip Code 22182		Transaction ID: EDT.EALC.92	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type		<div style="border: 1px solid black; padding: 2px; text-align: center;">003</div>	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
<div style="border: 1px solid black; padding: 2px; text-align: right;">65470.36</div>			
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; text-align: right;">7213.24</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 05</div> <div style="border: 1px solid black; padding: 2px;">D 29</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00429084</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 0 8</div> <div><small>D D</small> 2 0</div> <div><small>Y Y Y Y</small> 2 0 0 7</div> </div>	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">5943.22</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.93	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">290648.96</div>	
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 0 8</div> <div><small>D D</small> 2 0</div> <div><small>Y Y Y Y</small> 2 0 0 7</div> </div>	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1403.47</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.94	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">65470.36</div>	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;">7346.69</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 0 5</div> <div><small>D D</small> 2 9</div> <div><small>Y Y Y Y</small> 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00429084</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date <div style="display: flex; justify-content: space-between;"> <div><small>M</small> <small>M</small> 0 8</div> <div><small>D</small> <small>D</small> 2 7</div> <div><small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small> 2 0 0 7</div> </div>	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">6913.73</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.95	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">290648.96</div>			
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date <div style="display: flex; justify-content: space-between;"> <div><small>M</small> <small>M</small> 0 8</div> <div><small>D</small> <small>D</small> 2 7</div> <div><small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small> 2 0 0 7</div> </div>	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1632.65</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.96	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">65470.36</div>			
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;">8546.38</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date <div style="display: flex; justify-content: space-between;"> <div><small>M</small> <small>M</small> 0 5</div> <div><small>D</small> <small>D</small> 2 9</div> <div><small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small> 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ C C00429084	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Fulfillment Management		Date M M / D D / Y Y Y Y 0 9 / 0 4 / 2 0 0 7	
Mailing Address 2070 Chain Bridge Rd., Ste 520		Amount 3386.97	
City State Zip Code Vienna CA 22182		Transaction ID: EDT.EALC.43	
Purpose of Expenditure Mailings		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		290648.96	
Full Name (Last, First, Middle, Initial) of Payee Fulfillment Management		Date M M / D D / Y Y Y Y 0 9 / 0 4 / 2 0 0 7	
Mailing Address 2070 Chain Bridge Rd., Ste 520		Amount 799.82	
City State Zip Code Vienna CA 22182		Transaction ID: EDT.EALC.44	
Purpose of Expenditure Mailings		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		65470.36	
(a) SUBTOTAL of Itemized Independent Expenditures		4186.79	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00429084 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Direct Response Data		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 09</div> <div style="border: 1px solid black; padding: 2px;">D 05</div> <div style="border: 1px solid black; padding: 2px;">Y 2007</div> </div>	
Mailing Address 2070 Chain Bridge Road, Suite 520		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3381.71</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.35	
Purpose of Expenditure Data Entry		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type		<div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
<div style="border: 1px solid black; padding: 2px; text-align: right;">290648.96</div>			
Full Name (Last, First, Middle, Initial) of Payee Direct Response Data		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 09</div> <div style="border: 1px solid black; padding: 2px;">D 05</div> <div style="border: 1px solid black; padding: 2px;">Y 2007</div> </div>	
Mailing Address 2070 Chain Bridge Road, Suite 520		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">798.58</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.36	
Purpose of Expenditure Data Entry		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type		<div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
<div style="border: 1px solid black; padding: 2px; text-align: right;">65470.36</div>			
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; text-align: right;">4180.29</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 05</div> <div style="border: 1px solid black; padding: 2px;">D 29</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ C C00429084	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Fulfillment Management		Date MM / DD / YYYY 09 / 10 / 2007	
Mailing Address 2070 Chain Bridge Rd., Ste 520		Amount 2437.57	
City State Zip Code Vienna CA 22182		Transaction ID: EDT.EALC.45	
Purpose of Expenditure Mailings		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		290648.96	
Full Name (Last, First, Middle, Initial) of Payee Fulfillment Management		Date MM / DD / YYYY 09 / 10 / 2007	
Mailing Address 2070 Chain Bridge Rd., Ste 520		Amount 575.63	
City State Zip Code Vienna CA 22182		Transaction ID: EDT.EALC.46	
Purpose of Expenditure Mailings		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		65470.36	
(a) SUBTOTAL of Itemized Independent Expenditures		3013.20	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date MM / DD / YYYY 05 / 29 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ C C00429084	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date M M / D D / Y Y Y Y 0 9 / 1 0 / 2 0 0 7	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount 3622.38	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.97	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 290648.96			
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date M M / D D / Y Y Y Y 0 9 / 1 0 / 2 0 0 7	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount 855.41	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.98	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 65470.36			
(a) SUBTOTAL of Itemized Independent Expenditures		4477.79	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ C C00429084	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date M M / D D / Y Y Y Y 0 9 / 1 7 / 2 0 0 7	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount 4044.83	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.99	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		290648.96	
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date M M / D D / Y Y Y Y 0 9 / 1 7 / 2 0 0 7	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount 955.17	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.100	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		65470.36	
(a) SUBTOTAL of Itemized Independent Expenditures		5000.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ C C00429084	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date MM / DD / YYYY 09 / 17 / 2007	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount 3864.51	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.101	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		290648.96	
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date MM / DD / YYYY 09 / 17 / 2007	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount 912.59	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.102	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		65470.36	
(a) SUBTOTAL of Itemized Independent Expenditures		4777.10	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date MM / DD / YYYY 05 / 29 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00429084</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date <div style="display: flex; justify-content: space-between;"> <div><small>M</small> <small>M</small> 09</div> <div><small>D</small> <small>D</small> 18</div> <div><small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small> 2007</div> </div>	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">746.59</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.103	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">290648.96</div>	
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date <div style="display: flex; justify-content: space-between;"> <div><small>M</small> <small>M</small> 09</div> <div><small>D</small> <small>D</small> 18</div> <div><small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small> 2007</div> </div>	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">176.31</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.104	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">65470.36</div>	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;">922.90</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date <div style="display: flex; justify-content: space-between;"> <div><small>M</small> <small>M</small> 05</div> <div><small>D</small> <small>D</small> 29</div> <div><small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small> 2008</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ C C00429084	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 0 7	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount 3747.48	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.105	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		290648.96	
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 0 7	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount 884.96	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.106	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		65470.36	
(a) SUBTOTAL of Itemized Independent Expenditures		4632.44	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ C C00429084	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee The Best List, Inc.		Date M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 0 7	
Mailing Address 2070 Chain Bridge Rd., suite 520		Amount 922.66	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.125	
Purpose of Expenditure Lists		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		290648.96	
Full Name (Last, First, Middle, Initial) of Payee The Best List, Inc.		Date M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 0 7	
Mailing Address 2070 Chain Bridge Rd., suite 520		Amount 217.88	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.126	
Purpose of Expenditure Lists		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		65470.36	
(a) SUBTOTAL of Itemized Independent Expenditures		1140.54	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00429084</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Fulfillment Management		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 0 9</div> <div><small>D D</small> 2 5</div> <div><small>Y Y Y Y</small> 2 0 0 7</div> </div>	
Mailing Address 2070 Chain Bridge Rd., Ste 520		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2606.56</div>	
City State Zip Code Vienna CA 22182		Transaction ID: EDT.EALC.47	
Purpose of Expenditure Mailings		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">290648.96</div>			
Full Name (Last, First, Middle, Initial) of Payee Fulfillment Management		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 0 9</div> <div><small>D D</small> 2 5</div> <div><small>Y Y Y Y</small> 2 0 0 7</div> </div>	
Mailing Address 2070 Chain Bridge Rd., Ste 520		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">615.53</div>	
City State Zip Code Vienna CA 22182		Transaction ID: EDT.EALC.48	
Purpose of Expenditure Mailings		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">65470.36</div>			
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;">3222.09</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 0 5</div> <div><small>D D</small> 2 9</div> <div><small>Y Y Y Y</small> 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ C C00429084	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Mid America Printing		Date M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 7	
Mailing Address 2070 Chain Bridge Road, Suite 520		Amount 3520.08	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.59	
Purpose of Expenditure Printing		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		290648.96	
Full Name (Last, First, Middle, Initial) of Payee Mid America Printing		Date M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 7	
Mailing Address 2070 Chain Bridge Road, Suite 520		Amount 831.25	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.60	
Purpose of Expenditure Printing		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		65470.36	
(a) SUBTOTAL of Itemized Independent Expenditures		4351.33	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ C C00429084	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Mid America Printing		Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 7</div> </div>	
Mailing Address 2070 Chain Bridge Road, Suite 520		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2204.75</div>	
<div style="display: flex; justify-content: space-between;"> <div>City Vienna</div> <div>State VA</div> <div>Zip Code 22182</div> </div>		Transaction ID: EDT.EALC.61	
Purpose of Expenditure Printing		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">290648.96</div>	
Full Name (Last, First, Middle, Initial) of Payee Mid America Printing		Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 7</div> </div>	
Mailing Address 2070 Chain Bridge Road, Suite 520		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">520.65</div>	
<div style="display: flex; justify-content: space-between;"> <div>City Vienna</div> <div>State VA</div> <div>Zip Code 22182</div> </div>		Transaction ID: EDT.EALC.62	
Purpose of Expenditure Printing		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">65470.36</div>	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; text-align: right;">2725.40</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p>			
James Lacy Signature		Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00429084</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 1 0</div> <div><small>D D</small> 0 9</div> <div><small>Y Y Y Y</small> 2 0 0 7</div> </div>	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">4835.34</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.107	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">290648.96</div>			
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 1 0</div> <div><small>D D</small> 0 9</div> <div><small>Y Y Y Y</small> 2 0 0 7</div> </div>	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1141.85</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.108	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">65470.36</div>			
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;">5977.19</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 0 5</div> <div><small>D D</small> 2 9</div> <div><small>Y Y Y Y</small> 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00429084</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Direct Response Data		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 1 0</div> <div><small>D D</small> 1 5</div> <div><small>Y Y Y Y</small> 2 0 0 7</div> </div>	
Mailing Address 2070 Chain Bridge Road, Suite 520		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">4302.22</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.37	
Purpose of Expenditure Data Entry		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">290648.96</div>			
Full Name (Last, First, Middle, Initial) of Payee Direct Response Data		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 1 0</div> <div><small>D D</small> 1 5</div> <div><small>Y Y Y Y</small> 2 0 0 7</div> </div>	
Mailing Address 2070 Chain Bridge Road, Suite 520		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1015.95</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.38	
Purpose of Expenditure Data Entry		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">65470.36</div>			
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;">5318.17</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy _____ Signature		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 0 5</div> <div><small>D D</small> 2 9</div> <div><small>Y Y Y Y</small> 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ C C00429084	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee The Best List, Inc.		Date M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 7	
Mailing Address 2070 Chain Bridge Rd., suite 520		Amount 4647.21	
City Vienna State VA Zip Code 22182		Transaction ID: EDT.EALC.127	
Purpose of Expenditure Lists		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 290648.96			
Full Name (Last, First, Middle, Initial) of Payee The Best List, Inc.		Date M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 7	
Mailing Address 2070 Chain Bridge Rd., suite 520		Amount 1097.43	
City Vienna State VA Zip Code 22182		Transaction ID: EDT.EALC.128	
Purpose of Expenditure Lists		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 65470.36			
(a) SUBTOTAL of Itemized Independent Expenditures		5744.64	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ C C00429084	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 7	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount 4092.47	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.109	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		290648.96	
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 7	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount 966.43	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.110	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		65470.36	
(a) SUBTOTAL of Itemized Independent Expenditures		5058.90	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00429084</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 7</div> </div>	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">10218.05</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.111	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">290648.96</div>	

Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 7</div> </div>	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2412.96</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.112	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">65470.36</div>	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">12631.01</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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

James Lacy _____

Signature

Date

M M / D D / Y Y Y Y
0 5 / 2 9 / 2 0 0 8

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00429084</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 3</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 7</div> </div>	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5905.45</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.113	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">290648.96</div>	
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 3</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 7</div> </div>	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1394.55</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.114	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">65470.36</div>	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; text-align: right;">7300.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 0 5</div> <div style="border: 1px solid black; padding: 2px;">D D 2 9</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ C C00429084	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 7	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount 5862.69	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.115	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 290648.96			
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 7	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount 1384.46	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.116	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 65470.36			
(a) SUBTOTAL of Itemized Independent Expenditures		7247.15	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00429084 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 7</div> </div>	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">22811.26</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.117	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type		<div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
<div style="border: 1px solid black; padding: 2px; display: inline-block;">290648.96</div>			
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 7</div> </div>	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">5386.81</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.118	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type		<div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
<div style="border: 1px solid black; padding: 2px; display: inline-block;">65470.36</div>			
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;">28198.07</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ C C00429084	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 7	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount 6960.17	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.119	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 290648.96			
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics		Date M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 7	
Mailing Address 2070 Chain Bridge Rd., Suite 520		Amount 1643.62	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.120	
Purpose of Expenditure Mailing Services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 65470.36			
(a) SUBTOTAL of Itemized Independent Expenditures		8603.79	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ C C00429084	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Mid America Printing		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 1 1</div> <div><small>D D</small> 0 5</div> <div><small>Y Y Y Y</small> 2 0 0 7</div> </div>	
Mailing Address 2070 Chain Bridge Road, Suite 520		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2736.36</div>	
<div style="display: flex; justify-content: space-between;"> <div>City Vienna</div> <div>State VA</div> <div>Zip Code 22182</div> </div>		Transaction ID: EDT.EALC.63	
Purpose of Expenditure Printing		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">290648.96</div>	
Full Name (Last, First, Middle, Initial) of Payee Mid America Printing		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 1 1</div> <div><small>D D</small> 0 5</div> <div><small>Y Y Y Y</small> 2 0 0 7</div> </div>	
Mailing Address 2070 Chain Bridge Road, Suite 520		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">646.18</div>	
<div style="display: flex; justify-content: space-between;"> <div>City Vienna</div> <div>State VA</div> <div>Zip Code 22182</div> </div>		Transaction ID: EDT.EALC.64	
Purpose of Expenditure Printing		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">65470.36</div>	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; text-align: right;">3382.54</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p>			
James Lacy Signature		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 0 5</div> <div><small>D D</small> 2 9</div> <div><small>Y Y Y Y</small> 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00429084</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Mid America Printing		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 1 1</div> <div><small>D D</small> 0 7</div> <div><small>Y Y Y Y</small> 2 0 0 7</div> </div>	
Mailing Address 2070 Chain Bridge Road, Suite 520		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">5567.76</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.65 Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Purpose of Expenditure Printing		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">290648.96</div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Full Name (Last, First, Middle, Initial) of Payee Mid America Printing		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 1 1</div> <div><small>D D</small> 0 7</div> <div><small>Y Y Y Y</small> 2 0 0 7</div> </div>	
Mailing Address 2070 Chain Bridge Road, Suite 520		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1314.81</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.66 Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Purpose of Expenditure Printing		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">65470.36</div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;">6882.57</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 0 5</div> <div><small>D D</small> 2 9</div> <div><small>Y Y Y Y</small> 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00429084</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Mid America Printing		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 1 1</div> <div><small>D D</small> 1 2</div> <div><small>Y Y Y Y</small> 2 0 0 7</div> </div>	
Mailing Address 2070 Chain Bridge Road, Suite 520		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">4044.83</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.67 Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Purpose of Expenditure Printing		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">290648.96</div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Full Name (Last, First, Middle, Initial) of Payee Mid America Printing		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 1 1</div> <div><small>D D</small> 1 2</div> <div><small>Y Y Y Y</small> 2 0 0 7</div> </div>	
Mailing Address 2070 Chain Bridge Road, Suite 520		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">955.17</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.68 Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Purpose of Expenditure Printing		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">65470.36</div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;">5000.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 0 5</div> <div><small>D D</small> 2 9</div> <div><small>Y Y Y Y</small> 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00429084</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Mid America Printing		Date <div style="display: flex; justify-content: space-between;"> <div><small>M</small> <small>M</small> 1 1</div> <div><small>D</small> <small>D</small> 1 5</div> <div><small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small> 2 0 0 7</div> </div>	
Mailing Address 2070 Chain Bridge Road, Suite 520		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1617.93</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.69	
Purpose of Expenditure Printing		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">290648.96</div>			
Full Name (Last, First, Middle, Initial) of Payee Mid America Printing		Date <div style="display: flex; justify-content: space-between;"> <div><small>M</small> <small>M</small> 1 1</div> <div><small>D</small> <small>D</small> 1 5</div> <div><small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small> 2 0 0 7</div> </div>	
Mailing Address 2070 Chain Bridge Road, Suite 520		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">382.07</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.70	
Purpose of Expenditure Printing		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">65470.36</div>			
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;">2000.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p>			
James Lacy Signature		Date <div style="display: flex; justify-content: space-between;"> <div><small>M</small> <small>M</small> 0 5</div> <div><small>D</small> <small>D</small> 2 9</div> <div><small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small> 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00429084</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Mid America Printing		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 1 1</div> <div><small>D D</small> 1 9</div> <div><small>Y Y Y Y</small> 2 0 0 7</div> </div>	
Mailing Address 2070 Chain Bridge Road, Suite 520		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">3532.78</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.71	
Purpose of Expenditure Printing		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">290648.96</div>			
Full Name (Last, First, Middle, Initial) of Payee Mid America Printing		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 1 1</div> <div><small>D D</small> 1 9</div> <div><small>Y Y Y Y</small> 2 0 0 7</div> </div>	
Mailing Address 2070 Chain Bridge Road, Suite 520		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">834.25</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.72	
Purpose of Expenditure Printing		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">65470.36</div>			
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;">4367.03</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 0 5</div> <div><small>D D</small> 2 9</div> <div><small>Y Y Y Y</small> 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ C C00429084	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee The Best List, Inc.		Date M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 7	
Mailing Address 2070 Chain Bridge Rd., suite 520		Amount 6096.10	
City Vienna State VA Zip Code 22182		Transaction ID: EDT.EALC.129	
Purpose of Expenditure Lists		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 290648.96			
Full Name (Last, First, Middle, Initial) of Payee The Best List, Inc.		Date M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 7	
Mailing Address 2070 Chain Bridge Rd., suite 520		Amount 1439.57	
City Vienna State VA Zip Code 22182		Transaction ID: EDT.EALC.130	
Purpose of Expenditure Lists		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 65470.36			
(a) SUBTOTAL of Itemized Independent Expenditures		7535.67	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00429084</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Mid America Printing		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 1 2</div> <div><small>D D</small> 0 4</div> <div><small>Y Y Y Y</small> 2 0 0 7</div> </div>	
Mailing Address 2070 Chain Bridge Road, Suite 520		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">5812.41</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.73 Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Purpose of Expenditure Printing		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">290648.96</div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Full Name (Last, First, Middle, Initial) of Payee Mid America Printing		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 1 2</div> <div><small>D D</small> 0 4</div> <div><small>Y Y Y Y</small> 2 0 0 7</div> </div>	
Mailing Address 2070 Chain Bridge Road, Suite 520		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1372.58</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.74 Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Purpose of Expenditure Printing		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">65470.36</div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;">7184.99</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 0 5</div> <div><small>D D</small> 2 9</div> <div><small>Y Y Y Y</small> 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00429084 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Mid America Printing		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D D 2 6</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 7</div> </div>	
Mailing Address 2070 Chain Bridge Road, Suite 520		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">32183.20</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.75	
Purpose of Expenditure Printing		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type		<div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
<div style="border: 1px solid black; padding: 2px; text-align: right;">290648.96</div>			
Full Name (Last, First, Middle, Initial) of Payee Mid America Printing		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D D 2 6</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 7</div> </div>	
Mailing Address 2070 Chain Bridge Road, Suite 520		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">7599.96</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.76	
Purpose of Expenditure Printing		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type		<div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
<div style="border: 1px solid black; padding: 2px; text-align: right;">65470.36</div>			
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; text-align: right;">39783.16</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy _____ Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 0 5</div> <div style="border: 1px solid black; padding: 2px;">D D 2 9</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) The Legacy Committee Political Action Committee		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00429084</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee The Best List, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y 1 2 / 2 7 / 2 0 0 7</div> </div>	
Mailing Address 2070 Chain Bridge Rd., suite 520		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">3332.94</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.131	
Purpose of Expenditure Lists		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Hillary Clinton		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">290648.96</div>			
Full Name (Last, First, Middle, Initial) of Payee The Best List, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y 1 2 / 2 7 / 2 0 0 7</div> </div>	
Mailing Address 2070 Chain Bridge Rd., suite 520		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">787.06</div>	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.132	
Purpose of Expenditure Lists		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">65470.36</div>			
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;">4120.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;">335525.65</div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 8</div> </div>	

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

The Legacy Committee Political Action Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Mike Pence Committee

Nature of Debt (Purpose):

Mailing Address PO Box 408

City State ZIP Code
Anderson IN 46015

Outstanding Balance Beginning This Period

500.00

Transaction ID: PAY:D:44

Amount Incurred This Period

0.00

Payment This Period

500.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Norm Coleman For U.S. SenateNature of Debt (Purpose):
Political Contribution

Mailing Address 7300 Hudson Blvd., Suite 270A

City State ZIP Code
St. Paul MN 55104

Outstanding Balance Beginning This Period

500.00

Transaction ID: PAY:D:45

Amount Incurred This Period

0.00

Payment This Period

500.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ▶

0.00

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

0.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)..... ▶

0.00

Form/Schedule: **F3XA** Allocate Independent Expenditures/Revise Totals
Transaction ID: