

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

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

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

2. FEC IDENTIFICATION NUMBER C00305797 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 01 01 2006 through 01 31 2006

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

Type or Print Name of Treasurer BARBARA W. BONFIGLIO

Signature of Treasurer Electronically Filed by BARBARA W. BONFIGLIO Date 02 20 2006

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
America's Foundation

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		44545.60
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	44545.60									
(c) Total Receipts (from Line 19) .....	7705.28	7705.28								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	52250.88	52250.88								
7. Total Disbursements (from Line 31) .....	50130.18	50130.18								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	2120.70	2120.70								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
America's Foundation

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	6

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	0.00	0.00
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	150.50	150.50
(iii) TOTAL (add Lines 11(a)(i) and (ii) ▶	150.50	150.50
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	7500.00	7500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ▶	7650.50	7650.50
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	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.) .....	54.78	54.78
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)) .....	7705.28	7705.28
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	7705.28	7705.28

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	39330.18	39330.18
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	39330.18	39330.18
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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.....	10800.00	10800.00
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))..	50130.18	50130.18
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	50130.18	50130.18

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	7650.50	7650.50
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	7650.50	7650.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	39330.18	39330.18
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	39330.18	39330.18

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 6 / 31</span>
	(check only one)
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
America's Foundation

Full Name (Last, First, Middle Initial) <b>A. HIGHMARK HEALTH PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 3 1 / 2 0 0 6
Mailing Address 1800 CENTER STREET		<b>Transaction ID: SA11.10116547</b>
City State Zip Code CAMP HILL PA 17089-0089	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. <b>C</b> C00302844	<b>CONTRIBUTION</b>	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MELLON BANK BIPARTISAN PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 3 1 / 2 0 0 6
Mailing Address ONE MELLON BANK CENTER ROOM 625		<b>Transaction ID: SA11.10116546</b>
City State Zip Code PITTSBURGH PA 15259-0001	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00017558	<b>CONTRIBUTION</b>	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	<b>7500.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<b>7500.00</b>

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 7 / 31</span>	
	(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

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NAME OF COMMITTEE (In Full)  
America's Foundation

**A.** Full Name (Last, First, Middle Initial)  
Bryn Mawr Trust Company

Mailing Address 801 Lancaster Avenue

City	State	Zip Code
Bryn Mawr	PA	19010

FEC ID number of contributing federal political committee. C

Name of Employer	Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
0.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	3	1	/	2	0	0	6

**Transaction ID:** 10001

Amount of Each Receipt this Period  
54.78

Interest Income

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">54.78</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;">54.78</span>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
America's Foundation

Full Name (Last, First, Middle Initial) <b>A. Maria I. Diesel</b>		<b>Transaction ID: 151</b> Date of Disbursement 01 / 05 / 2006	
Mailing Address 1533 Johnnys Way		Amount of Each Disbursement this Period 100.00	
City West Chester State PA Zip Code 19382	Purpose of Disbursement Commissions for Fundraising Svcs	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) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) <b>B. Maria I. Diesel</b>		<b>Transaction ID: 152</b> Date of Disbursement 01 / 05 / 2006	
Mailing Address 1533 Johnnys Way		Amount of Each Disbursement this Period 2621.24	
City West Chester State PA Zip Code 19382	Purpose of Disbursement Expense Reimb - Travel Expenses, Train,	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) ▼	Cabfare, Lodging	

Full Name (Last, First, Middle Initial) <b>C. Carey J. Dunn</b>		<b>Transaction ID: 148</b> Date of Disbursement 01 / 05 / 2006	
Mailing Address Stonedale Road		Amount of Each Disbursement this Period 1025.00	
City Sewickley State PA Zip Code 15143	Purpose of Disbursement Commissions for Fundraising Svcs	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) ▼	Candidate Name	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3746.24</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty field)



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
America's Foundation

Full Name (Last, First, Middle Initial) <b>A. Susan B. Lewis</b>		<b>Transaction ID: 175</b> Date of Disbursement 01 / 31 / 2006
Mailing Address 416 Berkley Road		Amount of Each Disbursement this Period 759.28
City Haverford State PA Zip Code 19041	Purpose of Disbursement Net Payroll	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Nadine Maenza</b>		<b>Transaction ID: 153</b> Date of Disbursement 01 / 05 / 2006
Mailing Address 315 Foxtail Lane		Amount of Each Disbursement this Period 5910.00
City Spring city State PA Zip Code 19475	Purpose of Disbursement Commissions for Fundraising Svcs	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Amy W. Petraglia</b>		<b>Transaction ID: 145</b> Date of Disbursement 01 / 05 / 2006
Mailing Address 8623 Lexington Place		Amount of Each Disbursement this Period 1025.00
City Wexford State PA Zip Code 15090	Purpose of Disbursement Commissions for Fundraising Svcs	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7694.28
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 10 / 31

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

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NAME OF COMMITTEE (In Full)  
America's Foundation

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		<b>Transaction ID: 102</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 6
Mailing Address Suite 0002		Amount of Each Disbursement this Period 2722.88
City Chicago State IL Zip Code 60679-0002	Purpose of Disbursement Credit Card Payment	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. American Express</b>		<b>Transaction ID: 109</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 6
Mailing Address Suite 0002		Amount of Each Disbursement this Period 170.17
City Chicago State IL Zip Code 60679	Purpose of Disbursement Finance Charge	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**[MEMO ITEM]**  
(SEE ABOVE - 01/04/06 AMERICAN EXPRESS)

Full Name (Last, First, Middle Initial) <b>C. AOL Online Service</b>		<b>Transaction ID: 106</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 6
Mailing Address PO Box 10810		Amount of Each Disbursement this Period 23.90
City Herndon State VA Zip Code 20172	Purpose of Disbursement Internet	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**[MEMO ITEM]**  
(SEE ABOVE - 01/04/06 AMERICAN EXPRESS)

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2722.88
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 11 / 31

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

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NAME OF COMMITTEE (In Full)  
America's Foundation

Full Name (Last, First, Middle Initial) <b>A. AOL Online Service</b>		<b>Transaction ID: 108</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 6
Mailing Address PO Box 10810		Amount of Each Disbursement this Period 23.90
City Herndon State VA Zip Code 20172	Purpose of Disbursement Internet Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> (SEE ABOVE - 01/04/06 AMERICAN EXPRESS)

Full Name (Last, First, Middle Initial) <b>B. Fedex</b>		<b>Transaction ID: 110</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 6
Mailing Address 700 Downington Pike #105		Amount of Each Disbursement this Period 28.51
City West Chester State PA Zip Code 19380	Purpose of Disbursement Postage/Delivery Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> (SEE ABOVE - 01/04/06 AMERICAN EXPRESS)

Full Name (Last, First, Middle Initial) <b>C. Fedex</b>		<b>Transaction ID: 111</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 6
Mailing Address 700 Downington Pike #105		Amount of Each Disbursement this Period 37.80
City West Chester State PA Zip Code 19380	Purpose of Disbursement Postage/Delivery Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> (SEE ABOVE - 01/04/06 AMERICAN EXPRESS)

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 12 / 31

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

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NAME OF COMMITTEE (In Full)  
America's Foundation

Full Name (Last, First, Middle Initial) <b>A. Fedex</b>		<b>Transaction ID: 112</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 6
Mailing Address 700 Downington Pike #105		Amount of Each Disbursement this Period 14.41
City West Chester State PA Zip Code 19380	[MEMO ITEM] (SEE ABOVE - 01/04/06 AMERICAN EXPRESS)	
Purpose of Disbursement Postage/Delivery Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Fedex</b>		<b>Transaction ID: 113</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 6
Mailing Address 700 Downington Pike #105		Amount of Each Disbursement this Period 12.36
City West Chester State PA Zip Code 19380	[MEMO ITEM] (SEE ABOVE - 01/04/06 AMERICAN EXPRESS)	
Purpose of Disbursement Postage/Delivery Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Fedex</b>		<b>Transaction ID: 118</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 6
Mailing Address 700 Downington Pike #105		Amount of Each Disbursement this Period 13.74
City West Chester State PA Zip Code 19380	[MEMO ITEM] (SEE ABOVE - 01/04/06 AMERICAN EXPRESS)	
Purpose of Disbursement Postage/Delivery Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
America's Foundation

Full Name (Last, First, Middle Initial) <b>A. Fedex</b>		Transaction ID: 119 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 6
Mailing Address 700 Downington Pike #105		Amount of Each Disbursement this Period 19.29
City West Chester State PA Zip Code 19380	Purpose of Disbursement Postage/Delivery Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> (SEE ABOVE - 01/04/06 AMERICAN EXPRESS)

Full Name (Last, First, Middle Initial) <b>B. Fedex</b>		Transaction ID: 120 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 6
Mailing Address 700 Downington Pike #105		Amount of Each Disbursement this Period 11.84
City West Chester State PA Zip Code 19380	Purpose of Disbursement Postage/Delivery Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> (SEE ABOVE - 01/04/06 AMERICAN EXPRESS)

Full Name (Last, First, Middle Initial) <b>C. Fedex</b>		Transaction ID: 123 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 6
Mailing Address 700 Downington Pike #105		Amount of Each Disbursement this Period 20.60
City West Chester State PA Zip Code 19380	Purpose of Disbursement Postage/Delivery Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> (SEE ABOVE - 01/04/06 AMERICAN EXPRESS)

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
America's Foundation

Full Name (Last, First, Middle Initial) <b>A. Office Depot</b>		Transaction ID: 104 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 6
Mailing Address 387 Benner Pike,		Amount of Each Disbursement this Period 420.25
City State College	State Zip Code PA 16801	
Purpose of Disbursement Office Supplies		[MEMO ITEM] (SEE ABOVE - 01/04/06 AME- RICAN EXPRESS)
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Robertson's</b>		Transaction ID: 115 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 6
Mailing Address 5 E. Highland Ave		Amount of Each Disbursement this Period 120.79
City Philadelphia	State Zip Code PA 19118	
Purpose of Disbursement PAC Fundraising Event Costs		[MEMO ITEM] (SEE ABOVE - 01/04/06 AME- RICAN EXPRESS)
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Robertson's</b>		Transaction ID: 116 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 6
Mailing Address 5 E. Highland Ave		Amount of Each Disbursement this Period 142.57
City Philadelphia	State Zip Code PA 19118	
Purpose of Disbursement PAC Fundraising Event Costs		[MEMO ITEM] (SEE ABOVE - 01/04/06 AME- RICAN EXPRESS)
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
America's Foundation

Full Name (Last, First, Middle Initial) <b>A. Senate Gift Shop</b>		Transaction ID: 122 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 6
Mailing Address Dirksen Senate Building Room 42		Amount of Each Disbursement this Period 602.98
City Washington State DC Zip Code 20510	[MEMO ITEM] (SEE ABOVE - 01/04/06 AMERICAN EXPRESS)	
Purpose of Disbursement PAC Donor Recognition Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Staples</b>		Transaction ID: 105 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 6
Mailing Address 3301 Jefferson Davis Hgwy		Amount of Each Disbursement this Period 392.22
City Alexandria State VA Zip Code 22305	[MEMO ITEM] (SEE ABOVE - 01/04/06 AMERICAN EXPRESS)	
Purpose of Disbursement Office Supplies Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Staples</b>		Transaction ID: 107 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 6
Mailing Address 3301 Jefferson Davis Hgwy		Amount of Each Disbursement this Period 421.88
City Alexandria State VA Zip Code 22305	[MEMO ITEM] (SEE ABOVE - 01/04/06 AMERICAN EXPRESS)	
Purpose of Disbursement Office Supplies Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
America's Foundation

Full Name (Last, First, Middle Initial) <b>A. USPS</b>		Transaction ID: 121 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 6
Mailing Address 8300 NE Underground Drive Pillar 2		Amount of Each Disbursement this Period 75.00
City Kansas City State MO Zip Code 64144	[MEMO ITEM] (SEE ABOVE - 01/04/06 AMERICAN EXPRESS)	
Purpose of Disbursement Postage/Delivery Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Verizon Online</b>		Transaction ID: 114 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 6
Mailing Address 7901 E. Riverside Dr. #1-100		Amount of Each Disbursement this Period 41.17
City Austin State TX Zip Code 78744	[MEMO ITEM] (SEE ABOVE - 01/04/06 AMERICAN EXPRESS)	
Purpose of Disbursement Internet Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. American Heritage Credit Union</b>		Transaction ID: 127 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 6
Mailing Address P.O. Box 67001		Amount of Each Disbursement this Period 1909.34
City Harrisburg State PA Zip Code 17106-7001	[MEMO ITEM] (SEE ABOVE - 01/04/06 AMERICAN EXPRESS)	
Purpose of Disbursement Credit Card Payment Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1909.34
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
America's Foundation

Full Name (Last, First, Middle Initial) <b>A. AOL Online Service</b>		<b>Transaction ID:</b> 131 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 6
Mailing Address PO Box 10810		Amount of Each Disbursement this Period 23.90
City Herndon State VA Zip Code 20172	[MEMO ITEM] (SEE ABOVE - 01/04/06 AMERICAN HERITAGE F.C.U.)	
Purpose of Disbursement Internet Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. AOL Online Service</b>		<b>Transaction ID:</b> 137 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 6
Mailing Address PO Box 10810		Amount of Each Disbursement this Period 23.90
City Herndon State VA Zip Code 20172	[MEMO ITEM] (SEE ABOVE - 01/04/06 AMERICAN HERITAGE F.C.U.)	
Purpose of Disbursement Internet Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Cash Vault</b>		<b>Transaction ID:</b> 135 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 6
Mailing Address 511 Dirksen Senate Office Building		Amount of Each Disbursement this Period 786.25
City Washington State DC Zip Code 20510	[MEMO ITEM] (SEE ABOVE - 01/04/06 AMERICAN HERITAGE F.C.U.)	
Purpose of Disbursement Meals Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
America's Foundation

Full Name (Last, First, Middle Initial) <b>A. Hirst Photography</b>		<b>Transaction ID:</b> 134 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 6
Mailing Address 281 Greenridge Road		Amount of Each Disbursement this Period 749.52
City State Zip Code Glenmoore PA 19343	Purpose of Disbursement PAC Fundraising Event Costs	
Candidate Name		<b>[MEMO ITEM]</b> (SEE ABOVE - 01/04/06 AMERICAN HERITAGE F.C.U.)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Office Depot</b>		<b>Transaction ID:</b> 128 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 6
Mailing Address 5845 Leesburg Pike		Amount of Each Disbursement this Period 16.13
City State Zip Code Baileys Crossroads VA 22041	Purpose of Disbursement Office Supplies	
Candidate Name		<b>[MEMO ITEM]</b> (SEE ABOVE - 01/04/06 AMERICAN HERITAGE F.C.U.)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Symantec</b>		<b>Transaction ID:</b> 129 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 6
Mailing Address 20300 Stevens Creek Boulevard		Amount of Each Disbursement this Period 39.99
City State Zip Code Cupertino CA 95014	Purpose of Disbursement Office Supplies	
Candidate Name		<b>[MEMO ITEM]</b> (SEE ABOVE - 01/04/06 AMERICAN HERITAGE F.C.U.)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
America's Foundation

Full Name (Last, First, Middle Initial) <b>A. American Heritage Credit Union</b>		<b>Transaction ID: 138</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 6
Mailing Address P.O. Box 67001		Amount of Each Disbursement this Period 200.00
City Harrisburg State PA Zip Code 17106-7001	Purpose of Disbursement Credit Card Payment Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. AOL Online Service</b>		<b>Transaction ID: 139</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 6
Mailing Address PO Box 10810		Amount of Each Disbursement this Period 23.90
City Herndon State VA Zip Code 20172	Purpose of Disbursement Internet Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

**[MEMO ITEM]**  
(SEE ABOVE - 01/04/06 AMERICAN HERITAGE F.C.U.)

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		<b>Transaction ID: 144</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 6
Mailing Address P.O. Box 41556		Amount of Each Disbursement this Period 130.96
City Philadelphia State PA Zip Code 19101	Purpose of Disbursement Telephone Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

**[MEMO ITEM]**  
(SEE ABOVE - 01/04/06 AMERICAN HERITAGE F.C.U.)

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	200.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
America's Foundation

Full Name (Last, First, Middle Initial) <b>A. Aristeia Group, Inc.</b>		<b>Transaction ID: 163</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 3 / 2 0 0 6
Mailing Address 1203 Portner Rd.		Amount of Each Disbursement this Period 12500.00
City Alexandria State VA Zip Code 22314	Category/ Type	
Purpose of Disbursement Commissions for Fundraising Svcs		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Aristeia Group, Inc.</b>		<b>Transaction ID: 164</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 3 / 2 0 0 6
Mailing Address 1203 Portner Rd.		Amount of Each Disbursement this Period 163.20
City Alexandria State VA Zip Code 22314	Category/ Type	
Purpose of Disbursement Expense Reimb - Messenger Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Bankcard MTOT Discount</b>		<b>Transaction ID: 179</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 3 / 2 0 0 6
Mailing Address P.O. Box 189		Amount of Each Disbursement this Period 45.00
City Hagerstown State MD Zip Code 21741-0189	Category/ Type	
Purpose of Disbursement Credit Card Fees		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	12708.20
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
America's Foundation

Full Name (Last, First, Middle Initial) <b>A. Barna Advisory Services, PC</b>		<b>Transaction ID: 126</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 6
Mailing Address 270 S. Woodmont Drive		Amount of Each Disbursement this Period 3526.77
City Downingtown State PA Zip Code 19335	Purpose of Disbursement Accounting Fees Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>B. Benchmark Media Group</b>		<b>Transaction ID: 161</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 3 / 2 0 0 6
Mailing Address 3400 W. 6th St. North		Amount of Each Disbursement this Period 395.00
City Harrisburg State PA Zip Code 17110	Purpose of Disbursement PAC Advertising Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>C. Bryn Mawr Trust Company</b>		<b>Transaction ID: 101</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 3 / 2 0 0 6
Mailing Address 801 Lancaster Avenue		Amount of Each Disbursement this Period 35.25
City Bryn Mawr State PA Zip Code 19010	Purpose of Disbursement Bank Service Charges Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3957.02
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
America's Foundation

Full Name (Last, First, Middle Initial) <b>A. Bryn Mawr Trust Company</b>		<b>Transaction ID: 178</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 6
Mailing Address 801 Lancaster Avenue		Amount of Each Disbursement this Period 75.00
City Bryn Mawr	State PA	
Zip Code 19010	Purpose of Disbursement Bank Service Charges	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Capitol Resource Group, Inc.</b>		<b>Transaction ID: 146</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 6
Mailing Address One Tower Bridge, Suite 1440 One Hundred Front Street		Amount of Each Disbursement this Period 346.25
City West Conshohocken	State PA	
Zip Code 19428	Purpose of Disbursement Rent	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Capitol Resource Group, Inc.</b>		<b>Transaction ID: 147</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 6
Mailing Address One Tower Bridge, Suite 1440 One Hundred Front Street		Amount of Each Disbursement this Period 384.27
City West Conshohocken	State PA	
Zip Code 19428	Purpose of Disbursement Expense Reimb - Travel Expenses	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	805.52
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
America's Foundation

Full Name (Last, First, Middle Initial) <b>A. Keeper of the Stationery</b>		<b>Transaction ID: 159</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 1 / 2 0 0 6
Mailing Address c/o Jill Simodejka 2101 16th Street, N.W.		Amount of Each Disbursement this Period 410.50
City Washington State DC Zip Code 20009	Category/ Type	
Purpose of Disbursement Flags		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Oh-K Fast Print</b>		<b>Transaction ID: 154</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 6
Mailing Address 2923 South 120th St.		Amount of Each Disbursement this Period 1101.81
City Omaha State NE Zip Code 68144-4310	Category/ Type	
Purpose of Disbursement Printing & Reproduction		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Paychex, Inc</b>		<b>Transaction ID: 158</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 0 / 2 0 0 6
Mailing Address Valley Forge Corporate Center 1100 Adams Avenue		Amount of Each Disbursement this Period 103.60
City Norristown State PA Zip Code 19403	Category/ Type	
Purpose of Disbursement Payroll Processing Fees		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>1615.91</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
America's Foundation

Full Name (Last, First, Middle Initial) <b>A. Paychex, Inc</b>		<b>Transaction ID: 176</b> Date of Disbursement MM / DD / YYYY 01 / 31 / 2006
Mailing Address Valley Forge Corporate Center 1100 Adams Avenue		Amount of Each Disbursement this Period 311.31
City Norristown	State PA	
Zip Code 19403		Category/ Type
Purpose of Disbursement Payroll Taxes		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Paychex, Inc</b>		<b>Transaction ID: 177</b> Date of Disbursement MM / DD / YYYY 01 / 31 / 2006
Mailing Address Valley Forge Corporate Center 1100 Adams Avenue		Amount of Each Disbursement this Period 14.73
City Norristown	State PA	
Zip Code 19403		Category/ Type
Purpose of Disbursement Workers Comp Insurance		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Southwest Publishing &amp; Mailing Corp.</b>		<b>Transaction ID: 100</b> Date of Disbursement MM / DD / YYYY 01 / 02 / 2006
Mailing Address 2600 NW Topeka Boulevard		Amount of Each Disbursement this Period 485.32
City Topeka	State KS	
Zip Code 66617-1131		Category/ Type
Purpose of Disbursement Direct Mail Costs		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	811.36
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
America's Foundation

Full Name (Last, First, Middle Initial) <b>A. Sprint</b>		<b>Transaction ID: 155</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 6
Mailing Address PO Box 17621		Amount of Each Disbursement this Period 181.28
City Baltimore State MD Zip Code 21297-1621	Purpose of Disbursement Telephone Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>B. TaylorTech Consulting</b>		<b>Transaction ID: 156</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 6
Mailing Address 3622 Calumet Street		Amount of Each Disbursement this Period 1586.00
City Philadelphia State PA Zip Code 19129	Purpose of Disbursement Computer Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>C. Union League of Philadelphia</b>		<b>Transaction ID: 157</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 6
Mailing Address 140 South Broad Street		Amount of Each Disbursement this Period 1031.48
City Philadelphia State PA Zip Code 19102-3083	Purpose of Disbursement PAC Fundraising Event Costs Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2798.76
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
America's Foundation

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		<b>Transaction ID: 125</b> Date of Disbursement
Mailing Address P.O. Box 41556		<input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>
City Philadelphia	State PA	Zip Code 19101-1556
Purpose of Disbursement Telephone Expenses	<input type="text" value="214.46"/>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Wachovia Bank</b>		<b>Transaction ID: 180</b> Date of Disbursement
Mailing Address 1753 Pinnacle Drive		<input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>
City Mclean	State VA	Zip Code 22102
Purpose of Disbursement Bank Service Charges	<input type="text" value="16.21"/>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="230.67"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="39200.18"/>

# 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 27 / 31

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

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NAME OF COMMITTEE (In Full)  
America's Foundation

<p><b>A. Crossroads Foundation</b></p> <p>Full Name (Last, First, Middle Initial) America's Foundation</p> <p>Mailing Address 2901 Webster Avenue</p> <p>City Pittsburgh State PA Zip Code 15219</p> <p>Purpose of Disbursement Charitable Transfer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p><b>Transaction ID: 166</b></p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text"/></p>

<p><b>B. His Place Contact Center</b></p> <p>Full Name (Last, First, Middle Initial) His Place Contact Center</p> <p>Mailing Address PO Box 4119</p> <p>City Pittsburgh State PA Zip Code 15202</p> <p>Purpose of Disbursement Charitable Transfer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p><b>Transaction ID: 167</b></p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text"/></p>

<p><b>C. Human Life Resource Center</b></p> <p>Full Name (Last, First, Middle Initial) Human Life Resource Center</p> <p>Mailing Address 201 South Main Street</p> <p>City Wilkes-Barre State PA Zip Code 18702</p> <p>Purpose of Disbursement Charitable Transfer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p><b>Transaction ID: 168</b></p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="2500.00"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 28 / 31

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

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NAME OF COMMITTEE (In Full)  
America's Foundation

Full Name (Last, First, Middle Initial) <b>A. Martin Luther King Center for Nonviolence</b>		<b>Transaction ID: 160</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 3 / 2 0 0 6
Mailing Address c/o Marcus Mitchell 604 S. Washington Sq.		Amount of Each Disbursement this Period 2500.00
City Philadelphia State PA Zip Code 19106	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Mercy Neighborhood Ministries of Phila.</b>		<b>Transaction ID: 169</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 0 / 2 0 0 6
Mailing Address 3535 N. 19th Street		Amount of Each Disbursement this Period 1000.00
City Philadelphia State PA Zip Code 19140	Category/ Type	
Purpose of Disbursement Charitable Transfer		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Mothers' Home, Inc.</b>		<b>Transaction ID: 170</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 0 / 2 0 0 6
Mailing Address 51 N. MacDade Blvd.		Amount of Each Disbursement this Period 1000.00
City Darby State PA Zip Code 19023	Category/ Type	
Purpose of Disbursement Charitable Transfer		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 29 / 31

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

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NAME OF COMMITTEE (In Full)  
America's Foundation

Full Name (Last, First, Middle Initial) <b>A. Pennsylvanians for Human Life Educational Fund</b>		<b>Transaction ID: 171</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 0 / 2 0 0 6
Mailing Address 506 Broadway		Amount of Each Disbursement this Period 500.00
City Scranton State PA Zip Code 18505	Purpose of Disbursement Charitable Transfer Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Prison Fellowship Ministries</b>		<b>Transaction ID: 172</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 0 / 2 0 0 6
Mailing Address PO Box 17377		Amount of Each Disbursement this Period 1000.00
City Pittsburgh State PA Zip Code 15235	Purpose of Disbursement Charitable Transfer Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Redeemer Renaissance Community Dev Ctr</b>		<b>Transaction ID: 173</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 0 / 2 0 0 6
Mailing Address 2421-33 Dickinson Street		Amount of Each Disbursement this Period 1000.00
City Philadelphia State PA Zip Code 19146	Purpose of Disbursement Charitable Transfer Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 30 / 31

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

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NAME OF COMMITTEE (In Full)  
America's Foundation

**A.** Full Name (Last, First, Middle Initial)  
St. Martin Center, Inc.

Mailing Address 1701 Parade Street

City Erie State PA Zip Code 16503

Purpose of Disbursement Charitable Transfer

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 174

Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

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

Image# 26980138867

Form/Schedule: **F3XN**

Transaction ID:

ALL EXPENDITURES ON SCHEDULE B, LINE 21(B) WERE PAC EXPENSES. REIMBURSEMENTS REPRESENT EXPENSES INCURRED ON BEHALF OF AMERICA'S FOUNDATION THAT WERE REIMBURSED AT THE EXACT AMOUNT CHARGED AT THE TIME THE EXPENSE WAS INCURRED. EVERYONE ASSOCIATED WITH AMERICA'S FOUNDATION IS MADE FULLY AWARE THAT IT IS REQUIRED TO PAY FOR GOODS AND SERVICES AT THE USUAL AND NORMAL CHARGE, AND AT NO TIME HAS THE COMMITTEE REQUESTED OR RECEIVED ANY DISCOUNT FOR GOODS OR SERVICES PROVIDED TO IT.

\*\*\*\*\*