

**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

Freshmen PAC

ADDRESS (number and street)

PO Box 1635

☐Check if different  
than previously  
reported. (ACC)

Alexandria

VA

22313

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00383901

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

Steven Ross

Signature of Treasurer

Electronically Filed by Steven Ross

Date

01

30

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  
Freshmen PAC

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 <span>2007</span>		38170.19
(b) Cash on Hand at Beginning of Reporting Period .....	49993.41	
(c) Total Receipts (from Line 19) .....	123376.60	280620.76
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	173370.01	318790.95
7. Total Disbursements (from Line 31) .....	128433.14	273854.08
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	44936.87	44936.87
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) .....	26082.52	

☒ 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  
Freshmen PAC

Report Covering the Period:

From:

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

To:

M M D D Y Y W 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	19310.00	52841.00
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	90142.48	207844.37
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➤	109452.48	260685.37
(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) ..... ➤	109452.48	260685.37
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.) .....	13924.12	19935.39
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)) .....	123376.60	280620.76
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	123376.60	280620.76

**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.....	117933.14	248354.08
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	117933.14	248354.08
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10500.00	25500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) 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))..	128433.14	273854.08
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	128433.14	273854.08

**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) .....	109452.48	260685.37
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	109452.48	260685.37
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	117933.14	248354.08
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	117933.14	248354.08

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

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

FOR LINE NUMBER: PAGE 6 / 60

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freshmen PAC

**A.**

Full Name (Last, First, Middle Initial)

Josephine Abercrombie

Mailing Address PO Box 68

City

Versailles

State

KY

Zip Code

40383

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Pin Oak Stud LLC

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

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

Transaction ID: 70925.C209340

Amount of Each Receipt this Period

600.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Josephine Abercrombie

Mailing Address PO Box 68

City

Versailles

State

KY

Zip Code

40383

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Pin Oak Stud LLC

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3150.00

Date of Receipt

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

Transaction ID: 80117.C211227

Amount of Each Receipt this Period

1050.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

John B. Austin

Mailing Address PO Box 18420

City

Oklahoma City

State

OK

Zip Code

73154

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Owner-Austin Builder

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 5 / 2 0 0 7

Transaction ID: 71119.C210726

Amount of Each Receipt this Period

300.00

Receipt

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

1950.00

**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 / 60

(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)

Freshmen PAC

**A.**

Full Name (Last, First, Middle Initial)

Elliot 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  
RetiredOccupation  
Retired

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	2	/	2	0	0	7

Transaction ID: 70925.C209341

Amount of Each Receipt this Period

500.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Virginia L. Bladorn

Mailing Address 804 N Pine St

City

Janesville

State

WI

Zip Code

53548

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	/	0	6	/	2	0	0	7

Transaction ID: 80117.C212856

Amount of Each Receipt this Period

50.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Ralph Bochsler

Mailing Address 41210 Kingston Lyons Dr SE

City

Stayton

State

OR

Zip Code

97383

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
North Santiam Paving CoOccupation  
Construction

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

115.00

Date of Receipt

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

Transaction ID: 80117.C211258

Amount of Each Receipt this Period

115.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

665.00

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 / 60

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freshmen PAC

**A.**

Full Name (Last, First, Middle Initial)

Ralph Bochsler

Mailing Address 41210 Kingston Lyons Dr SE

City

Stayton

State

OR

Zip Code

97383

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
North Santiam Paving Co

Occupation  
Construction

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: 80117.C212829

Amount of Each Receipt this Period

125.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Darrell Boyd

Mailing Address 6816 Cheyenne Cir

City

Minneapolis

State

MN

Zip Code

55439

FEC 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 7 / 0 5 / 2 0 0 7

Transaction ID: 70925.C210180

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Darrell Boyd

Mailing Address 6816 Cheyenne Cir

City

Minneapolis

State

MN

Zip Code

55439

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

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

Transaction ID: 70925.C209356

Amount of Each Receipt this Period

150.00

Receipt

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

425.00

**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 / 60

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freshmen PAC

**A.**

Full Name (Last, First, Middle Initial)

Darrell Boyd

Mailing Address 6816 Cheyenne Cir

City

Minneapolis

State

MN

Zip Code

55439

FEC 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 / 2 7 / 2 0 0 7

Transaction ID: 80117.C211255

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Stewart M. Butler

Mailing Address 18135 N Rimrock Rd

City

Hayden

State

ID

Zip Code

83835

FEC 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 / 2 9 / 2 0 0 7

Transaction ID: 71119.C210734

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Ella Byrd

Mailing Address 813 Mill St

City

Springdale

State

AR

Zip Code

72764

FEC 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 7 / 0 5 / 2 0 0 7

Transaction ID: 70925.C209415

Amount of Each Receipt this Period

50.00

Receipt

**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  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 60

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freshmen PAC

**A.**

Full Name (Last, First, Middle Initial)

Ella Byrd

Mailing Address 813 Mill St

City

Springdale

State

AR

Zip Code

72764

FEC 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 / 0 5 / 2 0 0 7

Transaction ID: 71119.C210783

Amount of Each Receipt this Period

50.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Chae W. Chon

Mailing Address 4339 Olaloa St

City

Honolulu

State

HI

Zip Code

96818

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Aiea Recycling Llc

Occupation  
Owner

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 / 0 6 / 2 0 0 7

Transaction ID: 80117.C211230

Amount of Each Receipt this Period

300.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Naomi R. Clady

Mailing Address 1140 Lavina Ave

City

Bucyrus

State

OH

Zip Code

44820

FEC 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 7 / 1 1 / 2 0 0 7

Transaction ID: 70925.C209366

Amount of Each Receipt this Period

100.00

Receipt

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 60

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freshmen PAC

**A.**

Full Name (Last, First, Middle Initial)

Naomi R. Clady

Mailing Address 1140 Lavina Ave

City

Bucyrus

State

OH

Zip Code

44820

FEC 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 / 2 4 / 2 0 0 7

Transaction ID: 71119.C210740

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Ricky Condrey

Mailing Address 762 Island Point Dr

City

Lake Providence

State

LA

Zip Code

71254

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Farmer

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 / 2 2 / 2 0 0 7

Transaction ID: 70925.C210463

Amount of Each Receipt this Period

500.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Michael Corrado

Mailing Address 13097 Corner Rd Apt H

City

Perkasie

State

PA

Zip Code

18944

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Advanced Biologics Llc

Occupation  
Chief Scientific Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 71119.C210729

Amount of Each Receipt this Period

200.00

Receipt

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

800.00

**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 / 60

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freshmen PAC

**A.**

Full Name (Last, First, Middle Initial)

Alvin F. Cross

Mailing Address 1646 Beaucaire Dr

City

Saint Louis

State

MO

Zip Code

63122

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

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 7 / 1 2 / 2 0 0 7

Transaction ID: 70925.C209368

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Dorothy Daynard

Mailing Address 25191 Buckskin Dr

City

Laguna Hills

State

CA

Zip Code

92653

FEC 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 7 / 1 8 / 2 0 0 7

Transaction ID: 70925.C209351

Amount of Each Receipt this Period

200.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Dorothy Daynard

Mailing Address 25191 Buckskin Dr

City

Laguna Hills

State

CA

Zip Code

92653

FEC 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 / 2 3 / 2 0 0 7

Transaction ID: 70925.C209352

Amount of Each Receipt this Period

200.00

Receipt

**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 13 / 60

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freshmen PAC

**A.**

Full Name (Last, First, Middle Initial)

Dorothy Daynard

Mailing Address 25191 Buckskin Dr

City

Laguna Hills

State

CA

Zip Code

92653

FEC 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 6 / 2 0 0 7

Transaction ID: 80117.C211232

Amount of Each Receipt this Period

200.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Dorothy Daynard

Mailing Address 25191 Buckskin Dr

City

Laguna Hills

State

CA

Zip Code

92653

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

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

Transaction ID: 80117.C211233

Amount of Each Receipt this Period

200.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Eileen Durante

Mailing Address 2027 Acadia Trace

City

Westlake

State

OH

Zip Code

44145

FEC 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 7 / 1 3 / 2 0 0 7

Transaction ID: 70925.C209349

Amount of Each Receipt this Period

200.00

Receipt

**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 14 / 60

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freshmen PAC

**A.**

Full Name (Last, First, Middle Initial)

Eileen Durante

Mailing Address 2027 Acadia Trace

City

Westlake

State

OH

Zip Code

44145

FEC 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 1 / 2 0 0 7

Transaction ID: 80117.C212938

Amount of Each Receipt this Period

25.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Clara Edminson

Mailing Address 1409 Surrey Rd

City

Troy

State

OH

Zip Code

45373

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75.00

Date of Receipt

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

Transaction ID: 70925.C210275

Amount of Each Receipt this Period

75.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Clara Edminson

Mailing Address 1409 Surrey Rd

City

Troy

State

OH

Zip Code

45373

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150.00

Date of Receipt

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

Transaction ID: 70925.C210469

Amount of Each Receipt this Period

75.00

Receipt

**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 15 / 60

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freshmen PAC

**A.**

Full Name (Last, First, Middle Initial)

Clara Edminson

Mailing Address 1409 Surrey Rd

City

Troy

State

OH

Zip Code

45373

FEC 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 1 / 0 6 / 2 0 0 7

Transaction ID: 80117.C211317

Amount of Each Receipt this Period

75.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

George Eidem

Mailing Address 1015 4th Ave NW

City

Rochester

State

MN

Zip Code

55901

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

160.00

Date of Receipt

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

Transaction ID: 70925.C209498

Amount of Each Receipt this Period

40.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

George Eidem

Mailing Address 1015 4th Ave NW

City

Rochester

State

MN

Zip Code

55901

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

195.00

Date of Receipt

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

Transaction ID: 80117.C211467

Amount of Each Receipt this Period

35.00

Receipt

**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 16 / 60

(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)

Freshmen PAC

**A.**

Full Name (Last, First, Middle Initial)

George Eidem

Mailing Address 1015 4th Ave NW

City

Rochester

State

MN

Zip Code

55901

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

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

Transaction ID: 80117.C211468

Amount of Each Receipt this Period

35.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

C. T. Fuller

Mailing Address PO Box 32

City

Catasauqua

State

PA

Zip Code

18032

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self EmployedOccupation  
Horse Breeder

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	/	2	3	/	2	0	0	7

Transaction ID: 70925.C209345

Amount of Each Receipt this Period

250.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Martha P. Giese

Mailing Address 20 Framingham Ln

City

Pittsford

State

NY

Zip Code

14534

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
0	7	/	1	9	/	2	0	0	7

Transaction ID: 70925.C209389

Amount of Each Receipt this Period

100.00

Receipt

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 17 / 60

(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)

Freshmen PAC

**A.**

Full Name (Last, First, Middle Initial)

Martha P. Giese

Mailing Address 20 Framingham Ln

City

Pittsford

State

NY

Zip Code

14534

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

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

Transaction ID: 80117.C211311

Amount of Each Receipt this Period

80.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

David K. Gregory

Mailing Address 3624 Lovers Ln

City

Dallas

State

TX

Zip Code

75225

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-EmployedOccupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2150.00

Date of Receipt

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

Transaction ID: 80117.C211226

Amount of Each Receipt this Period

1500.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Willard Gulley

Mailing Address 8842 Cove Point Ln

City

Knoxville

State

TN

Zip Code

37922

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
0	7	/	3	1	/	2	0	0	7

Transaction ID: 70925.C210258

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

1680.00

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 / 60

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freshmen PAC

**A.**

Full Name (Last, First, Middle Initial)

Willard Gulley

Mailing Address 8842 Cove Point Ln

City

Knoxville

State

TN

Zip Code

37922

FEC 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 9 / 1 0 / 2 0 0 7

Transaction ID: 71022.C210696

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Palmer Heenan

Mailing Address 807 Park Ln

City

Grosse Pointe

State

MI

Zip Code

48230

FEC 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 / 2 2 / 2 0 0 7

Transaction ID: 70925.C210467

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Palmer Heenan

Mailing Address 807 Park Ln

City

Grosse Pointe

State

MI

Zip Code

48230

FEC 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 / 0 9 / 2 0 0 7

Transaction ID: 80117.C211385

Amount of Each Receipt this Period

50.00

Receipt

**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 19 / 60

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freshmen PAC

**A.**

Full Name (Last, First, Middle Initial)

Bruce Helm

Mailing Address 180 N Riata St

City

Gilbert

State

AZ

Zip Code

85234

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bh Drywall And Stucco Inc

Occupation

Self Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

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

Transaction ID: 80117.C212819

Amount of Each Receipt this Period

450.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Andrew Jagoda

Mailing Address 14 Paradise Dr

City

Scarsdale

State

NY

Zip Code

10583

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Katten Muchin Zavis Rosen-  
man

Occupation

Attorney

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 / 2 2 / 2 0 0 7

Transaction ID: 70925.C210465

Amount of Each Receipt this Period

200.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Andrew Jagoda

Mailing Address 14 Paradise Dr

City

Scarsdale

State

NY

Zip Code

10583

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Katten Muchin Zavis Rosen-  
man

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 71119.C210727

Amount of Each Receipt this Period

200.00

Receipt

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

850.00

**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 / 60

(check only one)

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

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

NAME OF COMMITTEE (In Full)

Freshmen PAC

**A.**

Full Name (Last, First, Middle Initial)

Howell C. Jones, Jr.

Mailing Address PO Box 40

City

Sheldon

State

SC

Zip Code

29941

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self EmployedOccupation  
Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

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

Transaction ID: 70925.C209385

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Howell C. Jones, Jr.

Mailing Address PO Box 40

City

Sheldon

State

SC

Zip Code

29941

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self EmployedOccupation  
Engineer

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	/	3	1	/	2	0	0	7

Transaction ID: 70925.C209386

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Howell C. Jones, Jr.

Mailing Address PO Box 40

City

Sheldon

State

SC

Zip Code

29941

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self EmployedOccupation  
Engineer

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	/	2	2	/	2	0	0	7

Transaction ID: 70925.C210468

Amount of Each Receipt this Period

100.00

Receipt

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 21 / 60

(check only one)

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

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

NAME OF COMMITTEE (In Full)

Freshmen PAC

**A.**

Full Name (Last, First, Middle Initial)

Kathleen Keith

Mailing Address 137 Rametto Rd

City

Santa Barbara

State

CA

Zip Code

93108

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 ▼

150.00

Date of Receipt

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

Transaction ID: 70925.C210277

Amount of Each Receipt this Period

50.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Kathleen Keith

Mailing Address 137 Rametto Rd

City

Santa Barbara

State

CA

Zip Code

93108

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 0 / 2 5 / 2 0 0 7

Transaction ID: 71119.C210732

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Nicholas Mastroianni Jr.

Mailing Address 33 Walnut St

City

Milford

State

MA

Zip Code

01757-2063

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Milford Orthopaedics

Occupation

Orthopedic 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 1 / 2 7 / 2 0 0 7

Transaction ID: 80117.C211303

Amount of Each Receipt this Period

100.00

Receipt

**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 22 / 60

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freshmen PAC

**A.**

Full Name (Last, First, Middle Initial)

Mary Lou Mathiowetz

Mailing Address 30817 County Rd 24

City

Sleepy Eye

State

MN

Zip Code

56085

FEC 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 / 3 1 / 2 0 0 7

Transaction ID: 71119.C210829

Amount of Each Receipt this Period

50.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Bradley May

Mailing Address 2509 Kennelly Ct

City

Burnsville

State

MN

Zip Code

55337

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cub Foods

Occupation  
Cashier

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 7 / 0 5 / 2 0 0 7

Transaction ID: 70925.C209346

Amount of Each Receipt this Period

200.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Bradley May

Mailing Address 2509 Kennelly Ct

City

Burnsville

State

MN

Zip Code

55337

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cub Foods

Occupation  
Cashier

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

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

Transaction ID: 80117.C211243

Amount of Each Receipt this Period

160.00

Receipt

**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 23 / 60

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freshmen PAC

**A.**

Full Name (Last, First, Middle Initial)

Glen S. Mcdaniel

Mailing Address 780 Linda Flora Dr

City

Los Angeles

State

CA

Zip Code

90049

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 0 / 2 9 / 2 0 0 7

Transaction ID: 71119.C210760

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Karen S. McKechnie

Mailing Address 1003 Williamsburg Dr

City

Charleston

State

IL

Zip Code

61920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

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 7 / 3 1 / 2 0 0 7

Transaction ID: 70925.C209494

Amount of Each Receipt this Period

45.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Robert McKinney

Mailing Address 91 200 Kauhi St

City

Kapolei

State

HI

Zip Code

96707

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
R And H Machinery

Occupation

CEO

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 4 / 2 0 0 7

Transaction ID: 80117.C211397

Amount of Each Receipt this Period

50.00

Receipt

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

195.00

**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 24 / 60

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freshmen PAC

**A.**

Full Name (Last, First, Middle Initial)

Muriel Moe

Mailing Address 5300 S Main St Apt 31

City

Cedar Falls

State

IA

Zip Code

50631

FEC 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 / 1 0 / 2 0 0 7

Transaction ID: 71022.C210686

Amount of Each Receipt this Period

200.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Muriel Moe

Mailing Address 5300 S Main St Apt 31

City

Cedar Falls

State

IA

Zip Code

50631

FEC 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 7 / 2 0 0 7

Transaction ID: 80117.C212836

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

L. Morris

Mailing Address 102 Sweetbriar PI

City

Plano

State

IL

Zip Code

60545

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: 71119.C211184

Amount of Each Receipt this Period

40.00

Receipt

**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  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 60

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freshmen PAC

**A.**

Full Name (Last, First, Middle Initial)

Levonnie Mulrooney

Mailing Address 1700 Lexington Ave S

City

Saint Paul

State

MN

Zip Code

55118

FEC 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 9 / 2 0 0 7

Transaction ID: 71119.C210738

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Linda A. Nall

Mailing Address 8609 Grover PI

City

Shreveport

State

LA

Zip Code

71115

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LSU HSC Shreveport

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

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

Transaction ID: 70925.C209343

Amount of Each Receipt this Period

300.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Linda A. Nall

Mailing Address 8609 Grover PI

City

Shreveport

State

LA

Zip Code

71115

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LSU HSC Shreveport

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

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

Transaction ID: 70925.C209344

Amount of Each Receipt this Period

300.00

Receipt

**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 26 / 60

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freshmen PAC

**A.**

Full Name (Last, First, Middle Initial)

Allen D. Ohrstrom

Mailing Address PO Box 446

City

The Plains

State

VA

Zip Code

20198

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation

Writer

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 6 / 2 0 0 7

Transaction ID: 80117.C211352

Amount of Each Receipt this Period

50.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Allen D. Ohrstrom

Mailing Address PO Box 446

City

The Plains

State

VA

Zip Code

20198

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation

Writer

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 / 0 6 / 2 0 0 7

Transaction ID: 80117.C212857

Amount of Each Receipt this Period

50.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

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  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

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

Transaction ID: 70925.C209339

Amount of Each Receipt this Period

900.00

Receipt

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

1000.00

**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 27 / 60

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freshmen PAC

**A.**

Full Name (Last, First, Middle Initial)

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  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2150.00

Date of Receipt

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

Transaction ID: 71119.C210725

Amount of Each Receipt this Period

750.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

L. I. Rigg

Mailing Address 725 Beacom Ln

City

Merion Station

State

PA

Zip Code

19066

FEC 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 / 0 9 / 2 0 0 7

Transaction ID: 80117.C211249

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Rainer Schildknecht

Mailing Address 211 Woodlawn Ave

City

Winnetka

State

IL

Zip Code

60093

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Murphy-Jahn Inc.

Occupation  
Architect

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 / 0 7 / 2 0 0 7

Transaction ID: 70925.C210267

Amount of Each Receipt this Period

300.00

Receipt

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

1200.00

**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 28 / 60

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freshmen PAC

**A.**

Full Name (Last, First, Middle Initial)

Bill Schmitter

Mailing Address 7540 Algonquin Dr

City

Cincinnati

State

OH

Zip Code

45243

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation

Real Estate

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 7 / 0 5 / 2 0 0 7

Transaction ID: 70925.C209342

Amount of Each Receipt this Period

400.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Edwin P. Schrank

Mailing Address 209 Harmony Hills Dr

City

Akron

State

OH

Zip Code

44321

FEC 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 5 / 2 0 0 7

Transaction ID: 71119.C210748

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Joan E. Shaffer

Mailing Address 816 Garson Ave

City

Rochester

State

NY

Zip Code

14609

FEC 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 1 / 0 6 / 2 0 0 7

Transaction ID: 80117.C211244

Amount of Each Receipt this Period

150.00

Receipt

**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 29 / 60

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freshmen PAC

**A.**

Full Name (Last, First, Middle Initial)

Clyde Smith

Mailing Address 517 Section Line St

City

Malvern

State

AR

Zip Code

72104

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Disabled Vet

Occupation

Not Employed

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 8 / 2 0 0 7

Transaction ID: 70925.C209380

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Clyde Smith

Mailing Address 517 Section Line St

City

Malvern

State

AR

Zip Code

72104

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Disabled Vet

Occupation

Not Employed

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 7 / 2 0 0 7

Transaction ID: 80117.C212963

Amount of Each Receipt this Period

25.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Duane Smith

Mailing Address PO Box 81

City

Felt

State

OK

Zip Code

73937

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self - Employed

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 80117.C212823

Amount of Each Receipt this Period

200.00

Receipt

**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 30 / 60

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freshmen PAC

**A.**

Full Name (Last, First, Middle Initial)

James E. Smith

Mailing Address 421 Vincent Ave

City

Metairie

State

LA

Zip Code

70005

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: 80117.C211228

Amount of Each Receipt this Period

1000.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Ray H. Smith

Mailing Address 228 Lakeside Cir

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 ▼

300.00

Date of Receipt

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

Transaction ID: 70925.C209384

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Olga M. Storm

Mailing Address 11635 Saddlebrook Cir

City

Freeland

State

MI

Zip Code

48623

FEC 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 7 / 1 8 / 2 0 0 7

Transaction ID: 70925.C209350

Amount of Each Receipt this Period

200.00

Receipt

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

1300.00

**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 31 / 60

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freshmen PAC

**A.**

Full Name (Last, First, Middle Initial)

Olga M. Storm

Mailing Address 11635 Saddlebrook Cir

City

Freeland

State

MI

Zip Code

48623

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

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 1 / 0 6 / 2 0 0 7

Transaction ID: 80117.C211318

Amount of Each Receipt this Period

75.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

William Terhune

Mailing Address 15925 E Shore Dr

City

Lynnwood

State

WA

Zip Code

98087

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Tect Aerospace Corp

Occupation  
Tool Maker

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 / 2 7 / 2 0 0 7

Transaction ID: 80117.C211231

Amount of Each Receipt this Period

300.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Marlys E. Thedinger

Mailing Address 3000 Ashland Ave

City

Saint Joseph

State

MO

Zip Code

64506

FEC 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 / 3 1 / 2 0 0 7

Transaction ID: 71119.C210736

Amount of Each Receipt this Period

150.00

Receipt

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

525.00

**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 / 60

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freshmen PAC

**A.**

Full Name (Last, First, Middle Initial)

Norman Thoms

Mailing Address 5420 SE 37th St

City

Tecumseh

State

KS

Zip Code

66542

FEC 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 / 2 7 / 2 0 0 7

Transaction ID: 80117.C211428

Amount of Each Receipt this Period

50.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Frank Tooby

Mailing Address 326 Grant Ave

City

Palo Alto

State

CA

Zip Code

94306

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Law Offices Of Norton Too-  
by

Occupation  
Law Officer

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 7 / 0 3 / 2 0 0 7

Transaction ID: 70925.C209357

Amount of Each Receipt this Period

125.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Alvin Turken

Mailing Address 525 Foothill Rd

City

Beverly Hills

State

CA

Zip Code

90210

FEC 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 / 2 7 / 2 0 0 7

Transaction ID: 70925.C210566

Amount of Each Receipt this Period

150.00

Receipt

**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 33 / 60

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freshmen PAC

**A.**

Full Name (Last, First, Middle Initial)

Barbara C. Walker

Mailing Address 110 Arch St Apt 24

City

Keene

State

NH

Zip Code

03431-2166

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 0 / 2 5 / 2 0 0 7

Transaction ID: 71119.C210731

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

John H. Ware, IV

Mailing Address 209 Delaware Ave  
PO Box 341

City

Oxford

State

PA

Zip Code

19363

FEC 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 8 / 2 0 0 7

Transaction ID: 70925.C209382

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

John H. Ware, IV

Mailing Address 209 Delaware Ave  
PO Box 341

City

Oxford

State

PA

Zip Code

19363

FEC 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 Y  
0 8 / 0 7 / 2 0 0 7

Transaction ID: 70925.C210270

Amount of Each Receipt this Period

100.00

Receipt

**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  
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 60

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freshmen PAC

**A.**

Full Name (Last, First, Middle Initial)

John H. Ware, IV

Mailing Address 209 Delaware Ave  
PO Box 341

City State Zip Code  
Oxford PA 19363

FEC 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 6 / 2 0 0 7

Transaction ID: 80117.C211270

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

John H. Ware, IV

Mailing Address 209 Delaware Ave  
PO Box 341

City State Zip Code  
Oxford PA 19363

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

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

Transaction ID: 80117.C212841

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

John Wells

Mailing Address 417 Rehabilitation Way Apt

City State Zip Code  
Woburn MA 01801

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID: 71119.C210724

Amount of Each Receipt this Period

1500.00

Receipt

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

1700.00

**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 / 60

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freshmen PAC

**A.**

Full Name (Last, First, Middle Initial)

Deborah B. Williams

Mailing Address 5519 Wake Academy Dr

City

Raleigh

State

NC

Zip Code

27603

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 Y  
1 1 / 0 6 / 2 0 0 7

Transaction ID: 80117.C211267

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Deborah B. Williams

Mailing Address 5519 Wake Academy Dr

City

Raleigh

State

NC

Zip Code

27603

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 1 / 2 7 / 2 0 0 7

Transaction ID: 80117.C211268

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

William R. Wilson

Mailing Address 1853 Page Pl

City

Malvern

State

PA

Zip Code

19355

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

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

Transaction ID: 70925.C209373

Amount of Each Receipt this Period

100.00

Receipt

**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 36 / 60

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freshmen PAC

**A.**

Full Name (Last, First, Middle Initial)

William R. Wilson

Mailing Address 1853 Page Pl

City

Malvern

State

PA

Zip Code

19355

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

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

Transaction ID: 80117.C211242

Amount of Each Receipt this Period

160.00

Receipt

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

160.00

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

19310.00

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

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

FOR LINE NUMBER: PAGE 37 / 60

(check only one)

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

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NAME OF COMMITTEE (In Full)

Freshmen PAC

**A.**

Full Name (Last, First, Middle Initial)  
TMA List Brokerage & Management Inc.

Mailing Address 12021 Sunset Hills Rd Ste 350

City State Zip Code  
Reston VA 20190-5838

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6309.40

Date of Receipt

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

Transaction ID: 70925.C209338

Amount of Each Receipt this Period

320.00

Other Receipt

NOTE: List Rental @ Mkt  
Value

**B.**

Full Name (Last, First, Middle Initial)  
TMA List Brokerage & Management Inc.

Mailing Address 12021 Sunset Hills Rd Ste 350

City State Zip Code  
Reston VA 20190-5838

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9375.44

Date of Receipt

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

Transaction ID: 71022.C210722

Amount of Each Receipt this Period

3066.04

Other Receipt

NOTE: List Rental @ Mkt  
Value

**C.**

Full Name (Last, First, Middle Initial)  
TMA List Brokerage & Management Inc.

Mailing Address 12021 Sunset Hills Rd Ste 350

City State Zip Code  
Reston VA 20190-5838

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

17322.41

Date of Receipt

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

Transaction ID: 80117.C211225

Amount of Each Receipt this Period

7946.97

Other Receipt

NOTE: List Rental @ Mkt  
Value

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

11333.01

**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 / 60

(check only one)

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

Freshmen PAC

**A.**Full Name (Last, First, Middle Initial)  
TMA List Brokerage & Management Inc.

Mailing Address 12021 Sunset Hills Rd Ste 350

City	State	Zip Code
Reston	VA	20190-5838

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 ▼

19891.48

Date of Receipt

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

Transaction ID: 80117.C212821

Amount of Each Receipt this Period

2569.07

Other Receipt

NOTE: List Rental @ Mkt  
Value

SUBTOTAL of Receipts This Page (optional) .....

2569.07

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

13902.08

# **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 39 / 60

<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)  
Freshmen PAC

**A.**

Full Name (Last, First, Middle Initial)  
American Express

Mailing Address PO 53852

City Phoenix State AZ Zip Code 85072-

Purpose of Disbursement  
PAC Credit Card Processing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 70925.E729

Date of Disbursement

/   /

Amount of Each Disbursement this Period

PAC CREDIT CARD PROCESSING

**B.**

Full Name (Last, First, Middle Initial)  
American Express

Mailing Address PO 53852

City Phoenix State AZ Zip Code 85072-

Purpose of Disbursement  
PAC Credit Card Processing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 70925.E730

Date of Disbursement

/   /

Amount of Each Disbursement this Period

PAC CREDIT CARD PROCESSING

**C.**

Full Name (Last, First, Middle Initial)  
American Express

Mailing Address PO 53852

City Phoenix State AZ Zip Code 85072-

Purpose of Disbursement  
PAC Credit Card Processing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 70925.E732

Date of Disbursement

/   /

Amount of Each Disbursement this Period

PAC CREDIT CARD PROCESSING

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

**127.79**

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 40 / 60

<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)  
Freshmen PAC

<b>A.</b> Full Name (Last, First, Middle Initial) American Express Mailing Address PO 53852	<b>Transaction ID:</b> 70925.E733 <b>Date of Disbursement</b> <div> <div>08</div> <div>20</div> <div>2007</div> </div>
City Phoenix State AZ Zip Code 85072- Purpose of Disbursement PAC Credit Card Processing 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>Amount of Each Disbursement this Period</b> <div>9.10</div> <b>PAC CREDIT CARD PROCESSING</b>
<b>B.</b> Full Name (Last, First, Middle Initial) American Express Mailing Address PO 53852 City Phoenix State AZ Zip Code 85072- Purpose of Disbursement PAC Credit Card Processing 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>Transaction ID:</b> 71022.E740 <b>Date of Disbursement</b> <div> <div>09</div> <div>14</div> <div>2007</div> </div> <b>Amount of Each Disbursement this Period</b> <div>4.50</div> <b>PAC CREDIT CARD PROCESSING</b>
<b>C.</b> Full Name (Last, First, Middle Initial) American Express Mailing Address PO 53852 City Phoenix State AZ Zip Code 85072- Purpose of Disbursement PAC Credit Card Processing 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>Transaction ID:</b> 71022.E741 <b>Date of Disbursement</b> <div> <div>09</div> <div>18</div> <div>2007</div> </div> <b>Amount of Each Disbursement this Period</b> <div>11.37</div> <b>PAC CREDIT CARD PROCESSING</b>

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

**24.97**

**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)

PAGE 41 / 60

<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)  
Freshmen PAC

<b>A.</b> Full Name (Last, First, Middle Initial) American Express	<b>Transaction ID:</b> 71119.E746 <b>Date of Disbursement</b>																				
Mailing Address PO 53852	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	5		2	0	0	7												
City Phoenix State AZ Zip Code 85072-	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Credit Card Processing	<table border="1"> <tr> <td colspan="10">4.50</td> </tr> </table>	4.50																			
4.50																					
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) ▼																				
PAC CREDIT CARD PROCESSING																					
<b>B.</b> Full Name (Last, First, Middle Initial) American Express	<b>Transaction ID:</b> 71119.E747 <b>Date of Disbursement</b>																				
Mailing Address PO 53852	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	8		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	8		2	0	0	7												
City Phoenix State AZ Zip Code 85072-	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Credit Card Processing	<table border="1"> <tr> <td colspan="10">0.65</td> </tr> </table>	0.65																			
0.65																					
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) ▼																				
PAC CREDIT CARD PROCESSING																					
<b>C.</b> Full Name (Last, First, Middle Initial) American Express	<b>Transaction ID:</b> 80117.E767 <b>Date of Disbursement</b>																				
Mailing Address PO 53852	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	4		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	4		2	0	0	7												
City Phoenix State AZ Zip Code 85072-	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Credit Card Processing	<table border="1"> <tr> <td colspan="10">4.50</td> </tr> </table>	4.50																			
4.50																					
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) ▼																				
PAC CREDIT CARD PROCESSING																					

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

9.65

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 42 / 60

<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)  
Freshmen PAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address PO 53852</p> <p>City Phoenix State AZ Zip Code 85072-</p> <p>Purpose of Disbursement PAC Credit Card Processing</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> 80117.E768</p> <p>Date of Disbursement  <div> <div>11</div> <div>19</div> <div>2007</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>125.13</div> </p> <p>PAC CREDIT CARD PROCESSING</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address PO 53852</p> <p>City Phoenix State AZ Zip Code 85072-</p> <p>Purpose of Disbursement PAC Credit Card Processing</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> 80117.E774</p> <p>Date of Disbursement  <div> <div>12</div> <div>14</div> <div>2007</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>4.50</div> </p> <p>PAC CREDIT CARD PROCESSING</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address PO 53852</p> <p>City Phoenix State AZ Zip Code 85072-</p> <p>Purpose of Disbursement PAC Credit Card Processing</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> 80117.E775</p> <p>Date of Disbursement  <div> <div>12</div> <div>18</div> <div>2007</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>20.65</div> </p> <p>PAC CREDIT CARD PROCESSING</p>

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

**150.28**

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

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)  
Freshmen PAC

FEC Schedule B ( Form 3X) (Revised 02/2003)

# **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 44 / 60

<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)  
Freshmen PAC

A.

Full Name (Last, First, Middle Initial)  
Direct Mail Processors Inc.

Mailing Address 1150 Conrad Court

City Hagerstown State MD Zip Code 21740-

Purpose of Disbursement  
PAC Contribution Processing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 71022.E737

Date of Disbursement

10 / 09 / 2007

Amount of Each Disbursement this Period

1336.07

PAC CONTRIBUTION PROCESSI-  
NG

B.

Full Name (Last, First, Middle Initial)  
Direct Mail Processors Inc.

Mailing Address 1150 Conrad Court

City Hagerstown State MD Zip Code 21740-

Purpose of Disbursement  
PAC BRM Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 80117.E763

Date of Disbursement

12 / 06 / 2007

Amount of Each Disbursement this Period

1020.00

PAC BRM POSTAGE

C.

Full Name (Last, First, Middle Initial)  
Direct Mail Processors Inc.

Mailing Address 1150 Conrad Court

City Hagerstown State MD Zip Code 21740-

Purpose of Disbursement  
PAC Contribution Processing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 80117.E762

Date of Disbursement

12 / 06 / 2007

Amount of Each Disbursement this Period

711.60

PAC CONTRIBUTION PROCESSI-  
NG

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

3067.67

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 45 / 60

<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)  
Freshmen PAC**A.**Full Name (Last, First, Middle Initial)  
Koch & Hoos LLC

Mailing Address PO Box 1154

City Alexandria State VA Zip Code 22313-1154

Purpose of Disbursement  
PAC Accounting Consulting

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 70724.E714

Date of Disbursement

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

Amount of Each Disbursement this Period

1479.30

PAC ACCOUNTING CONSULTING

**B.**Full Name (Last, First, Middle Initial)  
Koch & Hoos LLC

Mailing Address PO Box 1154

City Alexandria State VA Zip Code 22313-1154

Purpose of Disbursement  
PAC Accounting Consulting

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 70925.E724

Date of Disbursement

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

Amount of Each Disbursement this Period

853.40

PAC ACCOUNTING CONSULTING

**C.**Full Name (Last, First, Middle Initial)  
Koch & Hoos LLC

Mailing Address PO Box 1154

City Alexandria State VA Zip Code 22313-1154

Purpose of Disbursement  
PAC Accounting Consulting

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 71022.E738

Date of Disbursement

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

Amount of Each Disbursement this Period

1283.81

PAC ACCOUNTING CONSULTING

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

3616.51

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

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)  
Freshmen PAC

FEC Schedule B ( Form 3X) (Revised 02/2003)

# **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 47 / 60

<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)  
Freshmen PAC

**A.**

Full Name (Last, First, Middle Initial)  
NOVA Information Systems

Mailing Address 7300 Chapman Hwy

City Knoxville State TN Zip Code 37920-6612

Purpose of Disbursement  
PAC Credit Card Processing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 70925.E726

Date of Disbursement

/   /

Amount of Each Disbursement this Period

149.76

PAC CREDIT CARD PROCESSING

**B.**

Full Name (Last, First, Middle Initial)  
NOVA Information Systems

Mailing Address 7300 Chapman Hwy

City Knoxville State TN Zip Code 37920-6612

Purpose of Disbursement  
PAC Credit Card Processing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 71022.E739

Date of Disbursement

/   /

Amount of Each Disbursement this Period

35.60

PAC CREDIT CARD PROCESSING

**C.**

Full Name (Last, First, Middle Initial)  
NOVA Information Systems

Mailing Address 7300 Chapman Hwy

City Knoxville State TN Zip Code 37920-6612

Purpose of Disbursement  
PAC Credit Card Processing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 71119.E745

Date of Disbursement

/   /

Amount of Each Disbursement this Period

35.15

PAC CREDIT CARD PROCESSING

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

220.51

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 48 / 60

<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)  
Freshmen PAC

A.

Full Name (Last, First, Middle Initial)  
NOVA Information Systems

Mailing Address 7300 Chapman Hwy

City Knoxville State TN Zip Code 37920-6612

Purpose of Disbursement  
PAC Credit Card Processing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 80117.E766

Date of Disbursement

11 / 02 / 2007

Amount of Each Disbursement this Period

854.28

PAC CREDIT CARD PROCESSING

B.

Full Name (Last, First, Middle Initial)  
NOVA Information Systems

Mailing Address 7300 Chapman Hwy

City Knoxville State TN Zip Code 37920-6612

Purpose of Disbursement  
PAC Credit Card Processing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 80117.E772

Date of Disbursement

12 / 04 / 2007

Amount of Each Disbursement this Period

714.70

PAC CREDIT CARD PROCESSING

C.

Full Name (Last, First, Middle Initial)  
PNC Bank

Mailing Address 1201 Wisconsin Ave, NW

City Washington State DC Zip Code 20007-3222

Purpose of Disbursement  
Bank Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 70925.E719

Date of Disbursement

07 / 02 / 2007

Amount of Each Disbursement this Period

11.38

BANK FEE

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

1580.36

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



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 49 / 60

<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)  
Freshmen PAC

A.

Full Name (Last, First, Middle Initial)  
PNC Bank

Mailing Address 1201 Wisconsin Ave, NW

City Washington State DC Zip Code 20007-3222

Purpose of Disbursement  
Bank Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 70925.E720

Date of Disbursement

08 / 01 / 2007

Amount of Each Disbursement this Period

12.92

BANK FEE

B.

Full Name (Last, First, Middle Initial)  
PNC Bank

Mailing Address 1201 Wisconsin Ave, NW

City Washington State DC Zip Code 20007-3222

Purpose of Disbursement  
Bank Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 71022.E734

Date of Disbursement

09 / 04 / 2007

Amount of Each Disbursement this Period

10.54

BANK FEE

C.

Full Name (Last, First, Middle Initial)  
PNC Bank

Mailing Address 1201 Wisconsin Ave, NW

City Washington State DC Zip Code 20007-3222

Purpose of Disbursement  
Bank Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 71119.E742

Date of Disbursement

10 / 01 / 2007

Amount of Each Disbursement this Period

10.82

BANK FEE

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

34.28

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 50 / 60

<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)  
Freshmen PAC

A.

Full Name (Last, First, Middle Initial)  
PNC Bank

Mailing Address 1201 Wisconsin Ave, NW

City Washington State DC Zip Code 20007-3222

Purpose of Disbursement  
Bank Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 71119.E744

Date of Disbursement

11 / 01 / 2007

Amount of Each Disbursement this Period

11.36

BANK FEE

B.

Full Name (Last, First, Middle Initial)  
PNC Bank

Mailing Address 1201 Wisconsin Ave, NW

City Washington State DC Zip Code 20007-3222

Purpose of Disbursement  
Bank Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 80117.E771

Date of Disbursement

12 / 01 / 2007

Amount of Each Disbursement this Period

10.00

BANK FEE

C.

Full Name (Last, First, Middle Initial)  
Steve Ross

Mailing Address 3237 C Sutton Pl NW

City Washington State DC Zip Code 20016-7523

Purpose of Disbursement  
PAC Administrative/Management Svcs

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 70724.E713

Date of Disbursement

07 / 20 / 2007

Amount of Each Disbursement this Period

6000.00

PAC ADMINISTRATIVE/MANAGEMENT SVCS

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

6021.36

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 51 / 60

<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)  
Freshmen PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Steve Ross	<b>Transaction ID:</b> 71022.E735 <b>Date of Disbursement</b>																				
Mailing Address 3237 C Sutton PI NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	9		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	9		2	0	0	7												
City Washington State DC Zip Code 20016-7523	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement PAC Administrative/Management Svcs Candidate Name	<table border="1"> <tr> <td colspan="10">6000.00</td> </tr> </table>	6000.00																			
6000.00																					
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) ▼																				
PAC ADMINISTRATIVE/MANAGEMENT SVCS																					
<b>B.</b> Full Name (Last, First, Middle Initial) Strategic Fundraising	<b>Transaction ID:</b> 70724.E707 <b>Date of Disbursement</b>																				
Mailing Address 7591 9th St N	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	0		2	0	0	7												
City Saint Paul State MN Zip Code 55128-6626	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement PAC Fundraising/Telemarketing Candidate Name	<table border="1"> <tr> <td colspan="10">29835.00</td> </tr> </table>	29835.00																			
29835.00																					
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) ▼																				
PAC FUNDRAISING/TELEMARKETING																					
<b>C.</b> Full Name (Last, First, Middle Initial) Strategic Fundraising	<b>Transaction ID:</b> 70925.E722 <b>Date of Disbursement</b>																				
Mailing Address 7591 9th St N	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	6		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		0	6		2	0	0	7												
City Saint Paul State MN Zip Code 55128-6626	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement PAC Fundraising/Telemarketing Candidate Name	<table border="1"> <tr> <td colspan="10">7496.00</td> </tr> </table>	7496.00																			
7496.00																					
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) ▼																				
PAC FUNDRAISING/TELEMARKETING																					

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

**43331.00**

**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)  
Freshmen PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Strategic Fundraising	<b>Transaction ID:</b> 70925.E721 <b>Date of Disbursement</b>
Mailing Address 7591 9th St N	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 6 / 2 0 0 7</div> </div>
City Saint Paul State MN Zip Code 55128-6626 Purpose of Disbursement PAC Fundraising/Telemarketing Candidate Name	Amount of Each Disbursement this Period <div>9894.00</div>
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) ▼	PAC FUNDRAISING/TELEMARKETING
<b>B.</b> Full Name (Last, First, Middle Initial) Strategic Fundraising	<b>Transaction ID:</b> 71022.E736 <b>Date of Disbursement</b>
Mailing Address 7591 9th St N	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 0 9 / 2 0 0 7</div> </div>
City Saint Paul State MN Zip Code 55128-6626 Purpose of Disbursement PAC Fundraising/Telemarketing Candidate Name	Amount of Each Disbursement this Period <div>624.99</div>
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) ▼	PAC FUNDRAISING/TELEMARKETING
<b>C.</b> Full Name (Last, First, Middle Initial) Strategic Fundraising	<b>Transaction ID:</b> 80117.E761 <b>Date of Disbursement</b>
Mailing Address 7591 9th St N	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 6 / 2 0 0 7</div> </div>
City Saint Paul State MN Zip Code 55128-6626 Purpose of Disbursement PAC Fundraising/Telemarketing Candidate Name	Amount of Each Disbursement this Period <div>21208.00</div>
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) ▼	PAC FUNDRAISING/TELEMARKETING

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

31726.99

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

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

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

FOR LINE NUMBER:  
(check only one)

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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)  
Freshmen PAC

A.

Full Name (Last, First, Middle Initial)  
Strategic Fundraising

Mailing Address 7591 9th St N

City State Zip Code  
Saint Paul MN 55128-6626

Purpose of Disbursement  
PAC Fundraising/Telemarketing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 80117.E769

Date of Disbursement

<sup>M</sup> <sup>M</sup> /  <sup>D</sup> <sup>D</sup> /  <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup>

Amount of Each Disbursement this Period

21405.00

PAC FUNDRAISING/TELEMARKETING

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

21405.00

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

117860.65

# **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 54 / 60

<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)  
Freshmen PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Adrian Smith For Congress Mailing Address 3321 Ave I, Ste 6	<b>Transaction ID:</b> 80117.E752 <b>Date of Disbursement</b> <div> <div>12</div> <div>06</div> <div>2007</div> </div>
City State Zip Code Scottsbluff NE 69361- Purpose of Disbursement CONTRIBUTION Candidate Name ADRIAN SMITH Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ State: NE District: 03	Amount of Each Disbursement this Period <div>500.00</div> CONTRIBUTION
<b>B.</b> Full Name (Last, First, Middle Initial) Bachmann For Congress Mailing Address PO Box 25950 City State Zip Code Saint Paul MN 55125- Purpose of Disbursement CONTRIBUTION Candidate Name MICHELE M BACHMANN Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ State: MN District: 06	<b>Transaction ID:</b> 80117.E757 <b>Date of Disbursement</b> <div> <div>12</div> <div>06</div> <div>2007</div> </div> Amount of Each Disbursement this Period <div>500.00</div> CONTRIBUTION
<b>C.</b> Full Name (Last, First, Middle Initial) Bilirakis For Congress Mailing Address 610 S Boulevard City State Zip Code Tampa FL 33606- Purpose of Disbursement CONTRIBUTION Candidate Name GUS MICHAEL BILIRAKIS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ State: FL District: 09	<b>Transaction ID:</b> 80117.E749 <b>Date of Disbursement</b> <div> <div>12</div> <div>06</div> <div>2007</div> </div> Amount of Each Disbursement this Period <div>500.00</div> CONTRIBUTION

**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)  
Freshmen PAC

A.

Full Name (Last, First, Middle Initial)  
Bob Corker For Senate

Mailing Address PO BOX 848

City State Zip Code  
Chattanooga TN 37401-

Purpose of Disbursement  
2006 GENERAL DEBT

Candidate Name  
ROBERT P CORKER, JR

Office Sought: ☐ House  
☒ Senate  
☐ President

State: TN District: 00

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Category/  
Type

Transaction ID: 80117.E765

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1500.00

2006 GENERAL DEBT

B.

Full Name (Last, First, Middle Initial)  
David Davis Victory Fund

Mailing Address PO Box 781

City State Zip Code  
Johnson City TN 37605-

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
DAVID DAVIS

Office Sought: ☒ House  
☐ Senate  
☐ President

State: TN District: 01

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Transaction ID: 80117.E760

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)  
Fallin For Congress

Mailing Address PO Box 720634

City State Zip Code  
Oklahoma City OK 73172-

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
MARY C FALLIN

Office Sought: ☒ House  
☐ Senate  
☐ President

State: OK District: 05

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Transaction ID: 80117.E759

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

CONTRIBUTION

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

2500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 56 / 60

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
Freshmen PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Heller For Congress	<b>Transaction ID:</b> 80117.E758 <b>Date of Disbursement</b>
Mailing Address 7840 Red Leaf Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 6 / 2 0 0 7</div> </div>
City Las Vegas State NV Zip Code 89131-	Amount of Each Disbursement this Period
Purpose of Disbursement CONTRIBUTION	<div>500.00</div>
Candidate Name DEAN HELLER	<div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 02	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
CONTRIBUTION	
<b>B.</b> Full Name (Last, First, Middle Initial) Jim Jordan For Congress	<b>Transaction ID:</b> 80117.E753 <b>Date of Disbursement</b>
Mailing Address 1709 State Rte 560 South	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 6 / 2 0 0 7</div> </div>
City Urbana State OH Zip Code 43078-	Amount of Each Disbursement this Period
Purpose of Disbursement CONTRIBUTION	<div>500.00</div>
Candidate Name JAMES D JORDAN	<div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 04	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
CONTRIBUTION	
<b>C.</b> Full Name (Last, First, Middle Initial) Kevin McCarthy for Congress	<b>Transaction ID:</b> 80117.E748 <b>Date of Disbursement</b>
Mailing Address PO Box 12667	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 6 / 2 0 0 7</div> </div>
City Bakersfield State CA Zip Code 93389-	Amount of Each Disbursement this Period
Purpose of Disbursement CONTRIBUTION	<div>500.00</div>
Candidate Name KEVIN MR MCCARTHY	<div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 22	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
CONTRIBUTION	

**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)

PAGE 57 / 60

<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)  
Freshmen PAC

**A.**

Full Name (Last, First, Middle Initial)  
Lamborn For Congress

Mailing Address 5170 N Union Blvd

City Colorado Springs State CO Zip Code 80918-

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
DOUGLAS L LAMBORN

Office Sought: ☒ House  
☐ Senate  
☐ President

State: CO District: 05

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 80117.E754

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
NRSC

Mailing Address 425 2nd St NE

City Washington State DC Zip Code 20002-4914

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2007 Annual  
☐ Primary ☐ General  
☒ Other (specify) ▼

Transaction ID: 71119.E743

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
Roskam For Congress Committee

Mailing Address PO Box 713

City Wheaton State IL Zip Code 60187-

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
PETER ROSKAM

Office Sought: ☒ House  
☐ Senate  
☐ President

State: IL District: 06

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 80117.E756

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

CONTRIBUTION

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

3500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 58 / 60

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
Freshmen PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Sali For Congress Mailing Address PO Box 71	<b>Transaction ID:</b> 80117.E750 <b>Date of Disbursement</b> <div> <div>12</div> <div>06</div> <div>2007</div> </div>
City Kuna State ID Zip Code 83634- Purpose of Disbursement CONTRIBUTION Candidate Name WILLIAM T. SALI Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: ID District: 01	<b>Amount of Each Disbursement this Period</b> <div>500.00</div> CONTRIBUTION
<b>B.</b> Full Name (Last, First, Middle Initial) Vern Buchanan for Congress Mailing Address PO Box 48928 City Sarasota State FL Zip Code 34230- Purpose of Disbursement CONTRIBUTION Candidate Name VERNON BUCHANAN Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: FL District: 13	<b>Transaction ID:</b> 80117.E755 <b>Date of Disbursement</b> <div> <div>12</div> <div>06</div> <div>2007</div> </div> <b>Amount of Each Disbursement this Period</b> <div>500.00</div> CONTRIBUTION
<b>C.</b> Full Name (Last, First, Middle Initial) Walberg For Congress Mailing Address 6769 Teachout Rd City Tipton State MI Zip Code 49287- Purpose of Disbursement CONTRIBUTION Candidate Name TIMOTHY WALBERG Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District: 07	<b>Transaction ID:</b> 80117.E751 <b>Date of Disbursement</b> <div> <div>12</div> <div>06</div> <div>2007</div> </div> <b>Amount of Each Disbursement this Period</b> <div>500.00</div> CONTRIBUTION

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

1500.00

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

10500.00

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 59 / 60

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
Freshmen PAC**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Capitol Hill ClubNature of Debt (Purpose):  
PAC Event Expense/Food &  
Bev.

Mailing Address 300 1st St SE

City State ZIP Code  
Washington DC 20003-1801

Outstanding Balance Beginning This Period

1033.28

Transaction ID: LS70724.E708

Amount Incurred This Period

0.00

Payment This Period

1033.28

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Response ConsultingNature of Debt (Purpose):  
PAC Direct Mail

Mailing Address 2401 W Behrend Dr Ste 7

City State ZIP Code  
Phoenix AZ 85027-4143

Outstanding Balance Beginning This Period

16616.05

Transaction ID: LS50519.E236

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

16616.05

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Strategic FundraisingNature of Debt (Purpose):  
PAC Fundraising/Telemarke-  
ting

Mailing Address 7591 9th St N

City State ZIP Code  
Saint Paul MN 55128-6626

Outstanding Balance Beginning This Period

37331.00

Transaction ID: LS70724.E707

Amount Incurred This Period

0.00

Payment This Period

37331.00

Outstanding Balance at Close of This Period

0.00

**1) SUBTOTALS** This Period This Page (optional).....

16616.05

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 60 / 60

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
Freshmen PAC**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Strategic FundraisingNature of Debt (Purpose):  
PAC Fundraising/Telemarke-  
ting

Mailing Address 7591 9th St N

City State ZIP Code  
Saint Paul MN 55128-6626

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS80124.E777

Amount Incurred This Period

8344.83

Payment This Period

0.00

Outstanding Balance at Close of This Period

8344.83

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Direct Mail Processors Inc.Nature of Debt (Purpose):  
PAC Contribution Processi-  
ng

Mailing Address 1150 Conrad Court

City State ZIP Code  
Hagerstown MD 21740-

Outstanding Balance Beginning This Period

943.05

Transaction ID: LS70724.E709

Amount Incurred This Period

0.00

Payment This Period

943.05

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Direct Mail Processors Inc.Nature of Debt (Purpose):  
PAC Contribution Processi-  
ng

Mailing Address 1150 Conrad Court

City State ZIP Code  
Hagerstown MD 21740-

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS80124.E776

Amount Incurred This Period

1121.64

Payment This Period

0.00

Outstanding Balance at Close of This Period

1121.64

**1) SUBTOTALS** This Period This Page (optional).....

9466.47

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

26082.52

**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)

26082.52