

# 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  
America's Foundation

ADDRESS (number and street) 1155 21st Street NW  
Suite 300  
 Check if different than previously reported. (ACC)  
Washington DC 20036

2. **FEC IDENTIFICATION NUMBER** C00305797  
**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 05 01 2006 through 05 31 2006

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 MEREDITH G. KELLEY

Signature of Treasurer Electronically Filed by MEREDITH G. KELLEY Date 06 20 2006

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
America's Foundation

Report Covering the Period: From: 

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		44545.60
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	12422.36									
(c) Total Receipts (from Line 19) .....	14704.83	92221.73								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	27127.19	136767.33								
7. Total Disbursements (from Line 31) .....	26206.52	135846.66								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	920.67	920.67								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> 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**

Write or Type Committee Name  
America's Foundation

Report Covering the Period: From:    To:

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	2000.00	13000.00
(ii) Unitemized .....	202.50	635.50
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	2202.50	13635.50
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	12500.00	77000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	14702.50	90635.50
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	970.64
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	2.33	615.59
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)) .....	14704.83	92221.73
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	14704.83	92221.73

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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.....	19463.98	85504.12
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	19463.98	85504.12
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	6742.54	31742.54
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	1000.00
(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	1000.00
29. Other Disbursements.....	0.00	17600.00
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))..	26206.52	135846.66
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	26206.52	135846.66

**DETAILED SUMMARY PAGE**  
of Disbursements

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) .....	14702.50	90635.50
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	1000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	14702.50	89635.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	19463.98	85504.12
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	970.64
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	19463.98	84533.48

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 29
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
America's Foundation

**A.** Full Name (Last, First, Middle Initial)  
MR. JOEL GILLEY

Mailing Address 6298 DOMARRAY STREET

City State Zip Code  
COOPERSBURG PA 18036-8935

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

Name of Employer ANDESA STRATEGIES, INC. Occupation EXECUTIVE VICE PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2006

Transaction ID: SA11.10157757

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
PRINCE HOUSEHOLD L.L.C.

Mailing Address 1660 INTERNATIONAL DRIVE #470

City State Zip Code  
MC LEAN VA 22102-4855

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: SA11.10157732

Amount of Each Receipt this Period  
1000.00

PARTNERSHIP ATTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. ERIK PRINCE

Mailing Address 1660 INTERNATIONAL DRIVE SUITE 470

City State Zip Code  
MC LEAN VA 22102-4848

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

Name of Employer THE PRINCE GROUP Occupation OWNER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2006

Transaction ID: SA11.10157737

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

[MEMO ITEM]

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2000.00
<b>TOTAL</b> This Period (last page this line number only) .....	2000.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 7 / 29</span>
	(check only one)
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
America's Foundation

Full Name (Last, First, Middle Initial) <b>A. JOHNSON &amp; JOHNSON EMPLOYEES'</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address GOOD GOVERNMENT FUND ONE JOHNSON & JOHNSON PLAZA		Transaction ID: SA11.10157773
City NEW BRUNSWICK	State NJ	Amount of Each Receipt this Period 2500.00
Zip Code 08933-7204		CONTRIBUTION
FEC ID number of contributing federal political committee. <b>C</b> C00010983		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) <b>B. THE GLAXOSMITHKLINE PAC</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address FIVE MOORE DRIVE		Transaction ID: SA11.10157743
City RESEARCH TRIANGLE	State NC	Amount of Each Receipt this Period 5000.00
Zip Code 27709		CONTRIBUTION
FEC ID number of contributing federal political committee. <b>C</b> C00199703		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C. U. P. S. PAC</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 55 GLENLAKE PKWY, N. E.		Transaction ID: SA11.10157786
City ATLANTA	State GA	Amount of Each Receipt this Period 5000.00
Zip Code 30328-3474		CONTRIBUTION
FEC ID number of contributing federal political committee. <b>C</b> C00064766		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	12500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	12500.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 8 / 29	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full) America's Foundation
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Full Name (Last, First, Middle Initial) A. Bryn Mawr Trust Company	
Mailing Address 801 Lancaster Avenue	
City Bryn Mawr	State PA
Zip Code 19010	
FEC ID number of contributing federal political committee. C	
Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00

Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2006
Transaction ID: 10001
Amount of Each Receipt this Period 2.33
Interest Income

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2.33
<b>TOTAL</b> This Period (last page this line number only) .....	2.33



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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
America's Foundation

Full Name (Last, First, Middle Initial) <b>A. Susan B. Lewis</b>		<b>Transaction ID: 161</b> Date of Disbursement 05 / 31 / 2006
Mailing Address 416 Berkley Road		Amount of Each Disbursement this Period 759.28
City Haverford	State PA Zip Code 19041	
Purpose of Disbursement Net Payroll		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. American Express</b>		<b>Transaction ID: 107</b> Date of Disbursement 05 / 26 / 2006
Mailing Address Suite 0002		Amount of Each Disbursement this Period 570.79
City Chicago	State IL Zip Code 60679-0002	
Purpose of Disbursement Credit Card Payment		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. American Express</b>		<b>Transaction ID: 111</b> Date of Disbursement 05 / 26 / 2006
Mailing Address Suite 0002		Amount of Each Disbursement this Period 66.62
City Chicago	State IL Zip Code 60679-0002	
Purpose of Disbursement Finance Charge		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

**[MEMO ITEM]**  
(SEE ABOVE - 05/26/06 AME-  
RICAN EXPRESS)

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1330.07
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 10 / 29

<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)  
America's Foundation

<b>A. Amtrak</b> Full Name (Last, First, Middle Initial) Mailing Address 30th and Market St, Fl. 5 City Philadelphia State PA Zip Code 19102 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Transaction ID: 117 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6 Amount of Each Disbursement this Period 11.10 [MEMO ITEM] (SEE ABOVE - 05/26/06 AMERICAN EXPRESS)
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Category/ Type

<b>B. Amtrak</b> Full Name (Last, First, Middle Initial) Mailing Address 30th and Market St, Fl. 5 City Philadelphia State PA Zip Code 19102 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Transaction ID: 118 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6 Amount of Each Disbursement this Period 54.00 [MEMO ITEM] (SEE ABOVE - 05/26/06 AMERICAN EXPRESS)
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Category/ Type

<b>C. Amtrak</b> Full Name (Last, First, Middle Initial) Mailing Address 30th and Market St, Fl. 5 City Philadelphia State PA Zip Code 19102 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Transaction ID: 119 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6 Amount of Each Disbursement this Period 22.00 [MEMO ITEM] (SEE ABOVE - 05/26/06 AMERICAN EXPRESS)
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Category/ Type

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 11 / 29

<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)  
America's Foundation

Full Name (Last, First, Middle Initial) <b>A. AOL Online Service</b>		<b>Transaction ID: 108</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address PO Box 10810		Amount of Each Disbursement this Period 23.90
City Herndon State VA Zip Code 20172	Purpose of Disbursement Internet Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> (SEE ABOVE - 05/26/06 AMERICAN EXPRESS)

Full Name (Last, First, Middle Initial) <b>B. AOL Online Service</b>		<b>Transaction ID: 110</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address PO Box 10810		Amount of Each Disbursement this Period 23.90
City Herndon State VA Zip Code 20172	Purpose of Disbursement Internet Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> (SEE ABOVE - 05/26/06 AMERICAN EXPRESS)

Full Name (Last, First, Middle Initial) <b>C. AOL Online Service</b>		<b>Transaction ID: 121</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address PO Box 10810		Amount of Each Disbursement this Period 25.90
City Herndon State VA Zip Code 20172	Purpose of Disbursement Internet Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> (SEE ABOVE - 05/26/06 AMERICAN EXPRESS)

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 12 / 29

<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)  
America's Foundation

Full Name (Last, First, Middle Initial) <b>A. AOL Online Service</b>		<b>Transaction ID:</b> 122 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address PO Box 10810		Amount of Each Disbursement this Period 25.90
City Herndon State VA Zip Code 20172	Purpose of Disbursement Internet Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> (SEE ABOVE - 05/26/06 AMERICAN EXPRESS)

Full Name (Last, First, Middle Initial) <b>B. CompUSA</b>		<b>Transaction ID:</b> 123 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 8357 Leesburg Pike		Amount of Each Disbursement this Period 57.74
City Vienna State VA Zip Code 22182	Purpose of Disbursement Office Supplies Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> (SEE ABOVE - 05/26/06 AMERICAN EXPRESS)

Full Name (Last, First, Middle Initial) <b>C. Fedex</b>		<b>Transaction ID:</b> 112 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 700 Downington Pike #105		Amount of Each Disbursement this Period 19.55
City West Chester State PA Zip Code 19380	Purpose of Disbursement Postage/Delivery Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> (SEE ABOVE - 05/26/06 AMERICAN EXPRESS)

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 29

<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)  
America's Foundation

Full Name (Last, First, Middle Initial) <b>A. Fedex</b>		Transaction ID: 113 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 700 Downington Pike #105		Amount of Each Disbursement this Period 17.84
City West Chester State PA Zip Code 19380	Purpose of Disbursement Postage/Delivery Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> (SEE ABOVE - 05/26/06 AMERICAN EXPRESS)

Full Name (Last, First, Middle Initial) <b>B. Fedex</b>		Transaction ID: 115 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 700 Downington Pike #105		Amount of Each Disbursement this Period 17.38
City West Chester State PA Zip Code 19380	Purpose of Disbursement Postage/Delivery Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> (SEE ABOVE - 05/26/06 AMERICAN EXPRESS)

Full Name (Last, First, Middle Initial) <b>C. Fedex</b>		Transaction ID: 116 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 700 Downington Pike #105		Amount of Each Disbursement this Period 18.96
City West Chester State PA Zip Code 19380	Purpose of Disbursement Postage/Delivery Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> (SEE ABOVE - 05/26/06 AMERICAN EXPRESS)

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

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

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

FOR LINE NUMBER: (check only one)

<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)  
America's Foundation

Full Name (Last, First, Middle Initial) <b>A. Fedex</b>		Transaction ID: 120 Date of Disbursement MM / DD / YYYY 05 / 26 / 2006
Mailing Address 700 Downington Pike #105		Amount of Each Disbursement this Period 16.30
City West Chester State PA Zip Code 19380	Purpose of Disbursement Postage/Delivery Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] (SEE ABOVE - 05/26/06 AMERICAN EXPRESS)

Full Name (Last, First, Middle Initial) <b>B. Fedex</b>		Transaction ID: 125 Date of Disbursement MM / DD / YYYY 05 / 26 / 2006
Mailing Address 700 Downington Pike #105		Amount of Each Disbursement this Period 15.41
City West Chester State PA Zip Code 19380	Purpose of Disbursement Postage/Delivery Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] (SEE ABOVE - 05/26/06 AMERICAN EXPRESS)

Full Name (Last, First, Middle Initial) <b>C. Fedex</b>		Transaction ID: 126 Date of Disbursement MM / DD / YYYY 05 / 26 / 2006
Mailing Address 700 Downington Pike #105		Amount of Each Disbursement this Period 16.98
City West Chester State PA Zip Code 19380	Purpose of Disbursement Postage/Delivery Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] (SEE ABOVE - 05/26/06 AMERICAN EXPRESS)

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 15 / 29

<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)  
America's Foundation

<p><b>A. Staples</b></p> <p>Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 9230 Old Keene Mill Road</p> <p>City State Zip Code Burke VA 22015</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID:</b> 109 <b>Date of Disbursement</b> 05 / 26 / 2006</p> <p>Amount of Each Disbursement this Period 54.97</p> <p><b>[MEMO ITEM]</b> (SEE ABOVE - 05/26/06 AMERICAN EXPRESS)</p>
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<p><b>B. Verizon Online</b></p> <p>Full Name (Last, First, Middle Initial) Verizon Online</p> <p>Mailing Address 7901 E. Riverside Dr. #1-100</p> <p>City State Zip Code Austin TX 78744</p> <p>Purpose of Disbursement Internet</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID:</b> 114 <b>Date of Disbursement</b> 05 / 26 / 2006</p> <p>Amount of Each Disbursement this Period 41.17</p> <p><b>[MEMO ITEM]</b> (SEE ABOVE - 05/26/06 AMERICAN EXPRESS)</p>
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<p><b>C. Verizon Online</b></p> <p>Full Name (Last, First, Middle Initial) Verizon Online</p> <p>Mailing Address 7901 E. Riverside Dr. #1-100</p> <p>City State Zip Code Austin TX 78744</p> <p>Purpose of Disbursement Internet</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID:</b> 124 <b>Date of Disbursement</b> 05 / 26 / 2006</p> <p>Amount of Each Disbursement this Period 41.17</p> <p><b>[MEMO ITEM]</b> (SEE ABOVE - 05/26/06 AMERICAN EXPRESS)</p>
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<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p> <p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p>0.00</p>
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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
America's Foundation

Full Name (Last, First, Middle Initial) <b>A. American Heritage Credit Union</b>		<b>Transaction ID: 129</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address P.O. Box 67001		Amount of Each Disbursement this Period 6091.50
City Harrisburg State PA Zip Code 17106-7001	Purpose of Disbursement Credit Card Payment Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. American Heritage Credit Union</b>		<b>Transaction ID: 135</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address P.O. Box 67001		Amount of Each Disbursement this Period 153.27
City Harrisburg State PA Zip Code 17106-7001	Purpose of Disbursement Finance Charge Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

**[MEMO ITEM]**  
(SEE ABOVE - 05/26/06 AMERICAN HERITAGE F.C.U.)

Full Name (Last, First, Middle Initial) <b>C. AOL Online Service</b>		<b>Transaction ID: 130</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address PO Box 10810		Amount of Each Disbursement this Period 23.90
City Herndon State VA Zip Code 20172	Purpose of Disbursement Internet Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

**[MEMO ITEM]**  
(SEE ABOVE - 05/26/06 AMERICAN HERITAGE F.C.U.)

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6091.50
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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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)  
America's Foundation

Full Name (Last, First, Middle Initial) <b>A. AOL Online Service</b>		<b>Transaction ID:</b> 134 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address PO Box 10810		Amount of Each Disbursement this Period 23.90
City Herndon State VA Zip Code 20172	[MEMO ITEM] (SEE ABOVE - 05/26/06 AMERICAN HERITAGE F.C.U.)	
Purpose of Disbursement Internet Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. AOL Online Service</b>		<b>Transaction ID:</b> 137 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address PO Box 10810		Amount of Each Disbursement this Period 23.90
City Herndon State VA Zip Code 20172	[MEMO ITEM] (SEE ABOVE - 05/26/06 AMERICAN HERITAGE F.C.U.)	
Purpose of Disbursement Internet Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. AOL Online Service</b>		<b>Transaction ID:</b> 141 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address PO Box 10810		Amount of Each Disbursement this Period 25.90
City Herndon State VA Zip Code 20172	[MEMO ITEM] (SEE ABOVE - 05/26/06 AMERICAN HERITAGE F.C.U.)	
Purpose of Disbursement Internet Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 18 / 29

<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)  
America's Foundation

Full Name (Last, First, Middle Initial) <b>A. AOL Online Service</b>		<b>Transaction ID:</b> 143 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address PO Box 10810		Amount of Each Disbursement this Period 25.90
City Herndon State VA Zip Code 20172	Category/ Type	
Purpose of Disbursement Internet		[MEMO ITEM] (SEE ABOVE - 05/26/06 AMERICAN HERITAGE F.C.U.)
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. AOL Online Service</b>		<b>Transaction ID:</b> 149 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address PO Box 10810		Amount of Each Disbursement this Period 25.90
City Herndon State VA Zip Code 20172	Category/ Type	
Purpose of Disbursement Internet		[MEMO ITEM] (SEE ABOVE - 05/26/06 AMERICAN HERITAGE F.C.U.)
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. CompUSA</b>		<b>Transaction ID:</b> 144 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 8357 Leesburg Pike		Amount of Each Disbursement this Period 79.38
City Vienna State VA Zip Code 22182	Category/ Type	
Purpose of Disbursement Office Supplies		[MEMO ITEM] (SEE ABOVE - 05/26/06 AMERICAN HERITAGE F.C.U.)
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 19 / 29

<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)  
America's Foundation

Full Name (Last, First, Middle Initial) <b>A. Hirst Photography</b>		<b>Transaction ID: 131</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 281 Greenridge Road		Amount of Each Disbursement this Period 524.00
City State Zip Code Glenmoore PA 19343	Purpose of Disbursement Fundraising Event Cost	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> (SEE ABOVE - 05/26/06 AMERICAN HERITAGE F.C.U.)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Hirst Photography</b>		<b>Transaction ID: 133</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 281 Greenridge Road		Amount of Each Disbursement this Period 365.00
City State Zip Code Glenmoore PA 19343	Purpose of Disbursement Fundraising Event Cost	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> (SEE ABOVE - 05/26/06 AMERICAN HERITAGE F.C.U.)
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Hirst Photography</b>		<b>Transaction ID: 138</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 281 Greenridge Road		Amount of Each Disbursement this Period 724.00
City State Zip Code Glenmoore PA 19343	Purpose of Disbursement Fundraising Event Cost	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> (SEE ABOVE - 05/26/06 AMERICAN HERITAGE F.C.U.)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 29

<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)  
America's Foundation

Full Name (Last, First, Middle Initial) <b>A. Hirst Photography</b>		Transaction ID: 146 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 281 Greenridge Road		Amount of Each Disbursement this Period 835.00
City State Zip Code Glenmoore PA 19343	Purpose of Disbursement Fundraising Event Cost	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> (SEE ABOVE - 05/26/06 AMERICAN HERITAGE F.C.U.)

Full Name (Last, First, Middle Initial) <b>B. Logan Square</b>		Transaction ID: 142 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 2 Logan Square		Amount of Each Disbursement this Period 11.00
City State Zip Code Philadelphia PA 19103	Purpose of Disbursement Travel	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> (SEE ABOVE - 05/26/06 AMERICAN HERITAGE F.C.U.)

Full Name (Last, First, Middle Initial) <b>C. MicroCenter</b>		Transaction ID: 145 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 3089 Nutley Street		Amount of Each Disbursement this Period 249.48
City State Zip Code Fairfax VA 22031	Purpose of Disbursement Office Supplies	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> (SEE ABOVE - 05/26/06 AMERICAN HERITAGE F.C.U.)

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
America's Foundation

**A. Office Depot**

Full Name (Last, First, Middle Initial)  
America's Foundation

Mailing Address 11001 Lee Highway

City Fairfax State VA Zip Code 22030

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

**Transaction ID:** 148  
Date of Disbursement  
05 / 26 / 2006

Amount of Each Disbursement this Period  
24.21

**[MEMO ITEM]**  
(SEE ABOVE - 05/26/06 AMERICAN HERITAGE F.C.U.)

**B. The Caucus Room**

Full Name (Last, First, Middle Initial)

Mailing Address 401 9th Street Northwest Lbby

City Washington State DC Zip Code 20004

Purpose of Disbursement Fundraising Event Cost

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

**Transaction ID:** 136  
Date of Disbursement  
05 / 26 / 2006

Amount of Each Disbursement this Period  
2117.00

**[MEMO ITEM]**  
(SEE ABOVE - 05/26/06 AMERICAN HERITAGE F.C.U.)

**C. U. S. Senate Restaurants**

Full Name (Last, First, Middle Initial)

Mailing Address 1st & C Streets, NE  
Dirksen Senate Bldg

City Washington State DC Zip Code 20510

Purpose of Disbursement Meals and Meeting Expenses

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

**Transaction ID:** 132  
Date of Disbursement  
05 / 26 / 2006

Amount of Each Disbursement this Period  
195.90

**[MEMO ITEM]**  
(SEE ABOVE - 05/26/06 AMERICAN HERITAGE F.C.U.)

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

0.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
America's Foundation

Full Name (Last, First, Middle Initial) <b>A. U. S. Senate Restaurants</b>		<b>Transaction ID: 139</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 1st & C Streets, NE Dirksen Senate Bldg		Amount of Each Disbursement this Period 523.22
City Washington State DC Zip Code 20510	<b>[MEMO ITEM]</b> (SEE ABOVE - 05/26/06 AMERICAN HERITAGE F.C.U.)	
Purpose of Disbursement Meals and Meeting Expenses Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. American Heritage Credit Union</b>		<b>Transaction ID: 150</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address P.O. Box 67001		Amount of Each Disbursement this Period 435.68
City Harrisburg State PA Zip Code 17106-7001	<b>[MEMO ITEM]</b> (SEE ABOVE - 05/26/06 AMERICAN HERITAGE F.C.U.)	
Purpose of Disbursement Credit Card Payment Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. American Heritage Credit Union</b>		<b>Transaction ID: 154</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address P.O. Box 67001		Amount of Each Disbursement this Period 22.21
City Harrisburg State PA Zip Code 17106-7001	<b>[MEMO ITEM]</b> (SEE ABOVE - 05/26/06 AMERICAN HERITAGE F.C.U.)	
Purpose of Disbursement Finance Charge Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	435.68
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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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)  
America's Foundation

Full Name (Last, First, Middle Initial) <b>A. AOL Online Service</b>		<b>Transaction ID:</b> 151 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address PO Box 10810		Amount of Each Disbursement this Period 23.90
City Herndon State VA Zip Code 20172	Purpose of Disbursement Internet Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> (SEE ABOVE - 05/26/06 AMERICAN HERITAGE F.C.U.)

Full Name (Last, First, Middle Initial) <b>B. AOL Online Service</b>		<b>Transaction ID:</b> 155 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address PO Box 10810		Amount of Each Disbursement this Period 23.90
City Herndon State VA Zip Code 20172	Purpose of Disbursement Internet Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> (SEE ABOVE - 05/26/06 AMERICAN HERITAGE F.C.U.)

Full Name (Last, First, Middle Initial) <b>C. AOL Online Service</b>		<b>Transaction ID:</b> 156 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address PO Box 10810		Amount of Each Disbursement this Period 25.90
City Herndon State VA Zip Code 20172	Purpose of Disbursement Internet Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> (SEE ABOVE - 05/26/06 AMERICAN HERITAGE F.C.U.)

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
America's Foundation

**A. Office Depot**

Full Name (Last, First, Middle Initial)  
Mailing Address 11816 Spectrum Centre

City Reston State VA Zip Code 20190

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

**Transaction ID: 157**  
Date of Disbursement  
05 / 26 / 2006

Amount of Each Disbursement this Period  
56.42

**[MEMO ITEM]**  
(SEE ABOVE - 05/26/06 AMERICAN HERITAGE F.C.U.)

**B. Staples**

Full Name (Last, First, Middle Initial)  
Mailing Address 9230 Old Keene Mill Road

City Burke State VA Zip Code 22015

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

**Transaction ID: 152**  
Date of Disbursement  
05 / 26 / 2006

Amount of Each Disbursement this Period  
173.35

**[MEMO ITEM]**  
(SEE ABOVE - 05/26/06 AMERICAN HERITAGE F.C.U.)

**C. Bankcard MTOT Discount**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 189

City Hagerstown State MD Zip Code 21741-0189

Purpose of Disbursement Merchant Credit Card Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

**Transaction ID: 164**  
Date of Disbursement  
05 / 01 / 2006

Amount of Each Disbursement this Period  
45.00

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

45.00

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
America's Foundation

Full Name (Last, First, Middle Initial) <b>A. Barna Advisory Services, PC</b>		<b>Transaction ID: 159</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 270 S. Woodmont Drive		Amount of Each Disbursement this Period 3500.00
City Downingtown State PA Zip Code 19335	Purpose of Disbursement Accounting Fees Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>B. Bryn Mawr Trust Company</b>		<b>Transaction ID: 104</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6
Mailing Address 801 Lancaster Avenue		Amount of Each Disbursement this Period 32.51
City Bryn Mawr State PA Zip Code 19010	Purpose of Disbursement Bank Service Charges Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>C. Bryn Mawr Trust Company</b>		<b>Transaction ID: 160</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 801 Lancaster Avenue		Amount of Each Disbursement this Period 75.00
City Bryn Mawr State PA Zip Code 19010	Purpose of Disbursement Bank Service Charges Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3607.51
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
America's Foundation

Full Name (Last, First, Middle Initial) <b>A. Paychex, Inc</b>		<b>Transaction ID: 105</b> Date of Disbursement MM / DD / YYYY 05 / 10 / 2006
Mailing Address Valley Forge Corporate Center 1100 Adams Avenue		Amount of Each Disbursement this Period 111.00
City Norristown	State PA	
Zip Code 19403	Purpose of Disbursement Payroll Processing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: _____ District: _____	

Full Name (Last, First, Middle Initial) <b>B. Paychex, Inc</b>		<b>Transaction ID: 162</b> Date of Disbursement MM / DD / YYYY 05 / 31 / 2006
Mailing Address Valley Forge Corporate Center 1100 Adams Avenue		Amount of Each Disbursement this Period 329.40
City Norristown	State PA	
Zip Code 19403	Purpose of Disbursement Payroll Taxes	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: _____ District: _____	

Full Name (Last, First, Middle Initial) <b>C. Paychex, Inc</b>		<b>Transaction ID: 163</b> Date of Disbursement MM / DD / YYYY 05 / 31 / 2006
Mailing Address Valley Forge Corporate Center 1100 Adams Avenue		Amount of Each Disbursement this Period 18.06
City Norristown	State PA	
Zip Code 19403	Purpose of Disbursement Workers Comp Insurance	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: _____ District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>458.46</b>
<b>TOTAL</b> 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)  
America's Foundation

Full Name (Last, First, Middle Initial) <b>A. Pemcor, Inc.</b>		<b>Transaction ID: 101</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6
Mailing Address 30 Clipper Road		Amount of Each Disbursement this Period 3962.81
City West Conshohocken	State PA Zip Code 19428	
Purpose of Disbursement Printing & Reproduction		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Sprint</b>		<b>Transaction ID: 106</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address PO Box 17621		Amount of Each Disbursement this Period 1317.98
City Baltimore	State MD Zip Code 21297-1621	
Purpose of Disbursement Telephone Expenses		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Union League of Philadelphia</b>		<b>Transaction ID: 103</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 140 South Broad Street		Amount of Each Disbursement this Period 1980.78
City Philadelphia	State PA Zip Code 19102-3083	
Purpose of Disbursement Fundraising Event Costs		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7261.57
<b>TOTAL</b> 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)  
America's Foundation

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		<b>Transaction ID: 127</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address P.O. Box 41556		Amount of Each Disbursement this Period 218.56
City Philadelphia State PA Zip Code 19101-1556	Purpose of Disbursement Telephone Expenses Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Wachovia Bank</b>		<b>Transaction ID: 165</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6
Mailing Address 1753 Pinnacle Drive		Amount of Each Disbursement this Period 15.63
City Mclean State VA Zip Code 22102	Purpose of Disbursement Bank Service Charges Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

234.19

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

19463.98

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
America's Foundation

Full Name (Last, First, Middle Initial) <b>A. Raese for Senate</b>		<b>Transaction ID: 102</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address PO Box 262		Amount of Each Disbursement this Period 5000.00	
City Morgantown State WV Zip Code 26507	Purpose of Disbursement Campaign Contribution - Primary Candidate Name John Raese Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Reynolds for Congress</b>		<b>Transaction ID: 128</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 3 / 2 0 0 6	
Mailing Address PO Box 15388		Amount of Each Disbursement this Period 1000.00	
City Rochester State NY Zip Code 14615	Purpose of Disbursement Campaign Contribution - Primary Candidate Name Thomas Reynolds Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 26	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Steele for Maryland, Inc.</b>		<b>Transaction ID: 158</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 6	
Mailing Address 150 South Street, Suite 100		Amount of Each Disbursement this Period 742.54	
City Annapolis State MD Zip Code 21401	Purpose of Disbursement Campaign Contribution - Primary Candidate Name Michael Steele Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6742.54
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	6742.54