

# 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) P.O. Box 434  
Suite 300  
 Check if different than previously reported. (ACC)  
Downtown PA 19335

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

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 04 01 2008 through 06 30 2008

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 Alex Barna

Signature of Treasurer Electronically Filed by Alex Barna Date 07 15 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									
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**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  
AMERICA'S FOUNDATION

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	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>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		56770.64
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	65230.38									
(c) Total Receipts (from Line 19) .....	298544.94	521193.74								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	363775.32	577964.38								
7. Total Disbursements (from Line 31) .....	341652.74	555841.80								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	22122.58	22122.58								
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	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

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	85197.00	150972.00
(i) Itemized (use Schedule A) .....	189161.20	336812.20
(ii) Unitemized .....	274358.20	487784.20
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	274358.20	487784.20
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) .....	4414.57	4414.57
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	19772.17	28994.97
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)) .....	298544.94	521193.74
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	298544.94	521193.74

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	317007.74	519066.80
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	317007.74	519066.80
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	15000.00	25000.00
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 .....	145.00	1275.00
(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)) .....	145.00	1275.00
29. Other Disbursements.....	9500.00	10500.00
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))..	341652.74	555841.80
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	341652.74	555841.80

**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) .....	274358.20	487784.20
34. Total Contribution Refunds (from Line 28(d)) .....	145.00	1275.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	274213.20	486509.20
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	317007.74	519066.80
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	4414.57	4414.57
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	312593.17	514652.23

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

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

FOR LINE NUMBER: PAGE 6 / 138  
(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)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Mary Jane Adams

Mailing Address 2423 State Route 25

City Millersburg State PA Zip Code 17061-8137

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

Name of Employer Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 29 / 2008

Transaction ID: SA11AI.13382

Amount of Each Receipt this Period 100.00

**B.** Full Name (Last, First, Middle Initial)  
Thomas W Angerman

Mailing Address 801 15th St

City Oakmont State PA Zip Code 15139-1007

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

Name of Employer Executive Occupation The Baron Group

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 28 / 2008

Transaction ID: SA11AI.13256

Amount of Each Receipt this Period 500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Francisco A Arrufat

Mailing Address 1697 W Sam Houston Pkwy S

City Houston State TX Zip Code 77042-2969

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

Name of Employer Occupation Ret.

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt 05 / 14 / 2008

Transaction ID: SA11AI.13657

Amount of Each Receipt this Period 1.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 601.00

**TOTAL** 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 / 138  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Myra Asplundh  
Mailing Address PO Box 11  
City Bryn Athyn State PA Zip Code 19009-0011  
FEC 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 04 / 11 / 2008  
Transaction ID: SA11AI.13165  
Amount of Each Receipt this Period 500.00

**B.** Full Name (Last, First, Middle Initial)  
Myra Asplundh  
Mailing Address PO Box 11  
City Bryn Athyn State PA Zip Code 19009-0011  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1500.00  
Date of Receipt 06 / 27 / 2008  
Transaction ID: SA11AI.13166  
Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Arthur A Bacher  
Mailing Address 5269 Millcreek Blvd  
City Brunswick State OH Zip Code 44212-1981  
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 ▼ 251.00  
Date of Receipt 06 / 17 / 2008  
Transaction ID: SA11AI.13487  
Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1600.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 138  
(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)  
**AMERICA'S FOUNDATION**

**A.**

Full Name (Last, First, Middle Initial)  
Arthur A Bacher

Mailing Address 5269 Millcreek Blvd

City Brunswick State OH Zip Code 44212-1981

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 ▼ 252.00

Date of Receipt 06 / 17 / 2008

**Transaction ID:** SA11AI.13488

Amount of Each Receipt this Period 1.00

**B.**

Full Name (Last, First, Middle Initial)  
Mrs. Ann S Baker

Mailing Address 19191 Harvard Ave Apt 431A

City Irvine State CA Zip Code 92612-8617

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Ret. Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt 05 / 15 / 2008

**Transaction ID:** SA11AI.13315

Amount of Each Receipt this Period 51.00

**C.**

Full Name (Last, First, Middle Initial)  
Mrs. Ann S Baker

Mailing Address 19191 Harvard Ave Apt 431A

City Irvine State CA Zip Code 92612-8617

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Ret. Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 276.00

Date of Receipt 06 / 04 / 2008

**Transaction ID:** SA11AI.13316

Amount of Each Receipt this Period 75.00

**SUBTOTAL** of Receipts This Page (optional) ..... 127.00

**TOTAL** 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 / 138  
(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)  
AMERICA'S FOUNDATION

**A.**

Full Name (Last, First, Middle Initial)  
Mrs. Ann S Baker

Mailing Address 19191 Harvard Ave Apt 431A

City State Zip Code  
Irvine CA 92612-8617

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

Name of Employer Retired Occupation Ret. Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 352.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.13317

Amount of Each Receipt this Period  
76.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Grant M Bakewell

Mailing Address 3939 Walnut Ave Unit 351

City State Zip Code  
Carmichael CA 95608-7315

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.13562

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)  
Ms. Betty A Bayfield

Mailing Address 225 E 63rd St Apt 2B

City State Zip Code  
New York NY 10065-7435

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

Name of Employer Betty Boyfield Studio Occupation Textfile Designer

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 4 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.13337

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **526.00**

**TOTAL** 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 / 138  
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.**

Full Name (Last, First, Middle Initial)  
Mr. John L Beck

Mailing Address 4107 W Rudella Rd

City State Zip Code  
Meguon WI 53092-2780

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
06 / 25 / 2008

Transaction ID: SA11AI.13440

Amount of Each Receipt this Period  
300.00

**B.**

Full Name (Last, First, Middle Initial)  
Mrs. Barbara Becker

Mailing Address PO Box 675  
713 Fox Hollow Rd.

City State Zip Code  
Gwynedd Valley PA 19437-0675

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

Name of Employer None Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
04 / 07 / 2008

Transaction ID: SA11AI.13221

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)  
Mrs. Barbara Becker

Mailing Address PO Box 675  
713 Fox Hollow Rd.

City State Zip Code  
Gwynedd Valley PA 19437-0675

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

Name of Employer None Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
MM / DD / YYYY  
06 / 05 / 2008

Transaction ID: SA11AI.13220

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 750.00

**TOTAL** 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 / 138  
(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)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Mr. Eugene W. Becker

Mailing Address 1008 S Logan St Apt 12

City State Zip Code  
Lena IL 61048-9003

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
06 / 11 / 2008

Transaction ID: SA11AI.13395

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Eugene W. Becker

Mailing Address 1008 S Logan St Apt 12

City State Zip Code  
Lena IL 61048-9003

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
06 / 25 / 2008

Transaction ID: SA11AI.13398

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Mary J Bernier

Mailing Address 287 Langley Rd Unit 11

City State Zip Code  
Newton Center MA 02459-2373

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2008

Transaction ID: SA11AI.13490

Amount of Each Receipt this Period  
51.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 201.00

**TOTAL** 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 / 138  
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.**

Full Name (Last, First, Middle Initial)  
Dr. Donald E Bissing

Mailing Address 18153 W 157th St

City Olathe State KS Zip Code 66062-6722

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

Name of Employer Information Requested per Best Efforts  
Occupation Information Requested per Best Efforts

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
MM / DD / YYYY  
06 / 04 / 2008

Transaction ID: SA11AI.13667

Amount of Each Receipt this Period  
1.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Guenther Bizer

Mailing Address 1590 Mountain View Dr

City Bayfield State CO Zip Code 81122-9656

FEC 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  
MM / DD / YYYY  
05 / 19 / 2008

Transaction ID: SA11AI.13218

Amount of Each Receipt this Period  
150.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Guenther Bizer

Mailing Address 1590 Mountain View Dr

City Bayfield State CO Zip Code 81122-9656

FEC 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  
MM / DD / YYYY  
06 / 30 / 2008

Transaction ID: SA11AI.13219

Amount of Each Receipt this Period  
150.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **301.00**

**TOTAL** 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 / 138  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Ms. Jean E Bowers

Mailing Address 519 Meade Ave

City State Zip Code  
Hanover PA 17331-3825

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 ▼ 201.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2008

**Transaction ID:** SA11AI.13639

Amount of Each Receipt this Period  
101.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs Marcia S Boyesen

Mailing Address 35 Ruen Rd

City State Zip Code  
Kempton PA 19529-8833

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

Name of Employer Occupation  
Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2008

**Transaction ID:** SA11AI.13387

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Frederick L. Bradford

Mailing Address 6200 River Road

City State Zip Code  
Bozeman MT 59718

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

Name of Employer Occupation  
Self Banker/Dentist/Shooting Instructor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
04 / 21 / 2008

**Transaction ID:** SA11AI.26009

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **701.00**

**TOTAL** 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 / 138

(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)  
AMERICA'S FOUNDATION

**A.**

Full Name (Last, First, Middle Initial)  
Mrs. Robert A Brigham

Mailing Address 1222 Monroe Ave

City State Zip Code  
Reading PA 19610-2432

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

Name of Employer Self Occupation  
Vascular Surgeon

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
201.00

Date of Receipt

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

Transaction ID: SA11AI.13648

Amount of Each Receipt this Period

1.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Stanley E Brown

Mailing Address PO Box 268

City State Zip Code  
Loganville PA 17342-0268

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

Name of Employer Browns Orchards Occupation  
Fruit Grower

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
250.00

Date of Receipt

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

Transaction ID: SA11AI.13521

Amount of Each Receipt this Period

150.00

**C.**

Full Name (Last, First, Middle Initial)  
Mrs Susan Valeria Brunoff

Mailing Address 334 W Cedar St

City State Zip Code  
New Holland PA 17557-1202

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

Name of Employer Occupation  
Ret.

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.13197

Amount of Each Receipt this Period

250.00

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

401.00

**TOTAL** 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 / 138  
(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)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Mr. & Mrs. D Burkett

Mailing Address 12201 N Salem Dr

City State Zip Code  
Baton Rouge LA 70814-7357

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 5 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.13558

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Janet R Buss

Mailing Address 902 Althausser Ave

City State Zip Code  
Dubuque IA 52001-2078

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

Name of Employer Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.13421

Amount of Each Receipt this Period  
201.00

**C.** Full Name (Last, First, Middle Initial)  
Mr Jack A Buzbee

Mailing Address 200 E Douglas St  
220 West Hill

City State Zip Code  
De Soto IL 62924-1512

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.14309

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **501.00**

**TOTAL** 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: (check only one)	PAGE 16 / 138
	<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)  
AMERICA'S FOUNDATION

<b>A.</b>	Full Name (Last, First, Middle Initial) Bruce J Campbell	Date of Receipt MM / DD / YYYY 05 / 14 / 2008
	Mailing Address 518 Buttevant Dr	<b>Transaction ID:</b> SA11AI.13346
	City State Zip Code Munroe Falls OH 44262-1741	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Campbell & Associates, Inc. Occupation: Corporate Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Charles R Caylor	Date of Receipt MM / DD / YYYY 05 / 14 / 2008
	Mailing Address 1435 E Ireland Rd	<b>Transaction ID:</b> SA11AI.13329
	City State Zip Code South Bend IN 46614-3453	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation: Ret. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Charles R Caylor	Date of Receipt MM / DD / YYYY 05 / 29 / 2008
	Mailing Address 1435 E Ireland Rd	<b>Transaction ID:</b> SA11AI.13327
	City State Zip Code South Bend IN 46614-3453	Amount of Each Receipt this Period 101.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation: Ret. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 401.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	401.00
<b>TOTAL</b> 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: (check only one)	PAGE 17 / 138
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
M Donald Coleman, Md

Mailing Address 1030 Greachen Point Rd

City Mamaroneck State NY Zip Code 10543-0543

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

Name of Employer M.D. Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 04 / 25 / 2008

Transaction ID: SA11AI.13510

Amount of Each Receipt this Period: 250.00

**B.** Full Name (Last, First, Middle Initial)  
Rev. John Conte

Mailing Address 1325 Prospect Ave

City Bethlehem State PA Zip Code 18018-4916

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

Name of Employer Information Requested per Best Efforts Occupation Information Requested per Best Efforts

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 04 / 22 / 2008

Transaction ID: SA11AI.13340

Amount of Each Receipt this Period: 100.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Michele Coppoc, Md

Mailing Address 921 Shady Grove Rd Apt F3

City Hot Springs Nation State AR Zip Code 71901-8083

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 ▼ 201.00

Date of Receipt: 05 / 14 / 2008

Transaction ID: SA11AI.13500

Amount of Each Receipt this Period: 51.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 401.00

**TOTAL** 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 / 138
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr Thomas J Cote	Date of Receipt MM / DD / YYYY 05 / 28 / 2008
	Mailing Address 6300 SE Winged Foot Dr	<b>Transaction ID:</b> SA11AI.13268
	City State Zip Code Stuart FL 34997-8656	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Robert C Cowen	Date of Receipt MM / DD / YYYY 05 / 05 / 2008
	Mailing Address 2756 Indian Springs Rd	<b>Transaction ID:</b> SA11AI.13222
	City State Zip Code Marianna FL 32446-6889	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Robert C Cowen	Date of Receipt MM / DD / YYYY 05 / 27 / 2008
	Mailing Address 2756 Indian Springs Rd	<b>Transaction ID:</b> SA11AI.13223
	City State Zip Code Marianna FL 32446-6889	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	450.00
<b>TOTAL</b> 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 / 138  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Mr. Robert C Cowen

Mailing Address 2756 Indian Springs Rd

City State Zip Code  
Marianna FL 32446-6889

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
06 / 04 / 2008

**Transaction ID:** SA11AI.13224

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. John P Craig, Jr

Mailing Address 871 Springton Rd

City State Zip Code  
Glenmoore PA 19343-1211

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

Name of Employer Occupation  
Planco, Inc. Sales Management

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 27 / 2008

**Transaction ID:** SA11AI.13185

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Mr John Crilly

Mailing Address 118 Summer Ridge Ln

City State Zip Code  
Georgetown TX 78633-5174

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

Name of Employer Occupation  
Solarcom Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
04 / 08 / 2008

**Transaction ID:** SA11AI.12980

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2100.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 138  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Mr. John H Crilly

Mailing Address 116 Summer Ridge Ln

City State Zip Code  
Georgetown TX 78633-5174

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

Name of Employer Occupation  
Ret.

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
06 / 23 / 2008

**Transaction ID:** SA11AI.12982

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr Thomas Cusick

Mailing Address 3601 Johnson Ave

City State Zip Code  
Bronx NY 10463-1633

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2008

**Transaction ID:** SA11AI.13355

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Fred N Dailey

Mailing Address 122 Bowne Station Rd

City State Zip Code  
Stockton NJ 08559-1907

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
MM / DD / YYYY  
06 / 24 / 2008

**Transaction ID:** SA11AI.13625

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 5300.00

**TOTAL** 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 / 138  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Mr. Jeanette Dekay

Mailing Address 6211 Foothills Dr

City Farmington State NM Zip Code 87402-4937

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

Name of Employer Information Requested per Best Efforts  
Occupation Information Requested per Best Efforts

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 06 / 24 / 2008  
**Transaction ID:** SA11AI.13400  
 Amount of Each Receipt this Period: 250.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs Dorothy Digiallorenzo

Mailing Address 1607 Ulster Ln

City West Chester State PA Zip Code 19380-6846

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

Name of Employer Retired  
Occupation 0

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 05 / 19 / 2008  
**Transaction ID:** SA11AI.13438  
 Amount of Each Receipt this Period: 75.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Kenneth L Dobson

Mailing Address 525 NE 78th St

City Seattle State WA Zip Code 98115-4122

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

Name of Employer  
Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 06 / 09 / 2008  
**Transaction ID:** SA11AI.13567  
 Amount of Each Receipt this Period: 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 575.00

**TOTAL** 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 / 138  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Ms Kathlyn Dunagan  
Mailing Address 1107 S Dwight Ave  
City Monahans State TX Zip Code 79756-5523  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 251.00  
Date of Receipt 05 / 16 / 2008  
Transaction ID: SA11AI.13253  
Amount of Each Receipt this Period 251.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. & Mrs. Carolyn Eldridge  
Mailing Address 607 3rd Key Dr  
City Fort Lauderdale State FL Zip Code 33304-3805  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested per Best Efforts Occupation Information Requested per Best Efforts  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00  
Date of Receipt 06 / 26 / 2008  
Transaction ID: SA11AI.13285  
Amount of Each Receipt this Period 500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Marcus Epperson  
Mailing Address 1507 Saddlecreek Dr  
City Houston State TX Zip Code 77090-2135  
FEC 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 06 / 27 / 2008  
Transaction ID: SA11AI.13446  
Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 851.00  
**TOTAL** 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: (check only one)	PAGE 23 / 138
	<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)  
AMERICA'S FOUNDATION

**A.**

Full Name (Last, First, Middle Initial) Mrs Mary H Fallon		Date of Receipt MM / DD / YYYY 06 / 02 / 2008
Mailing Address 3 Ocean Dr		<b>Transaction ID:</b> SA11AI.13422
City Seabrook	State NH	Zip Code 03874-5102
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

**B.**

Full Name (Last, First, Middle Initial) Mrs. Rosemary Faraj		Date of Receipt MM / DD / YYYY 06 / 24 / 2008
Mailing Address 3360 N Booth St		<b>Transaction ID:</b> SA11AI.13441
City Milwaukee	State WI	Zip Code 53212-1646
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

**C.**

Full Name (Last, First, Middle Initial) Mr Robert Field		Date of Receipt MM / DD / YYYY 04 / 18 / 2008
Mailing Address PO Box 428		<b>Transaction ID:</b> SA11AI.13276
City La Grange	State TX	Zip Code 78945-0428
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	700.00
<b>TOTAL</b> 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 / 138  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Donna M Fluehr

Mailing Address 1408 Plymouth Blvd.

City State Zip Code  
Plymouth Meeting PA 19462

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

Name of Employer Occupation  
Tot-Time Child Dev. Ctrs. CEO  
Inc.

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 1 / 2 0 0 8

**Transaction ID:** SA11AI.25982

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Patrick Franje

Mailing Address 424 College Hill Ave

City State Zip Code  
Oskaloosa IA 52577-1721

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

Name of Employer Occupation  
ORHC Social Worker

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 2 4 / 2 0 0 8

**Transaction ID:** SA11AI.13599

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. J Fuson

Mailing Address 3630 NW 47th St

City State Zip Code  
Oklahoma City OK 73112-6105

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 1 6 / 2 0 0 8

**Transaction ID:** SA11AI.13356

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **750.00**

**TOTAL** 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 / 138  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Mr. John W Galbraith

Mailing Address 500 Crestwood Dr Apt 1604

City State Zip Code  
Charlottesville VA 22903-4861

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

Name of Employer 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  
0 4 / 2 1 / 2 0 0 8

**Transaction ID:** SA11AI.13189

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. John W Galbraith

Mailing Address 500 Crestwood Dr Apt 1604

City State Zip Code  
Charlottesville VA 22903-4861

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 1 / 2 0 0 8

**Transaction ID:** SA11AI.13195

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
William M Garrett

Mailing Address 464 Oak Court

City State Zip Code  
Bensalem PA 19020

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

Name of Employer Occupation  
Drinker Biddle & Reath LLP Lawyer

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 5 / 2 1 / 2 0 0 8

**Transaction ID:** SA11AI.25959

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2300.00

**TOTAL** 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 / 138  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Dr. & Mrs. Kenneth L. Garver

Mailing Address 101 Stephens Ln

City State Zip Code  
Verona PA 15147-3035

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2008

**Transaction ID:** SA11AI.13258

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
James Geary

Mailing Address 113 Meadowbrook

City State Zip Code  
Randolph NJ 07869

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

Name of Employer Occupation  
PricewaterhouseCoopers Accountant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 21 / 2008

**Transaction ID:** SA11AI.26256

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Mary E Gehr

Mailing Address 518 Fairview Way

City State Zip Code  
Shawano WI 54166-2232

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

Name of Employer Occupation  
Information Requested per Best Efforts Information Requested per Best Efforts

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
06 / 25 / 2008

**Transaction ID:** SA11AI.13270

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **450.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 138
	<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)  
AMERICA'S FOUNDATION

<b>A.</b>	Full Name (Last, First, Middle Initial) Thomas J Gerg		Date of Receipt
	Mailing Address 550 N Michael St		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 19 / 2008
	City	State	Zip Code
	Saint Marys	PA	15857-1156
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.13636
Name of Employer		Occupation	Amount of Each Receipt this Period
		Retired	<input type="text"/> 101.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 201.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Ms Teresa L Gery		Date of Receipt
	Mailing Address 1307 Belasco Ave		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 12 / 2008
	City	State	Zip Code
	Pittsburgh	PA	15216-3347
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.13320
Name of Employer Information Requested per Best Efforts		Occupation Information Requested per Best Efforts	Amount of Each Receipt this Period
			<input type="text"/> 51.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 251.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Sandra E. Goodstein		Date of Receipt
	Mailing Address 1770 Melmar Rd		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 04 / 2008
	City	State	Zip Code
	Huntingdon Valley	PA	19006-7981
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.13263
Name of Employer Self Employed		Occupation Financial Advisor	Amount of Each Receipt this Period
			<input type="text"/> 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 652.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 138
	<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)  
**AMERICA'S FOUNDATION**

<b>A.</b>	Full Name (Last, First, Middle Initial) Ms. Susan R Gordon	Date of Receipt MM / DD / YYYY 04 / 29 / 2008
	Mailing Address 1212 NW 12th St	<b>Transaction ID:</b> SA11AI.13540
	City State Zip Code Andrews TX 79714-2708	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Brian Gordon, M.D.	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Brenda J Gottlieb	Date of Receipt MM / DD / YYYY 06 / 11 / 2008
	Mailing Address 8801 Hunting Trl	<b>Transaction ID:</b> SA11AI.13247
	City State Zip Code Indianapolis IN 46217-4616	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Gmg Motors Inc.	Occupation Auto Dealer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Brenda J Gottlieb	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 8801 Hunting Trl	<b>Transaction ID:</b> SA11AI.25933
	City State Zip Code Indianapolis IN 46217-4616	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Gmg Motors Inc.	Occupation Auto Dealer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>950.00</b>
<b>TOTAL</b> 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 / 138  
(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)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Mr Richard T Gregg

Mailing Address 80 Tromind Dr

City State Zip Code  
Mahwah NJ 07430-7430

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

Name of Employer Occupation  
The Gregg Company, Ltd Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 13 / 2008

**Transaction ID:** SA11AI.13171

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr J Tyler Griffin

Mailing Address 77 Middle Rd Apt 360

City State Zip Code  
Bryn Mawr PA 19010-1779

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2008

**Transaction ID:** SA11AI.13467

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Richard Standifer Griffith

Mailing Address PO Box 91610

City State Zip Code  
Lafayette LA 70509-1610

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

Name of Employer Occupation  
Self-Employed Investor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
MM / DD / YYYY  
04 / 20 / 2008

**Transaction ID:** SA11AI.26012

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1550.00

**TOTAL** 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 / 138  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Mr. Richard Standifer Griffith  
Mailing Address PO Box 91610  
City State Zip Code  
Lafayette LA 70509-1610  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-Employed Occupation  
Invester  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 550.00  
Date of Receipt M M / D D / Y Y Y Y Y  
0 4 / 2 5 / 2 0 0 8  
Transaction ID: SA11AI.13819  
Amount of Each Receipt this Period 100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Richard Standifer Griffith  
Mailing Address PO Box 91610  
City State Zip Code  
Lafayette LA 70509-1610  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-Employed Occupation  
Invester  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 650.00  
Date of Receipt M M / D D / Y Y Y Y Y  
0 6 / 1 7 / 2 0 0 8  
Transaction ID: SA11AI.13818  
Amount of Each Receipt this Period 100.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Shirley Griffiths  
Mailing Address 2216 Graffius Avenue Ext  
City State Zip Code  
Punxsutawney PA 15767-3916  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 281.00  
Date of Receipt M M / D D / Y Y Y Y Y  
0 5 / 1 2 / 2 0 0 8  
Transaction ID: SA11AI.13230  
Amount of Each Receipt this Period 141.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 341.00  
**TOTAL** 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 / 138  
(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)  
AMERICA'S FOUNDATION

**A.**

Full Name (Last, First, Middle Initial)  
Mrs. Shirley Griffiths

Mailing Address 2216 Graffius Avenue Ext

City State Zip Code  
Punxsutawney PA 15767-3916

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 306.00

Date of Receipt  
MM / DD / YYYY  
05 / 14 / 2008

Transaction ID: SA11AI.13231

Amount of Each Receipt this Period  
25.00

**B.**

Full Name (Last, First, Middle Initial)  
Mrs. Shirley Griffiths

Mailing Address 2216 Graffius Avenue Ext

City State Zip Code  
Punxsutawney PA 15767-3916

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 517.00

Date of Receipt  
MM / DD / YYYY  
06 / 23 / 2008

Transaction ID: SA11AI.13232

Amount of Each Receipt this Period  
211.00

**C.**

Full Name (Last, First, Middle Initial)  
Timothy Griffiths

Mailing Address 4291 State Rd.

City State Zip Code  
Phoenixville PA 19460

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

Name of Employer Occupation  
Fios, Inc. Sales Management

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2008

Transaction ID: SA11AI.25950

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **486.00**

**TOTAL** 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 / 138  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Mr Tom Gutshall

Mailing Address 24968 Okeefe Ln

City State Zip Code  
Los Altos CA 94022-4612

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

Name of Employer Occupation  
Cepheid Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2008

**Transaction ID:** SA11AI.13544

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Leu E Hammerl

Mailing Address 69 Ohara Rd

City State Zip Code  
Tonawanda NY 14150-6227

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 14 / 2008

**Transaction ID:** SA11AI.13549

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Violet B Hanna

Mailing Address 4123 Mary Ellen Ave

City State Zip Code  
Studio City CA 91604-2212

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
06 / 06 / 2008

**Transaction ID:** SA11AI.13542

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **750.00**

**TOTAL** 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 / 138  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Rosemary L Hegenbart  
Mailing Address 6266 Altura Ave

City State Zip Code  
La Crescenta CA 91214-2325

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
04 / 25 / 2008  
Transaction ID: SA11AI.13302  
Amount of Each Receipt this Period 25.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Rosemary L Hegenbart  
Mailing Address 6266 Altura Ave

City State Zip Code  
La Crescenta CA 91214-2325

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 375.00

Date of Receipt  
MM / DD / YYYY  
06 / 25 / 2008  
Transaction ID: SA11AI.13303  
Amount of Each Receipt this Period 100.00

**C.** Full Name (Last, First, Middle Initial)  
Daniel K Hennessy  
Mailing Address 4405 Beverly Dr

City State Zip Code  
Dallas TX 75205-3001

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

Name of Employer Occupation  
Hughes Luce Llp Attorney

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
06 / 27 / 2008  
Transaction ID: SA11AI.13538  
Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 375.00

**TOTAL** 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 / 138  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Mr. Brian J Henry

Mailing Address 500 Old Academy Rd

City State Zip Code  
Fairfield CT 06824-7140

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

Name of Employer Occupation  
Information Requested per Information Requested per Best Efforts  
Best Efforts

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 300.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	5	/	2	0	0	8

**Transaction ID:** SA11AI.13424

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Noelle J Hidalla

Mailing Address 308 Ravilla Ave

City State Zip Code  
Staples MN 56479-3309

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

Name of Employer Occupation  
Homemaker

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 300.00

Date of Receipt  

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

**Transaction ID:** SA11AI.13225

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Reynard Hoffmann

Mailing Address 5146 Belden Ave Apt C2

City State Zip Code  
Downers Grove IL 60515-4766

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

Name of Employer Occupation  
L P A Ret

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 300.00

Date of Receipt  

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

**Transaction ID:** SA11AI.13226

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **400.00**

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

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

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

FOR LINE NUMBER: PAGE 35 / 138  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Mr. Reynard Hoffmann

Mailing Address 5146 Belden Ave Apt C2

City Downers Grove State IL Zip Code 60515-4766

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

Name of Employer L P A Occupation Ret

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 05 / 28 / 2008  
**Transaction ID:** SA11AI.13227  
 Amount of Each Receipt this Period: 200.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Seraphine Holker

Mailing Address 1301 E 7th St Apt 113

City Monticello State MN Zip Code 55362-8102

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

Name of Employer Occupation Homemaker

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 206.00

Date of Receipt: 06 / 04 / 2008  
**Transaction ID:** SA11AI.13591  
 Amount of Each Receipt this Period: 20.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Patsy L Holland

Mailing Address 12409 Springwood Dr

City Oklahoma City State OK Zip Code 73120-1725

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

Name of Employer Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt: 06 / 04 / 2008  
**Transaction ID:** SA11AI.13654  
 Amount of Each Receipt this Period: 101.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 321.00

**TOTAL** 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 / 138  
(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)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Mr. Bruce H Hooper

Mailing Address 412 Inveraray Rd

City Villanova State PA Zip Code 19085-1138

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

Name of Employer US Marine Corps Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: MM / DD / YYYY  
05 / 28 / 2008

Transaction ID: SA11AI.13183

Amount of Each Receipt this Period: 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Thomas E Humphreys

Mailing Address 4006 SW 21st St

City Gainesville State FL Zip Code 32608-3318

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

Name of Employer Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: MM / DD / YYYY  
05 / 01 / 2008

Transaction ID: SA11AI.13306

Amount of Each Receipt this Period: 50.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Thomas E Humphreys

Mailing Address 4006 SW 21st St

City Gainesville State FL Zip Code 32608-3318

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

Name of Employer Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 311.00

Date of Receipt: MM / DD / YYYY  
05 / 15 / 2008

Transaction ID: SA11AI.13307

Amount of Each Receipt this Period: 71.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1121.00**

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

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

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

FOR LINE NUMBER: PAGE 37 / 138  
(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)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Mr. Thomas E Humphreys  
Mailing Address 4006 SW 21st St  
City Gainesville State FL Zip Code 32608-3318  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 382.00  
Date of Receipt 06 / 27 / 2008  
Transaction ID: SA11AI.13308  
Amount of Each Receipt this Period 71.00

**B.** Full Name (Last, First, Middle Initial)  
Mr & Mrs Philip Jakeway, Jr  
Mailing Address 17 Forbes Blvd  
City Eastchester State NY Zip Code 10709-1534  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Vice President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00  
Date of Receipt 05 / 05 / 2008  
Transaction ID: SA11AI.13461  
Amount of Each Receipt this Period 300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. C. Lee Johnson  
Mailing Address 8129 E Carefree Drive  
City Carefree State AZ Zip Code 85377-5377  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00  
Date of Receipt 05 / 12 / 2008  
Transaction ID: SA11AI.13560  
Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **621.00**  
**TOTAL** 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 / 138  
(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)  
AMERICA'S FOUNDATION

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Eldridge R Johnson, II

Mailing Address PO Box 467

City Edgemont State PA Zip Code 19028-0467

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

Name of Employer Retired Occupation Ret

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt: 05 / 14 / 2008  
**Transaction ID: SA11AI.13235**  
 Amount of Each Receipt this Period: 201.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Eldridge R Johnson, II

Mailing Address PO Box 467

City Edgemont State PA Zip Code 19028-0467

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

Name of Employer Retired Occupation Ret

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 502.00

Date of Receipt: 06 / 19 / 2008  
**Transaction ID: SA11AI.13234**  
 Amount of Each Receipt this Period: 301.00

**C.**

Full Name (Last, First, Middle Initial)  
Ms. Myrtle E. Jones

Mailing Address PO Box 205

City Telford State PA Zip Code 18969-0205

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

Name of Employer Solar Atmospher Occupation Electrical Engi

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 401.00

Date of Receipt: 05 / 12 / 2008  
**Transaction ID: SA11AI.13326**  
 Amount of Each Receipt this Period: 401.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **903.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 138  
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Ms. Mary C Jordan

Mailing Address 321 W South St

City State Zip Code  
Grayville IL 62844-1534

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

Name of Employer Occupation  
Ret.

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2008

**Transaction ID:** SA11AI.13272

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Joseph S. Keely

Mailing Address 1011 Winding Way

City State Zip Code  
Baltimore MD 21210-1232

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
04 / 14 / 2008

**Transaction ID:** SA11AI.12997

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Thomas Kelly

Mailing Address 5211 Arquilla Dr

City State Zip Code  
Richton Park IL 60471-1519

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

Name of Employer Occupation  
Governors State Univ Prof

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
MM / DD / YYYY  
04 / 29 / 2008

**Transaction ID:** SA11AI.13198

Amount of Each Receipt this Period  
200.00

**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 40 / 138  
 (check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Mr. Thomas Kelly

Mailing Address 5211 Arquilla Dr

City State Zip Code  
Richton Park IL 60471-1519

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

Name of Employer Occupation  
Governors State Univ Prof

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt  
MM / DD / YYYY  
06 / 25 / 2008

**Transaction ID:** SA11AI.13199

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
Miss Katherine M Kernicky

Mailing Address 544 S Wycombe Ave

City State Zip Code  
Lansdowne PA 19050-2846

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2008

**Transaction ID:** SA11AI.13522

Amount of Each Receipt this Period  
75.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Richard L Knoebel

Mailing Address 206 Knoebels Blvd

City State Zip Code  
Elysburg PA 17824-7125

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

Name of Employer Occupation  
H.H. Knoebel & Sons Owner/Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2008

**Transaction ID:** SA11AI.13305

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **375.00**

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



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

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

FOR LINE NUMBER: PAGE 41 / 138  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Deborah Jean Kolb  
Mailing Address 4105 Inspiration St  
City State Zip Code  
Schwenksville PA 19473-2066  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
CompuWorks DBA  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00  
Date of Receipt: 04 / 03 / 2008  
Transaction ID: SA11AI.13469  
Amount of Each Receipt this Period: 300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Michael Krasnerman  
Mailing Address 7 Partridge Hollow Rd  
City State Zip Code  
Greenwich CT 06831-2662  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
All Settled Group President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00  
Date of Receipt: 06 / 09 / 2008  
Transaction ID: SA11AI.13283  
Amount of Each Receipt this Period: 500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr Kenneth L. Kreuz  
Mailing Address 2276 Catherine St  
City State Zip Code  
Cortlandt Manor NY 10567-7260  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 285.00  
Date of Receipt: 05 / 19 / 2008  
Transaction ID: SA11AI.13967  
Amount of Each Receipt this Period: 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 900.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 138  
(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)  
AMERICA'S FOUNDATION

**A.**

Full Name (Last, First, Middle Initial)  
Mr Kenneth L. Kreuz

Mailing Address 2276 Catherine St

City Cortlandt Manor State NY Zip Code 10567-7260

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

Name of Employer Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt 06 / 24 / 2008

Transaction ID: SA11AI.13409

Amount of Each Receipt this Period 60.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr Kenneth L. Kreuz

Mailing Address 2276 Catherine St

City Cortlandt Manor State NY Zip Code 10567-7260

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

Name of Employer Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 495.00

Date of Receipt 06 / 30 / 2008

Transaction ID: SA11AI.13410

Amount of Each Receipt this Period 150.00

**C.**

Full Name (Last, First, Middle Initial)  
Ms Mildred Kuhn

Mailing Address 5005 Relleum Ave

City Cincinnati State OH Zip Code 45238-3807

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

Name of Employer Information Requested per Best Efforts Occupation Information Requested per Best Efforts

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 18 / 2008

Transaction ID: SA11AI.13293

Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **710.00**

**TOTAL** 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: (check only one)	PAGE 43 / 138
	<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)  
AMERICA'S FOUNDATION

<b>A.</b>	Full Name (Last, First, Middle Initial) Mrs. Mary J Kurtz		Date of Receipt MM / DD / YYYY 06 / 23 / 2008		
	Mailing Address 846 Leid Rd		<b>Transaction ID:</b> SA11AI.13324		
	City East Earl	State PA	Zip Code 17519-9795	Amount of Each Receipt this Period 101.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer	Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 201.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr Morton S Landy		Date of Receipt MM / DD / YYYY 04 / 28 / 2008		
	Mailing Address 100 Jacob Fryer Ln P O Box 126		<b>Transaction ID:</b> SA11AI.13380		
	City Mahaffey	State PA	Zip Code 15757-6508	Amount of Each Receipt this Period 150.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer	Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr Clinton W Lane, Jr		Date of Receipt MM / DD / YYYY 05 / 19 / 2008		
	Mailing Address 4 Oakleigh Ln		<b>Transaction ID:</b> SA11AI.13274		
	City Saint Louis	State MO	Zip Code 63124-1361	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer	Occupation Business Owner			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	751.00
<b>TOTAL</b> 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 44 / 138  
(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)  
AMERICA'S FOUNDATION

**A.**

Full Name (Last, First, Middle Initial)  
Mr John W Lapp

Mailing Address 41 Ridge View Dr

City Leola State PA Zip Code 17540-1119

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

Name of Employer Self-Employed Occupation Trucker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt 06 / 27 / 2008

Transaction ID: SA11AI.13357

Amount of Each Receipt this Period 110.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr John W Lapp

Mailing Address 41 Ridge View Dr

City Leola State PA Zip Code 17540-1119

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

Name of Employer Self-Employed Occupation Trucker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 331.00

Date of Receipt 06 / 27 / 2008

Transaction ID: SA11AI.13358

Amount of Each Receipt this Period 1.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr Andy Larson

Mailing Address 8740 Arbor St

City Duluth State MN Zip Code 55808-1436

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

Name of Employer Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 29 / 2008

Transaction ID: SA11AI.13556

Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **211.00**

**TOTAL** 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 45 / 138

(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)  
AMERICA'S FOUNDATION

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Charles E Lazure

Mailing Address 2725 N 45th Ave

City State Zip Code  
Omaha NE 68104-4526

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 525.00

Date of Receipt

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

Transaction ID: SA11AI.13248

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Charles E Lazure

Mailing Address 2725 N 45th Ave

City State Zip Code  
Omaha NE 68104-4526

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 575.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.13249

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Charles J Lemont

Mailing Address 54698 Bellingham Dr

City State Zip Code  
Shelby Township MI 48316-1298

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

Name of Employer Occupation  
Information Requested per Best Efforts Information Requested per Best Efforts

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 251.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.13374

Amount of Each Receipt this Period

51.00

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

201.00

**TOTAL** 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 46 / 138

(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)  
AMERICA'S FOUNDATION

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Charles J Lemont

Mailing Address 54698 Bellingham Dr

City State Zip Code  
Shelby Township MI 48316-1298

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

Name of Employer Information Requested per Best Efforts Occupation Information Requested per Best Efforts

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 301.00

Date of Receipt

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

Transaction ID: SA11AI.13375

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr Alan L Lewitzke

Mailing Address PO Box 249

City State Zip Code  
Mosinee WI 54455-0249

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

Name of Employer Information Requested per Best Efforts Occupation Information Requested per Best Efforts  
L. & S. Electric, Inc. President

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

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

Transaction ID: SA11AI.13192

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. James M Lysaght

Mailing Address 82 Albertion Place

City State Zip Code  
Mineola NY 11501-1501

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

Name of Employer Information Requested per Best Efforts Occupation Information Requested per Best Efforts  
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 5 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.13254

Amount of Each Receipt this Period

100.00

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

1150.00

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

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

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

FOR LINE NUMBER: PAGE 47 / 138  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Mr. Richard Mace

Mailing Address 39 Round Top Ln

City State Zip Code  
Gettysburg PA 17325-8746

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

Name of Employer Occupation  
Self-Employed Ret.

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 29 / 2008

**Transaction ID:** SA11AI.13517

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Theresa A Malany

Mailing Address 435 Misty Patch Rd

City State Zip Code  
Coatesville PA 19320-4613

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

Name of Employer Occupation  
Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
MM / DD / YYYY  
04 / 21 / 2008

**Transaction ID:** SA11AI.13405

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
Theresa A Malany

Mailing Address 435 Misty Patch Rd

City State Zip Code  
Coatesville PA 19320-4613

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

Name of Employer Occupation  
Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 321.00

Date of Receipt  
MM / DD / YYYY  
05 / 14 / 2008

**Transaction ID:** SA11AI.13406

Amount of Each Receipt this Period  
1.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 451.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 138

(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)  
AMERICA'S FOUNDATION

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Frederick R Marcus

Mailing Address 1094 Stillwood Dr NE

City State Zip Code  
Atlanta GA 30306-3536

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

Name of Employer Occupation  
Emory University Lecturer

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

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

Transaction ID: SA11AI.13527

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Joel Masiko

Mailing Address 7522 Flint Hill Rd

City State Zip Code  
New Tripoli PA 18066-3646

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 201.00

Date of Receipt

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

Transaction ID: SA11AI.13417

Amount of Each Receipt this Period

101.00

**C.**

Full Name (Last, First, Middle Initial)  
Ms. Cynthia P Matthews

Mailing Address 7299 Dillman Dr

City State Zip Code  
Hudson OH 44236-2442

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

Name of Employer 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  
0 5 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.13289

Amount of Each Receipt this Period

500.00

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

851.00

**TOTAL** 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: (check only one)	PAGE 49 / 138
	<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)  
AMERICA'S FOUNDATION

<b>A.</b>	Full Name (Last, First, Middle Initial) John M McCarthy	Date of Receipt MM / DD / YYYY 06 / 13 / 2008
	Mailing Address	Transaction ID: SA11AI.13458
	City State Zip Code	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Information Requested per Best Efforts	Occupation Information Requested per Best Efforts	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr William A McGuire, Jr	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 3913 Modlin St	Transaction ID: SA11AI.13404
	City State Zip Code Mesquite TX 75150-2235	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Clements Realtors	Occupation Real Estate Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mrs. Garratt McLellan	Date of Receipt MM / DD / YYYY 06 / 09 / 2008
	Mailing Address 270 Atheron Ave	Transaction ID: SA11AI.13546
	City State Zip Code Atherton CA 94027-4027	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer	Occupation Housewife	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	800.00
<b>TOTAL</b> 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 50 / 138
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Mr. Martin Miller

Mailing Address 780 Amaryllis Ave

City State Zip Code  
Oradell NJ 07649-1457

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

Name of Employer Information Requested per Best Efforts  
Occupation Information Requested per Best Efforts

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2008

Transaction ID: SA11AI.13334

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Martin Miller

Mailing Address 780 Amaryllis Ave

City State Zip Code  
Oradell NJ 07649-1457

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

Name of Employer Information Requested per Best Efforts  
Occupation Information Requested per Best Efforts

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
MM / DD / YYYY  
06 / 24 / 2008

Transaction ID: SA11AI.13335

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Joel And Molly Gilley

Mailing Address 6298 Domarray Street

City State Zip Code  
Coopersburg PA 18036

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

Name of Employer Promus Financial  
Occupation Executive Compensation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 21 / 2008

Transaction ID: SA11AI.25952

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **700.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 51 / 138
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.**

Full Name (Last, First, Middle Initial)  
Mr. John D Moynahan, Jr

Mailing Address 21 Cross Rd

City Darien State CT Zip Code 06820-6107

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

Name of Employer Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2008

**Transaction ID:** SA11AI.13459

Amount of Each Receipt this Period 200.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. John Mumford

Mailing Address 2925 Woodside Rd

City Woodside State CA Zip Code 94062-2443

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

Name of Employer Occupation Self-Employed

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 04 / 2008

**Transaction ID:** SA11AI.12984

Amount of Each Receipt this Period 5000.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr Steven M Napolitano

Mailing Address 633 3rd Ave

City New York State NY Zip Code 10017-6706

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

Name of Employer Occupation Senior Executive Vice Presiden

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 30 / 2008

**Transaction ID:** SA11AI.13177

Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **6200.00**

**TOTAL** 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: (check only one)	PAGE 52 / 138
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.**

Full Name (Last, First, Middle Initial)  
Mary Naugle

Mailing Address 1605 N 10th St

City Reading State PA Zip Code 19604-1706

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

Name of Employer Occupation Unemployed

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 28 / 2008

Transaction ID: SA11AI.13265

Amount of Each Receipt this Period 500.00

**B.**

Full Name (Last, First, Middle Initial)  
Ms. Irene Neale

Mailing Address 8325 SW Mohawk St Apt 119

City Tualatin State OR Zip Code 97062-9141

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

Name of Employer Self Employed Occupation Registered Nurse

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 27 / 2008

Transaction ID: SA11AI.13565

Amount of Each Receipt this Period 200.00

**C.**

Full Name (Last, First, Middle Initial)  
Mrs Rachel A Nickel

Mailing Address 854 Stonebridge Dr

City Lancaster State PA Zip Code 17601-1478

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

Name of Employer Armstrong World Industries, Inc. Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 27 / 2008

Transaction ID: SA11AI.13429

Amount of Each Receipt this Period 200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **900.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 53 / 138  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Mr. Reade B Nimick

Mailing Address 1101 Lincoln Dr

City State Zip Code  
West Chester PA 19380-5721

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

Name of Employer Occupation  
Ret

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2008

Transaction ID: SA11AI.13418

Amount of Each Receipt this Period  
101.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Roberta R O'leary

Mailing Address 360 River Rd

City State Zip Code  
Beaver PA 15009-2816

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

Name of Employer Occupation  
Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
MM / DD / YYYY  
05 / 14 / 2008

Transaction ID: SA11AI.13626

Amount of Each Receipt this Period  
101.00

**C.** Full Name (Last, First, Middle Initial)  
Ms Helen V O'Reilly

Mailing Address 4565 NW 3rd St Apt C

City State Zip Code  
Delray Beach FL 33445-2760

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

Name of Employer Occupation  
Ret.

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
05 / 28 / 2008

Transaction ID: SA11AI.13342

Amount of Each Receipt this Period  
400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **602.00**

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

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

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

FOR LINE NUMBER: PAGE 54 / 138  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Mr. Ray P Oden, Jr  
Mailing Address 702 Thora Blvd  
City State Zip Code  
Shreveport LA 71106-1824  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1500.00  
Date of Receipt M M / D D / Y Y Y Y Y  
0 6 / 0 2 / 2 0 0 8  
Transaction ID: SA11AI.13167  
Amount of Each Receipt this Period 500.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Eileen Ormond  
Mailing Address 6549 Lyceum Ct  
City State Zip Code  
Cincinnati OH 45230-2402  
FEC ID number of contributing federal political committee. **C**  
Name of Employer re 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 5 / 2 1 / 2 0 0 8  
Transaction ID: SA11AI.13291  
Amount of Each Receipt this Period 500.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Suzanne A Palmer  
Mailing Address 108 S 300th Pl  
City State Zip Code  
Federal Way WA 98003-4310  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Homemaker  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 700.00  
Date of Receipt M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8  
Transaction ID: SA11AI.13168  
Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1500.00  
**TOTAL** 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: (check only one)	PAGE 55 / 138
	<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)  
AMERICA'S FOUNDATION

<b>A.</b>	Full Name (Last, First, Middle Initial) Mrs. Lisa W Pandelidis	Date of Receipt MM / DD / YYYY 06 / 23 / 2008
	Mailing Address 1871 Grantley Rd	<b>Transaction ID:</b> SA11AI.13163
	City York State PA Zip Code 17403-4440	Amount of Each Receipt this Period 1500.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr Michael C Pascucci	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 392 Duck Pond Rd	<b>Transaction ID:</b> SA11AI.13513
	City Locust Valley State NY Zip Code 11560-2405	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation Self-Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. John T. Pearson	Date of Receipt MM / DD / YYYY 05 / 13 / 2008
	Mailing Address 51 Pine St	<b>Transaction ID:</b> SA11AI.13607
	City Rye State NH Zip Code 03870-2641	Amount of Each Receipt this Period 106.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation Tax Executive Rjr Nabisco Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 211.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1856.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 56 / 138  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Mr John Penson

Mailing Address 3756 Armstrong Ave

City State Zip Code  
Dallas TX 75205-3837

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

Name of Employer Occupation  
Penson Properties Inc Investor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2008

**Transaction ID:** SA11AI.13229

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. George O Pfaff

Mailing Address 16 Beaver Creek Ln

City State Zip Code  
Asheville NC 28804-2765

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2008

**Transaction ID:** SA11AI.13190

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Thomas J. Posaatko

Mailing Address 110 Neptune Dr

City State Zip Code  
Newark DE 19711-3011

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

Name of Employer Occupation  
Information Requested per Best Efforts Information Requested per Best Efforts

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
06 / 03 / 2008

**Transaction ID:** SA11AI.13267

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1500.00

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



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

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

FOR LINE NUMBER: PAGE 57 / 138  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Katherine Pryor  
Mailing Address 544 Innsbruck Ave  
City State Zip Code  
Great Falls VA 22066-2632  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Housewife  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2008  
Transaction ID: SA11AI.13187  
Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Travis Rankin  
Mailing Address 425 Alcatraz Ave Apt 1  
City State Zip Code  
Oakland CA 94609-1152  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Allied Barton Protective Servi Security Guard  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 251.00  
Date of Receipt  
MM / DD / YYYY  
06 / 27 / 2008  
Transaction ID: SA11AI.13379  
Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Paul Reynolds  
Mailing Address 6930 Cahaba Valley Road Suite 202  
City State Zip Code  
Birmingham AL 35242  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Reynolds Technical Associates, LLC Broadcast Development  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00  
Date of Receipt  
MM / DD / YYYY  
05 / 23 / 2008  
Transaction ID: SA11AI.25942  
Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1350.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 58 / 138  
(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)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Mr. Richard D. Richardson

Mailing Address 9 Foxtail Ln

City State Zip Code  
Chadds Ford PA 19317-9778

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

Name of Employer Occupation  
Solid State Equipment Cor- Executive  
porat

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt  
MM / DD / YYYY  
06 / 19 / 2008

**Transaction ID:** SA11AI.12988

Amount of Each Receipt this Period  
3000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Daniel L. Root

Mailing Address 5201 College Blvd

City State Zip Code  
Overland Park KS 66211-1623

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

Name of Employer Occupation  
Rootlab President

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
04 / 02 / 2008

**Transaction ID:** SA11AI.12986

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Ms Ellen C Routson

Mailing Address 1401 Hermits Way

City State Zip Code  
The Dalles OR 97058-3807

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
MM / DD / YYYY  
06 / 24 / 2008

**Transaction ID:** SA11AI.13507

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **8100.00**

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

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

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

FOR LINE NUMBER: PAGE 59 / 138  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Mrs Shirley A Rowold  
Mailing Address 18480 Fm 3204

City State Zip Code  
Brownsboro TX 75756-4048

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

Name of Employer Occupation  
Self Employed Landman

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
MM / DD / YYYY  
06 / 09 / 2008  
Transaction ID: SA11AI.13601  
Amount of Each Receipt this Period 50.00

**B.** Full Name (Last, First, Middle Initial)  
Mr George J Russ  
Mailing Address 204 Aqueduct Rd

City State Zip Code  
Washington Crossin PA 18977-1328

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
04 / 25 / 2008  
Transaction ID: SA11AI.13201  
Amount of Each Receipt this Period 100.00

**C.** Full Name (Last, First, Middle Initial)  
Mr George J Russ  
Mailing Address 204 Aqueduct Rd

City State Zip Code  
Washington Crossin PA 18977-1328

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
MM / DD / YYYY  
04 / 25 / 2008  
Transaction ID: SA11AI.13202  
Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 250.00

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

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

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

FOR LINE NUMBER: PAGE 60 / 138  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Mr George J Russ

Mailing Address 204 Aqueduct Rd

City Washington Crossin State PA Zip Code 18977-1328

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

Name of Employer Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 701.00

Date of Receipt 05 / 14 / 2008  
Transaction ID: SA11AI.13200  
Amount of Each Receipt this Period 101.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. C Andrew Russell

Mailing Address 625 Liberty Ave

City Pittsburgh State PA Zip Code 15222-3110

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

Name of Employer Occupation Investor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 09 / 2008  
Transaction ID: SA11AI.13179  
Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Daniel D. Sahakian

Mailing Address PO Box 649

City State College State PA Zip Code 16804-0649

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

Name of Employer Occupation Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt 05 / 12 / 2008  
Transaction ID: SA11AI.13322  
Amount of Each Receipt this Period 1.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1102.00

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

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

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

FOR LINE NUMBER: PAGE 61 / 138  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Mr Vincent Schmitz

Mailing Address 4207 Montview Blvd

City State Zip Code  
Denver CO 80207-3725

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

Name of Employer Citywide Banks Occupation Banker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt MM / DD / YYYY  
06 / 30 / 2008

**Transaction ID:** SA11AI.13448

Amount of Each Receipt this Period 300.00

**B.** Full Name (Last, First, Middle Initial)  
Margaret A Schuhmann

Mailing Address 1622 Dauphin Ave

City State Zip Code  
Reading PA 19610-2314

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

Name of Employer Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 601.00

Date of Receipt MM / DD / YYYY  
05 / 12 / 2008

**Transaction ID:** SA11AI.13239

Amount of Each Receipt this Period 301.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Robert E Shanahan

Mailing Address 3028 Duncan Ln

City State Zip Code  
Pittsburgh PA 15236-1570

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

Name of Employer Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt MM / DD / YYYY  
05 / 09 / 2008

**Transaction ID:** SA11AI.13551

Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **851.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 62 / 138  
(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)  
**AMERICA'S FOUNDATION**

**A.**

Full Name (Last, First, Middle Initial)  
Mr Thomas P Sharky

Mailing Address 6230 Brushrun Rd

City State Zip Code  
Bethel Park PA 15102-2214

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

Name of Employer Information Requested per Best Efforts  
Occupation Information Requested per Best Efforts

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
04 / 18 / 2008

**Transaction ID:** SA11AI.13194

Amount of Each Receipt this Period  
1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Leonard M Sigurdson

Mailing Address 4169 W Birchview Rd

City State Zip Code  
Grasston MN 55030-2106

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

Name of Employer Self  
Occupation Farmer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2008

**Transaction ID:** SA11AI.13271

Amount of Each Receipt this Period  
175.00

**C.**

Full Name (Last, First, Middle Initial)  
L. Jane Silverthorn

Mailing Address 646 Wagner Rd

City State Zip Code  
Lafayette Hill PA 19444-2039

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

Name of Employer  
Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  
MM / DD / YYYY  
04 / 23 / 2008

**Transaction ID:** SA11AI.13211

Amount of Each Receipt this Period  
800.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1975.00**

**TOTAL** 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 63 / 138  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Mr Jerry T Simpson  
Mailing Address 210 E Lisburn Rd  
City Mechanicsburg State PA Zip Code 17055-5541  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Ret.  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00  
Date of Receipt 05 / 21 / 2008  
Transaction ID: SA11AI.13338  
Amount of Each Receipt this Period 100.00

**B.** Full Name (Last, First, Middle Initial)  
Miss Diane F Skiles  
Mailing Address PO Box 128  
City New Oxford State PA Zip Code 17350-0128  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested per Best Efforts Occupation Information Requested per Best Efforts  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00  
Date of Receipt 05 / 29 / 2008  
Transaction ID: SA11AI.13463  
Amount of Each Receipt this Period 300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Edward Slack  
Mailing Address 4248 Hermitage Ct  
City Allison Park State PA Zip Code 15101-2973  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 201.00  
Date of Receipt 05 / 14 / 2008  
Transaction ID: SA11AI.13319  
Amount of Each Receipt this Period 201.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 601.00  
**TOTAL** 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: (check only one)	PAGE 64 / 138
	<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)  
AMERICA'S FOUNDATION

**A.**

Full Name (Last, First, Middle Initial) Mr Daniel G. Smith		Date of Receipt MM / DD / YYYY 06 / 30 / 2008
Mailing Address 7 Woodbine Rd		Transaction ID: SA11AI.13304
City Florham Park	State NJ	Zip Code 07932-2649
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer	Occupation Ret	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

**B.**

Full Name (Last, First, Middle Initial) Mrs. Carolyn Snyder		Date of Receipt MM / DD / YYYY 04 / 18 / 2008
Mailing Address 2294 Manistique Lakes Dr		Transaction ID: SA11AI.13212
City Lebanon	State OH	Zip Code 45036-8979
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Information Requested per Best Efforts	Occupation Information Requested per Best Efforts	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

**C.**

Full Name (Last, First, Middle Initial) Mr. Paul Songer, Sr.		Date of Receipt MM / DD / YYYY 06 / 24 / 2008
Mailing Address PO Box 76		Transaction ID: SA11AI.13634
City Washington	State PA	Zip Code 15301-0076
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	450.00
<b>TOTAL</b> 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 65 / 138  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Ms Corinne Spence  
Mailing Address 22834 E Cliff Dr  
City Santa Cruz State CA Zip Code 95062-5449  
FEC 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 MM / DD / YYYY 06 / 30 / 2008  
Transaction ID: SA11AI.13278  
Amount of Each Receipt this Period 400.00

**B.** Full Name (Last, First, Middle Initial)  
Ms Dian Graves Stai  
Mailing Address 400 Pine St Ste 1000  
City Abilene State TX Zip Code 79601-5142  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Ret.  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 3000.00  
Date of Receipt MM / DD / YYYY 04 / 07 / 2008  
Transaction ID: SA11AI.12991  
Amount of Each Receipt this Period 3000.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Franklin A Stauffer  
Mailing Address 620 E Arch St  
City Palmyra State PA Zip Code 17078-1805  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 202.00  
Date of Receipt MM / DD / YYYY 06 / 23 / 2008  
Transaction ID: SA11AI.13416  
Amount of Each Receipt this Period 51.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3451.00  
**TOTAL** 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 66 / 138
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Virginia J Steele

Mailing Address 6382 Jackson St

City Pittsburgh State PA Zip Code 15206-2232

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

Name of Employer Information Requested per Best Efforts  
Occupation Information Requested per Best Efforts

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 24 / 2008  
Transaction ID: SA11AI.13428  
Amount of Each Receipt this Period 100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. William Stewart

Mailing Address PO Box 159

City Stevenson State MD Zip Code 21153-0159

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

Name of Employer  
Occupation Investment Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt 05 / 21 / 2008  
Transaction ID: SA11AI.13497  
Amount of Each Receipt this Period 151.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Joey Storer

Mailing Address 4500 Linden Dr

City Midland State MI Zip Code 48640-2673

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

Name of Employer Dow Chemical Comp.  
Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 02 / 2008  
Transaction ID: SA11AI.13555  
Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 501.00

**TOTAL** 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 67 / 138  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Mrs Ada A Strassenburgh

Mailing Address PO Box 608  
RR 9 Box 2370

City State Zip Code  
Ocean View NJ 08230-0608

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.13215

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs Ada A Strassenburgh

Mailing Address PO Box 608  
RR 9 Box 2370

City State Zip Code  
Ocean View NJ 08230-0608

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.13213

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs Ada A Strassenburgh

Mailing Address PO Box 608  
RR 9 Box 2370

City State Zip Code  
Ocean View NJ 08230-0608

FEC 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  
0 5 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.13214

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 250.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 68 / 138
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Mr. Zdzislaw K. Strzalkowski

Mailing Address 6 Dandelion Dr

City Boiling Springs State PA Zip Code 17007-9735

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

Name of Employer Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 04 / 17 / 2008  
Transaction ID: SA11AI.13159  
Amount of Each Receipt this Period: 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Zdzislaw K. Strzalkowski

Mailing Address 6 Dandelion Dr

City Boiling Springs State PA Zip Code 17007-9735

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

Name of Employer Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 05 / 05 / 2008  
Transaction ID: SA11AI.13160  
Amount of Each Receipt this Period: 100.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Zdzislaw K. Strzalkowski

Mailing Address 6 Dandelion Dr

City Boiling Springs State PA Zip Code 17007-9735

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

Name of Employer Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1600.00

Date of Receipt: 06 / 23 / 2008  
Transaction ID: SA11AI.13161  
Amount of Each Receipt this Period: 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1600.00

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

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

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

FOR LINE NUMBER: PAGE 69 / 138  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Mr Robert Sunderland  
 Mailing Address 953 Pyrite Ave  
 City Henderson State NV Zip Code 89011-3059  
 Date of Receipt 05 / 15 / 2008  
**Transaction ID:** SA11AI.13250  
 Amount of Each Receipt this Period 101.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation Ret.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

**B.** Full Name (Last, First, Middle Initial)  
Mr Robert Sunderland  
 Mailing Address 953 Pyrite Ave  
 City Henderson State NV Zip Code 89011-3059  
 Date of Receipt 06 / 05 / 2008  
**Transaction ID:** SA11AI.17567  
 Amount of Each Receipt this Period 50.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation Ret.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 351.00

**C.** Full Name (Last, First, Middle Initial)  
Mr Robert Sunderland  
 Mailing Address 953 Pyrite Ave  
 City Henderson State NV Zip Code 89011-3059  
 Date of Receipt 06 / 27 / 2008  
**Transaction ID:** SA11AI.13251  
 Amount of Each Receipt this Period 50.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation Ret.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 401.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 201.00  
**TOTAL** 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: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	PAGE 70 / 138
	(check only one)	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

<b>A.</b>	Full Name (Last, First, Middle Initial) Wilson H. Taylor	Date of Receipt MM / DD / YYYY 05 / 13 / 2008
	Mailing Address 1732 Kimberton Rd	<b>Transaction ID:</b> SA11AI.12989
	City State Zip Code Phoenixville PA 19460-1627	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Retired	Occupation Ret	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Dr. Ana M. Thompson	Date of Receipt MM / DD / YYYY 05 / 22 / 2008
	Mailing Address 8730 Birch Bark Dr	<b>Transaction ID:</b> SA11AI.13287
	City State Zip Code Sylvania OH 43560-8933	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Anders Dermatology	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr Robert L Toner	Date of Receipt MM / DD / YYYY 05 / 19 / 2008
	Mailing Address 969 Horsham Rd	<b>Transaction ID:</b> SA11AI.12993
	City State Zip Code Horsham PA 19044-1326	Amount of Each Receipt this Period 2501.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Self-Employed	Occupation Landscaper	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2501.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4001.00
<b>TOTAL</b> 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 71 / 138
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. P Tracy		Date of Receipt																					
	Mailing Address 1025 Park Pl Apt 159		<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>5</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	5		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	5		0	5		2	0	0	8														
	City State Zip Code Mishawaka IN 46545-3551		<b>Transaction ID:</b> SA11AI.13331																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period																						
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation Ret.  Aggregate Year-to-Date ▼ 300.00																						

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. P Tracy		Date of Receipt																					
	Mailing Address 1025 Park Pl Apt 159		<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>5</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	9		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	5		1	9		2	0	0	8														
	City State Zip Code Mishawaka IN 46545-3551		<b>Transaction ID:</b> SA11AI.13333																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period																						
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation Ret.  Aggregate Year-to-Date ▼ 401.00																						

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Robert S Troth		Date of Receipt																					
	Mailing Address 18 Saint Charles Sq		<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>5</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	1		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	5		2	1		2	0	0	8														
	City State Zip Code Huntsville AL 35801-2848		<b>Transaction ID:</b> SA11AI.13499																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period																						
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation Retired  Aggregate Year-to-Date ▼ 251.00																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	452.00
<b>TOTAL</b> 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 72 / 138  
(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)  
AMERICA'S FOUNDATION

**A.**

Full Name (Last, First, Middle Initial)  
Mr. John Turnbull

Mailing Address PO Box 407

City State Zip Code  
Hubbard OR 97032-0407

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

Name of Employer Occupation  
Parker Buildings, Inc. General Manager

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 6 / 2 0 0 8

Transaction ID: SA11AI.13280

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. John Turnbull

Mailing Address PO Box 407

City State Zip Code  
Hubbard OR 97032-0407

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

Name of Employer Occupation  
Parker Buildings, Inc. General Manager

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

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

Transaction ID: SA11AI.13281

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)  
Mrs. Kathleen Tyndall

Mailing Address 11229 W Dora Ct

City State Zip Code  
Wichita KS 67209-1280

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

Name of Employer Occupation  
Information Requested per Best Efforts Information Requested per Best Efforts

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 225.00

Date of Receipt

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

Transaction ID: SA11AI.13575

Amount of Each Receipt this Period

25.00

**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 73 / 138  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Kathleen Tyndall  
Mailing Address 11229 W Dora Ct  
City State Zip Code  
Wichita KS 67209-1280  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Information Requested per Information Requested per Best Efforts  
Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 226.00  
Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 4 / 2 0 0 8  
Transaction ID: SA11AI.13574  
Amount of Each Receipt this Period  
1.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs Julie Ungarino  
Mailing Address 424 W Livingston Pl  
City State Zip Code  
Metairie LA 70005-0005  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Homemaker  
Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 201.00  
Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 5 / 2 0 0 8  
Transaction ID: SA11AI.13652  
Amount of Each Receipt this Period  
201.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. James D Vargo  
Mailing Address 6306 Deacon Cir  
City State Zip Code  
Windermere FL 34786-8938  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Daniels Mfg Corp Bus Exec  
Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1200.00  
Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 9 / 2 0 0 8  
Transaction ID: SA11AI.13173  
Amount of Each Receipt this Period  
1200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1402.00  
**TOTAL** 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 74 / 138  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Mr Howard Varner

Mailing Address 222 Valhalla Dr

City Solvang State CA Zip Code 93463-3101

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

Name of Employer Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 01 / 2008  
Transaction ID: SA11AI.13474  
Amount of Each Receipt this Period 300.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Marlys Veeh

Mailing Address 1122 Castlegate Ln

City Santa Ana State CA Zip Code 92705-2944

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

Name of Employer Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 25 / 2008  
Transaction ID: SA11AI.13297  
Amount of Each Receipt this Period 500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Daniel J. Walsh

Mailing Address 4 N 32nd Ave

City Longport State NJ Zip Code 08403-1524

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

Name of Employer Occupation Medimmune, Inc. Project Mgr.

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 11 / 2008  
Transaction ID: SA11AI.13238  
Amount of Each Receipt this Period 200.00

**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 75 / 138  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**AMERICA'S FOUNDATION**

**A.** Full Name (Last, First, Middle Initial)  
Mr. Daniel J. Walsh

Mailing Address **4 N 32nd Ave**

City **Longport** State **NJ** Zip Code **08403-1524**

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

Name of Employer **Medimmune, Inc.** Occupation **Project Mgr.**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt **05 / 02 / 2008**  
**Transaction ID: SA11AI.13237**  
 Amount of Each Receipt this Period **150.00**

**B.** Full Name (Last, First, Middle Initial)  
Mr. Daniel J. Walsh

Mailing Address **4 N 32nd Ave**

City **Longport** State **NJ** Zip Code **08403-1524**

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

Name of Employer **Medimmune, Inc.** Occupation **Project Mgr.**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **601.00**

Date of Receipt **06 / 16 / 2008**  
**Transaction ID: SA11AI.13236**  
 Amount of Each Receipt this Period **151.00**

**C.** Full Name (Last, First, Middle Initial)  
Mr Michael A Warehime

Mailing Address **6663 Moulstown Rd E**

City **Hanover** State **PA** Zip Code **17331-6819**

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

Name of Employer **Snyder's Of Hanover** Occupation **Chairman/C.E.O.**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **05 / 19 / 2008**  
**Transaction ID: SA11AI.13181**  
 Amount of Each Receipt this Period **1000.00**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1301.00**

**TOTAL** 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: (check only one)	PAGE 76 / 138
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr & Mrs Arthur Weiner	Date of Receipt MM / DD / YYYY 04 / 18 / 2008
	Mailing Address 101 Piney Woods Ct Apt 222	Transaction ID: SA11AI.13295
	City State Zip Code Houston TX 77077-5285	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Information Requested per Best Efforts	Occupation Information Requested per Best Efforts	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mrs. Nancy C Weiss	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 1742 Cortland Ln	Transaction ID: SA11AI.13411
	City State Zip Code Bethlehem PA 18015-9065	Amount of Each Receipt this Period 6.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 206.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Father Thomas J Welsh	Date of Receipt MM / DD / YYYY 04 / 22 / 2008
	Mailing Address 1325 Prospect Ave	Transaction ID: SA11AI.13339
	City State Zip Code Bethlehem PA 18018-4916	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	556.00
<b>TOTAL</b> 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 77 / 138  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Ms. Linda White

Mailing Address PO Box 469

City State Zip Code  
Franklin NC 28744-0469

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
MM / DD / YYYY  
06 / 27 / 2008

**Transaction ID:** SA11AI.13614

Amount of Each Receipt this Period  
10.00

**B.** Full Name (Last, First, Middle Initial)  
Ms Mona Rae Williams

Mailing Address 314 9th St

City State Zip Code  
Monongahela PA 15063-2820

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt  
MM / DD / YYYY  
06 / 10 / 2008

**Transaction ID:** SA11AI.13492

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Ms Carol K Wilson

Mailing Address PO Box 2366

City State Zip Code  
Wichita KS 67201-2366

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

Name of Employer Occupation  
The Slope Small Business Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1400.00

Date of Receipt  
MM / DD / YYYY  
06 / 13 / 2008

**Transaction ID:** SA11AI.13169

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1110.00

**TOTAL** 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 78 / 138  
(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)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Ms. Betty Wolfe

Mailing Address 1600 Texas St Apt 1611

City State Zip Code  
Fort Worth TX 76102-7500

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 601.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2008

Transaction ID: SA11AI.13240

Amount of Each Receipt this Period  
1.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Josephine Wood

Mailing Address 1400 Enterprise Dr Apt N330

City State Zip Code  
Lynchburg VA 24502-5769

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
06 / 24 / 2008

Transaction ID: SA11AI.13209

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Josephine Wood

Mailing Address 1400 Enterprise Dr Apt N330

City State Zip Code  
Lynchburg VA 24502-5769

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2008

Transaction ID: SA11AI.13206

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **601.00**

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

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

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

FOR LINE NUMBER: PAGE 79 / 138  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Ms. Josephine Wood

Mailing Address 1400 Enterprise Dr Apt N330

City Lynchburg State VA Zip Code 24502-5769

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

Name of Employer Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt 05 / 14 / 2008  
Transaction ID: SA11AI.13207  
Amount of Each Receipt this Period 1.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Anne Wunsche

Mailing Address 261 E Line St Apt G

City Bishop State CA Zip Code 93514-3551

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

Name of Employer Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 05 / 21 / 2008  
Transaction ID: SA11AI.13203  
Amount of Each Receipt this Period 300.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Anne Wunsche

Mailing Address 261 E Line St Apt G

City Bishop State CA Zip Code 93514-3551

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

Name of Employer Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt 06 / 30 / 2008  
Transaction ID: SA11AI.13204  
Amount of Each Receipt this Period 300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **601.00**

**TOTAL** 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 80 / 138
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Mr. James H Wurz, Jr  
Mailing Address 6301 Sutliff Rd  
City Oriskany State NY Zip Code 13424-4326  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2300.00  
Date of Receipt 05 / 27 / 2008  
Transaction ID: SA11AI.12995  
Amount of Each Receipt this Period 2300.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Jeanette F Yandow  
Mailing Address 1133 Long Pond Rd  
City Rochester State NY Zip Code 14626-1123  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 450.00  
Date of Receipt 05 / 21 / 2008  
Transaction ID: SA11AI.13242  
Amount of Each Receipt this Period 250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr Richard Young  
Mailing Address 205 Hudson Trce # B  
City Augusta State GA Zip Code 30907-2010  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Employed Occupation Investment Advisor  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00  
Date of Receipt 06 / 30 / 2008  
Transaction ID: SA11AI.13553  
Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2800.00  
**TOTAL** 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: (check only one)	PAGE 81 / 138
	<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)  
AMERICA'S FOUNDATION

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr Donald E Zakman	Date of Receipt MM / DD / YYYY 05 / 19 / 2008
	Mailing Address 103 Catalpa Ridge Rd	<b>Transaction ID:</b> SA11AI.13261
	City State Zip Code Pittsburgh PA 15238-2213	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Frank M. Zielinski	Date of Receipt MM / DD / YYYY 05 / 14 / 2008
	Mailing Address 126 E Wing St Apt 211	<b>Transaction ID:</b> SA11AI.13298
	City State Zip Code Arlington Heights IL 60004-6064	Amount of Each Receipt this Period 51.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation Barnaby's of Northbrook Restaurant Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 226.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Frank M. Zielinski	Date of Receipt MM / DD / YYYY 05 / 28 / 2008
	Mailing Address 126 E Wing St Apt 211	<b>Transaction ID:</b> SA11AI.13300
	City State Zip Code Arlington Heights IL 60004-6064	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation Barnaby's of Northbrook Restaurant Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 276.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>601.00</b>
<b>TOTAL</b> 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 82 / 138
	(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)  
AMERICA'S FOUNDATION

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Frank M. Zielinski

Mailing Address 126 E Wing St Apt 211

City State Zip Code  
Arlington Heights IL 60004-6064

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

Name of Employer Occupation  
Barnaby's of Northbrook Restaurant Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 326.00

Date of Receipt  
MM / DD / YYYY  
06 / 10 / 2008

Transaction ID: SA11AI.13301

Amount of Each Receipt this Period  
50.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Dennis Zimmerman

Mailing Address 10343 Oak Ridge Dr

City State Zip Code  
Zionsville IN 46077-8313

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2008

Transaction ID: SA11AI.13349

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	85197.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 83 / 138  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
MDI Mail & Imaging

Mailing Address 21721-A Filigree Court

City	State	Zip Code
Adhburn	VA	20147

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 ▼ 4299.50

Date of Receipt

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

Transaction ID: SA15.26029

Amount of Each Receipt this Period  
4299.50

Postage Refund

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4299.50
<b>TOTAL</b> This Period (last page this line number only) .....	▶	4299.50

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

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

FOR LINE NUMBER: PAGE 84 / 138

(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 checked="" type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.**

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

Mailing Address 300 Knickerbocker Road

City State Zip Code  
Cresskill NJ 07626

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
19662.24

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	0	8

Transaction ID: SA17.26026

Amount of Each Receipt this Period

10459.72
----------

List Rental Income

**B.**

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

Mailing Address 300 Knickerbocker Road

City State Zip Code  
Cresskill NJ 07626

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
28941.15

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	0	8

Transaction ID: SA17.26027

Amount of Each Receipt this Period

9278.91
---------

List Rental Income

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

19738.63
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**TOTAL** This Period (last page this line number only) .....

19738.63
----------

# 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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Advanced Mailing Sevices</p> <p>Mailing Address 14970 Farm Creek Drive</p> <p>City Woodbridge State VA Zip Code 22191</p> <p>Purpose of Disbursement Direct Mail Expenses</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> SB21B.26223 <b>Date of Disbursement</b> 04 / 08 / 2008</p> <p>Amount of Each Disbursement this Period 7556.12</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Advanced Mailing Sevices</p> <p>Mailing Address 14970 Farm Creek Drive</p> <p>City Woodbridge State VA Zip Code 22191</p> <p>Purpose of Disbursement Direct Mail Expenses</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> SB21B.26135 <b>Date of Disbursement</b> 04 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 147.65</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Advanced Mailing Sevices</p> <p>Mailing Address 14970 Farm Creek Drive</p> <p>City Woodbridge State VA Zip Code 22191</p> <p>Purpose of Disbursement Direct Mail Expenses</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> SB21B.26140 <b>Date of Disbursement</b> 04 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 6388.47</p>

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

14092.24

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

<b>A.</b> Full Name (Last, First, Middle Initial) Advanced Mailing Sevices Mailing Address 14970 Farm Creek Drive City Woodbridge State VA Zip Code 22191 Purpose of Disbursement Direct Mail Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21B.26181 Date of Disbursement 06 / 11 / 2008
	Amount of Each Disbursement this Period 1111.84
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>B.</b> Full Name (Last, First, Middle Initial) Advanced Mailing Sevices Mailing Address 14970 Farm Creek Drive City Woodbridge State VA Zip Code 22191 Purpose of Disbursement Direct Mail Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21B.26184 Date of Disbursement 06 / 12 / 2008
	Amount of Each Disbursement this Period 1889.65
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>C.</b> Full Name (Last, First, Middle Initial) Allied Printing Resources Mailing Address 455 Washington Ave. City Carlstadt State NJ Zip Code 07072 Purpose of Disbursement Printing & Reproduction Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21B.26186 Date of Disbursement 06 / 12 / 2008
	Amount of Each Disbursement this Period 1441.50
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) ..... ▶	4442.99
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

A.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: SB21B.26033 Date of Disbursement
	Mailing Address P.O. Box 53852	<input type="text" value="04"/> / <input type="text" value="01"/> / <input type="text" value="2008"/>
	City Phoenix State AZ Zip Code 85072-3852	Amount of Each Disbursement this Period
	Purpose of Disbursement Merchant Credit Card Fees	<input type="text" value="4.50"/>
	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
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: SB21B.26037 Date of Disbursement
	Mailing Address P.O. Box 53852	<input type="text" value="04"/> / <input type="text" value="07"/> / <input type="text" value="2008"/>
	City Phoenix State AZ Zip Code 85072-3852	Amount of Each Disbursement this Period
	Purpose of Disbursement Merchant Credit Card Fees	<input type="text" value="340.21"/>
	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
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: SB21B.26038 Date of Disbursement
	Mailing Address Suite 0002	<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2008"/>
	City Chicago State IL Zip Code 60679-0002	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Payment	<input type="text" value="676.21"/>
	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
	State: District:	<input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1020.92"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

A.	Full Name (Last, First, Middle Initial) Amtrak	Transaction ID: SB21B.26038.0 Date of Disbursement
	Mailing Address 30th and Market St, Fl. 5	<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2008"/>
	City Philadelphia State PA Zip Code 19102	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel Expenses	<input type="text" value="289.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Amtrak	Transaction ID: SB21B.26038.3 Date of Disbursement
	Mailing Address 30th and Market St, Fl. 5	<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2008"/>
	City Philadelphia State PA Zip Code 19102	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel Expenses	<input type="text" value="209.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: SB21B.26052 Date of Disbursement
	Mailing Address P.O. Box 53852	<input type="text" value="05"/> / <input type="text" value="01"/> / <input type="text" value="2008"/>
	City Phoenix State AZ Zip Code 85072-3852	Amount of Each Disbursement this Period
	Purpose of Disbursement Merchant Credit Card Fees	<input type="text" value="4.50"/>
	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="4.50"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

A.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: SB21B.26065 Date of Disbursement
	Mailing Address P.O. Box 53852	<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Phoenix State AZ Zip Code 85072-3852	Amount of Each Disbursement this Period
	Purpose of Disbursement Merchant Credit Card Fees	<input type="text" value="42.56"/>
	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
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: SB21B.26071 Date of Disbursement
	Mailing Address P.O. Box 53852	<input type="text" value="06"/> <input type="text" value="02"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Phoenix State AZ Zip Code 85072-3852	Amount of Each Disbursement this Period
	Purpose of Disbursement Merchant Credit Card Fees	<input type="text" value="4.50"/>
	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
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: SB21B.26094 Date of Disbursement
	Mailing Address P.O. Box 53852	<input type="text" value="06"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Phoenix State AZ Zip Code 85072-3852	Amount of Each Disbursement this Period
	Purpose of Disbursement Merchant Credit Card Fees	<input type="text" value="130.60"/>
	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
	State: District:	<input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="177.66"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

A.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: SB21B.26101 Date of Disbursement 06 / 26 / 2008
	Mailing Address Suite 0002	Amount of Each Disbursement this Period 700.29
	City Chicago State IL Zip Code 60679-0002	
	Purpose of Disbursement Credit Card Payment	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Amtrak	Transaction ID: SB21B.26101.0 Date of Disbursement 06 / 26 / 2008
	Mailing Address 30th and Market St, Fl. 5	Amount of Each Disbursement this Period 243.17
	City Philadelphia State PA Zip Code 19102	
	Purpose of Disbursement Travel Expenses	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: SB21B.26101.1 Date of Disbursement 06 / 26 / 2008
	Mailing Address 755 W. Lancaster Ave.	Amount of Each Disbursement this Period 449.51
	City Bryn Mawr State PA Zip Code 19010	
	Purpose of Disbursement Office Supplies	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	700.29
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)  
American Heritage Credit Union

Transaction ID: SB21B.26039  
Date of Disbursement

Mailing Address P.O. Box 67001

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

City Harrisburg State PA Zip Code 17106-7001

Amount of Each Disbursement this Period

2500.00
---------

Purpose of Disbursement  
Credit Card Payment

Category/Type
---------------

Candidate Name

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

B.

Full Name (Last, First, Middle Initial)  
Amtrak

Transaction ID: SB21B.26039.0  
Date of Disbursement

Mailing Address 30th and Market St, Fl. 5

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

City Philadelphia State PA Zip Code 19102

Amount of Each Disbursement this Period

1918.00
---------

Purpose of Disbursement  
Travel Expenses

Category/Type
---------------

Candidate Name

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

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
Robertson's Florist

Transaction ID: SB21B.26039.1  
Date of Disbursement

Mailing Address 859 W Lancaster Ave

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

City Bryn Mawr State PA Zip Code 19010

Amount of Each Disbursement this Period

267.73
--------

Purpose of Disbursement  
PAC Fundraising Event Costs

Category/Type
---------------

Candidate Name

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

[MEMO ITEM]

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

2500.00
---------

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

A.	Full Name (Last, First, Middle Initial) American Heritage Credit Union	Transaction ID: SB21B.26081 Date of Disbursement
	Mailing Address P.O. Box 67001	<input type="text" value="06"/> / <input type="text" value="03"/> / <input type="text" value="2008"/>
	City Harrisburg State PA Zip Code 17106-7001	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Payment	<input type="text" value="2500.00"/>
	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.	Full Name (Last, First, Middle Initial) Enterprise Car Rental	Transaction ID: SB21B.26081.0 Date of Disbursement
	Mailing Address 600 Corporate Park Drive	<input type="text" value="06"/> / <input type="text" value="03"/> / <input type="text" value="2008"/>
	City St. Louis State MO Zip Code 63105	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel Expenses	<input type="text" value="281.33"/>
	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]

C.	Full Name (Last, First, Middle Initial) US Airways	Transaction ID: SB21B.26081.1 Date of Disbursement
	Mailing Address 4000 E Sky Harbor Blvd	<input type="text" value="06"/> / <input type="text" value="03"/> / <input type="text" value="2008"/>
	City Phoenix State AZ Zip Code 85034	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel Expenses	<input type="text" value="683.12"/>
	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]

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

A.	Full Name (Last, First, Middle Initial) Federal Express	Transaction ID: SB21B.26081.2 Date of Disbursement
	Mailing Address P.O. Box 1140	<input type="text" value="06"/> / <input type="text" value="03"/> / <input type="text" value="2008"/>
	City Memphis State TN Zip Code 38101	Amount of Each Disbursement this Period
	Purpose of Disbursement Postage & Delivery	<input type="text" value="152.44"/>
	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]

B.	Full Name (Last, First, Middle Initial) Amtrak	Transaction ID: SB21B.26081.4 Date of Disbursement
	Mailing Address 30th and Market St, Fl. 5	<input type="text" value="06"/> / <input type="text" value="03"/> / <input type="text" value="2008"/>
	City Philadelphia State PA Zip Code 19102	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel Expenses	<input type="text" value="822.00"/>
	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]

C.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: SB21B.26081.5 Date of Disbursement
	Mailing Address P.O. Box 41556	<input type="text" value="06"/> / <input type="text" value="03"/> / <input type="text" value="2008"/>
	City Philadelphia State PA Zip Code 19101-1464	Amount of Each Disbursement this Period
	Purpose of Disbursement Telephone Expenses	<input type="text" value="294.39"/>
	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]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="0.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

A.	Full Name (Last, First, Middle Initial) American Heritage Credit Union  Mailing Address P.O. Box 67001  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) ▼	Transaction ID: SB21B.26102 Date of Disbursement 06 / 26 / 2008  Amount of Each Disbursement this Period 1000.00  Category/ Type
B.	Full Name (Last, First, Middle Initial) Amtrak  Mailing Address 30th and Market St, Fl. 5  City Philadelphia State PA Zip Code 19102  Purpose of Disbursement Travel 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) ▼	Transaction ID: SB21B.26102.0 Date of Disbursement 06 / 26 / 2008  Amount of Each Disbursement this Period 548.00  Category/ Type  <b>[MEMO ITEM]</b>
C.	Full Name (Last, First, Middle Initial) Pitney Bowes  Mailing Address PO Box 856390  City Louisville State PA Zip Code 40285-6390  Purpose of Disbursement Postage 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) ▼	Transaction ID: SB21B.26102.1 Date of Disbursement 06 / 26 / 2008  Amount of Each Disbursement this Period 228.00  Category/ Type  <b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

<b>A.</b> Full Name (Last, First, Middle Initial) Federal Express Mailing Address P.O. Box 1140 City Memphis State TN Zip Code 38101 Purpose of Disbursement Postage & Delivery Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21B.26102.2 Date of Disbursement 06 / 26 / 2008
	Amount of Each Disbursement this Period 74.86 [MEMO ITEM]

<b>B.</b> Full Name (Last, First, Middle Initial) Atlas Container Corp Mailing Address 8140 Telegraph Road City Severn State MD Zip Code 21144 Purpose of Disbursement Direct Mail Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21B.26221 Date of Disbursement 04 / 03 / 2008
	Amount of Each Disbursement this Period 2054.09

<b>C.</b> Full Name (Last, First, Middle Initial) Bankcard MTOT Discount Mailing Address P.O. Box 189 City Hagerstown State MD Zip Code 21741-0189 Purpose of Disbursement Merchant Credit Card Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21B.26146 Date of Disbursement 04 / 30 / 2008
	Amount of Each Disbursement this Period 220.74

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2274.83
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)  
Barna Advisory Services, PC

Transaction ID: SB21B.26050  
Date of Disbursement

Mailing Address 270 S. Woodmont Drive

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	0	8

City State Zip Code  
Downingtown PA 19335

Amount of Each Disbursement this Period

5000.00
---------

Purpose of Disbursement  
Accounting Fees  
Candidate Name

Category/  
Type

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

B.

Full Name (Last, First, Middle Initial)  
Barna Advisory Services, PC

Transaction ID: SB21B.26067  
Date of Disbursement

Mailing Address 270 S. Woodmont Drive

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	9		2	0	0	8

City State Zip Code  
Downingtown PA 19335

Amount of Each Disbursement this Period

516.00
--------

Purpose of Disbursement  
Accounting Fees  
Candidate Name

Category/  
Type

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

C.

Full Name (Last, First, Middle Initial)  
Barna Advisory Services, PC

Transaction ID: SB21B.26127  
Date of Disbursement

Mailing Address 270 S. Woodmont Drive

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

City State Zip Code  
Downingtown PA 19335

Amount of Each Disbursement this Period

2500.00
---------

Purpose of Disbursement  
Accounting Fees  
Candidate Name

Category/  
Type

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

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

8016.00

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



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

<b>A.</b>	Full Name (Last, First, Middle Initial) BB&T  Mailing Address PO Box 200  City Wilson State NC Zip Code 27894-0020  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) ▼	<b>Transaction ID:</b> SB21B.26145 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 8	Amount of Each Disbursement this Period  15.00
<b>B.</b>	Full Name (Last, First, Middle Initial) BB&T  Mailing Address PO Box 200  City Wilson State NC Zip Code 27894-0020  Purpose of Disbursement Merchant 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>Transaction ID:</b> SB21B.26148 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 8	Amount of Each Disbursement this Period  312.00
<b>C.</b>	Full Name (Last, First, Middle Initial) BB&T  Mailing Address PO Box 200  City Wilson State NC Zip Code 27894-0020  Purpose of Disbursement Bank Service Charge Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.26161 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 8	Amount of Each Disbursement this Period  7.50

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	334.50
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

A.	Full Name (Last, First, Middle Initial) BB&T	Transaction ID: SB21B.26166
	Mailing Address PO Box 200	Date of Disbursement 05 / 30 / 2008
	City Wilson State NC Zip Code 27894-0020	Amount of Each Disbursement this Period 7.50
	Purpose of Disbursement Bank Service Charge	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) BB&T	Transaction ID: SB21B.26168
	Mailing Address PO Box 200	Date of Disbursement 05 / 30 / 2008
	City Wilson State NC Zip Code 27894-0020	Amount of Each Disbursement this Period 110.70
	Purpose of Disbursement Merchant Credit Card Fees	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) BB&T	Transaction ID: SB21B.26169
	Mailing Address PO Box 200	Date of Disbursement 05 / 30 / 2008
	City Wilson State NC Zip Code 27894-0020	Amount of Each Disbursement this Period 183.97
	Purpose of Disbursement Merchant Credit Card Fees	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>302.17</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)

PAGE 99 / 138

<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)  
AMERICA'S FOUNDATION

A.	Full Name (Last, First, Middle Initial) BB&T	Transaction ID: SB21B.26198
	Mailing Address PO Box 200	Date of Disbursement 06 / 13 / 2008
	City Wilson State NC Zip Code 27894-0020	Amount of Each Disbursement this Period 7.50
	Purpose of Disbursement Bank Service Charges	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) BB&T	Transaction ID: SB21B.26209
	Mailing Address PO Box 200	Date of Disbursement 06 / 30 / 2008
	City Wilson State NC Zip Code 27894-0020	Amount of Each Disbursement this Period 7.50
	Purpose of Disbursement Bank Service Charges	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Bryn Mawr Trust Company	Transaction ID: SB21B.26036
	Mailing Address 801 Lancaster Avenue	Date of Disbursement 04 / 04 / 2008
	City Bryn Mawr State PA Zip Code 19010	Amount of Each Disbursement this Period 52.99
	Purpose of Disbursement Bank Service Charges	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	67.99
<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

A.	Full Name (Last, First, Middle Initial) Bryn Mawr Trust Company	Transaction ID: SB21B.26051 Date of Disbursement
	Mailing Address 801 Lancaster Avenue	<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City State Zip Code Bryn Mawr PA 19010	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Service Charges	<input type="text" value="75.00"/>
	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.	Full Name (Last, First, Middle Initial) Bryn Mawr Trust Company	Transaction ID: SB21B.26066 Date of Disbursement
	Mailing Address 801 Lancaster Avenue	<input type="text" value="05"/> / <input type="text" value="05"/> / <input type="text" value="2008"/>
	City State Zip Code Bryn Mawr PA 19010	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Service Charges	<input type="text" value="50.27"/>
	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) ▼

C.	Full Name (Last, First, Middle Initial) Bryn Mawr Trust Company	Transaction ID: SB21B.26070 Date of Disbursement
	Mailing Address 801 Lancaster Avenue	<input type="text" value="05"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City State Zip Code Bryn Mawr PA 19010	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Service Charges	<input type="text" value="75.00"/>
	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) .....	<input type="text" value="200.27"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

A.	Full Name (Last, First, Middle Initial) Bryn Mawr Trust Company	Transaction ID: SB21B.26095 Date of Disbursement
	Mailing Address 801 Lancaster Avenue	<input type="text" value="06"/> / <input type="text" value="05"/> / <input type="text" value="2008"/>
	City State Zip Code Bryn Mawr PA 19010	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Service Charges	<input type="text" value="49.60"/>
	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.	Full Name (Last, First, Middle Initial) Bryn Mawr Trust Company	Transaction ID: SB21B.26128 Date of Disbursement
	Mailing Address 801 Lancaster Avenue	<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City State Zip Code Bryn Mawr PA 19010	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Service Charges	<input type="text" value="75.00"/>
	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) ▼

C.	Full Name (Last, First, Middle Initial) Capitol Resource Group, Inc.	Transaction ID: SB21B.26076 Date of Disbursement
	Mailing Address One Tower Bridge, Suite 1440 One Hundred Front Street	<input type="text" value="06"/> / <input type="text" value="03"/> / <input type="text" value="2008"/>
	City State Zip Code West Conshohocken PA 19428	Amount of Each Disbursement this Period
	Purpose of Disbursement Management Fees	<input type="text" value="5000.00"/>
	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) .....	<input type="text" value="5124.60"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)  
Catterton Printing

Mailing Address 100 Post Office Road

City State Zip Code  
Waldorf MD 20602

Purpose of Disbursement  
Direct Mail Expenses

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.26213  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)  
cmdi

Mailing Address 7704 Leesburg Pike

City State Zip Code  
Falls Church VA 22043

Purpose of Disbursement  
Database Maintenance Services

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.26055  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)  
Colortree

Mailing Address P.O. Box 18160

City State Zip Code  
Merrifield VA 22118-0160

Purpose of Disbursement  
Printing & Reproduction

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.26171  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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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

A.	Full Name (Last, First, Middle Initial) Colortree	Transaction ID: SB21B.26187 Date of Disbursement 06 / 12 / 2008
	Mailing Address P.O. Box 18160	Amount of Each Disbursement this Period 5443.91
	City Merrifield State VA Zip Code 22118-0160	
	Purpose of Disbursement Printing & Reproduction 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.	Full Name (Last, First, Middle Initial) Colortree	Transaction ID: SB21B.26202 Date of Disbursement 06 / 20 / 2008
	Mailing Address P.O. Box 18160	Amount of Each Disbursement this Period 8838.00
	City Merrifield State VA Zip Code 22118-0160	
	Purpose of Disbursement Printing & Reproduction 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) ▼

C.	Full Name (Last, First, Middle Initial) Conrad Direct, Inc.	Transaction ID: SB21B.26130 Date of Disbursement 04 / 11 / 2008
	Mailing Address 300 Knickerbocker Road	Amount of Each Disbursement this Period 11271.27
	City Cresskill State NJ Zip Code 07626	
	Purpose of Disbursement Direct Mail Expenses Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

25553.18

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

A.	Full Name (Last, First, Middle Initial) Conrad Direct, Inc.	Transaction ID: SB21B.26172 Date of Disbursement
	Mailing Address 300 Knickerbocker Road	<input type="text" value="06"/> <input type="text" value="05"/> / <input type="text" value="2008"/>
	City Cresskill State NJ Zip Code 07626	Amount of Each Disbursement this Period
	Purpose of Disbursement List Rental Expenses	<input type="text" value="2851.45"/>
	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.	Full Name (Last, First, Middle Initial) Conrad Direct, Inc.	Transaction ID: SB21B.26188 Date of Disbursement
	Mailing Address 300 Knickerbocker Road	<input type="text" value="06"/> <input type="text" value="12"/> / <input type="text" value="2008"/>
	City Cresskill State NJ Zip Code 07626	Amount of Each Disbursement this Period
	Purpose of Disbursement List Rental Expenses	<input type="text" value="6008.56"/>
	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) ▼

C.	Full Name (Last, First, Middle Initial) Conrad Direct, Inc.	Transaction ID: SB21B.26203 Date of Disbursement
	Mailing Address 300 Knickerbocker Road	<input type="text" value="06"/> <input type="text" value="20"/> / <input type="text" value="2008"/>
	City Cresskill State NJ Zip Code 07626	Amount of Each Disbursement this Period
	Purpose of Disbursement List Rental Expenses	<input type="text" value="4981.45"/>
	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) .....	<input type="text" value="13841.46"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

A.	Full Name (Last, First, Middle Initial) Consolidated Mailing Services  Mailing Address 504 Shaw Rd. Suite 206  City Sterling State VA Zip Code 20166  Purpose of Disbursement Direct Mail 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) ▼	Transaction ID: SB21B.26159 Date of Disbursement 05 / 21 / 2008  Amount of Each Disbursement this Period 500.00
B.	Full Name (Last, First, Middle Initial) Consolidated Mailing Services  Mailing Address 504 Shaw Rd. Suite 206  City Sterling State VA Zip Code 20166  Purpose of Disbursement Direct Mail 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) ▼	Transaction ID: SB21B.26183 Date of Disbursement 06 / 11 / 2008  Amount of Each Disbursement this Period 250.00
C.	Full Name (Last, First, Middle Initial) Convention 2008  Mailing Address 425 SECOND STREET NE  City Washington State DC Zip Code 20002  Purpose of Disbursement Meeting Expense 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) ▼	Transaction ID: SB21B.26252 Date of Disbursement 06 / 03 / 2008  Amount of Each Disbursement this Period 350.00

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

1100.00

**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 106 / 138

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

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)  
Crawford Gardner Communications

Transaction ID: SB21B.26057

Date of Disbursement

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

Mailing Address 2812 West Island Loop

Amount of Each Disbursement this Period

2500.00
---------

City State Zip Code  
Rio Rancho NM 87124

Purpose of Disbursement  
Direct Mail Expenses

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

B.

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

Transaction ID: SB21B.26214

Date of Disbursement

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

Mailing Address 2100 Tomlynn Street

Amount of Each Disbursement this Period

2047.50
---------

City State Zip Code  
Richmond VA 23230

Purpose of Disbursement  
Direct Mail Expenses

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

C.

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

Transaction ID: SB21B.26190

Date of Disbursement

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

Mailing Address 2100 Tomlynn Street

Amount of Each Disbursement this Period

2858.94
---------

City State Zip Code  
Richmond VA 23230

Purpose of Disbursement  
Printing & Reproduction

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

7406.44
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**TOTAL** This Period (last page this line number only) ..... ►

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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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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

<p><b>A.</b> Full Name (Last, First, Middle Initial) DLT Direct, Inc.</p> <p>Mailing Address 202 Lane Court</p> <p>City Sterling State VA Zip Code 20166</p> <p>Purpose of Disbursement Direct Mail Expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.26205</p> <p>Date of Disbursement</p> <p><input type="text" value="06"/> <input type="text" value="20"/> / <input type="text" value="20"/> <input type="text" value="08"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2022.83"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) DSG, Inc.</p> <p>Mailing Address 2923-B Olney-Sandy Spring Rd</p> <p>City Olney State MD Zip Code 20832</p> <p>Purpose of Disbursement Printing &amp; Reproduction</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.26043</p> <p>Date of Disbursement</p> <p><input type="text" value="04"/> <input type="text" value="24"/> / <input type="text" value="20"/> <input type="text" value="08"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5000.00"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) DSG, Inc.</p> <p>Mailing Address 2923-B Olney-Sandy Spring Rd</p> <p>City Olney State MD Zip Code 20832</p> <p>Purpose of Disbursement Direct Mail Expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.26096</p> <p>Date of Disbursement</p> <p><input type="text" value="06"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="08"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2550.00"/></p>

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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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

A.	Full Name (Last, First, Middle Initial) Foley & Lardner, LLP	Transaction ID: SB21B.26044 Date of Disbursement 04 / 24 / 2008
	Mailing Address 3000 K St, NW Ste. 500	
	City Washington State DC Zip Code 20007	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement Legal Fees	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Foley & Lardner, LLP	Transaction ID: SB21B.26084 Date of Disbursement 06 / 03 / 2008
	Mailing Address 3000 K St, NW Ste. 500	
	City Washington State DC Zip Code 20007	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement Legal Fees	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Foley & Lardner, LLP	Transaction ID: SB21B.26108 Date of Disbursement 06 / 26 / 2008
	Mailing Address 3000 K St, NW Ste. 500	
	City Washington State DC Zip Code 20007	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement Legal Fees	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	7500.00
<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

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) HSP Direct</p> <p>Mailing Address 13755 Sunrise Valley Drive Suite 450</p> <p>City Herndon State VA Zip Code 20171</p> <p>Purpose of Disbursement Direct Mail Expenses</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:</b> SB21B.26215</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="10824.48"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) HSP Direct</p> <p>Mailing Address 13755 Sunrise Valley Drive Suite 450</p> <p>City Herndon State VA Zip Code 20171</p> <p>Purpose of Disbursement Postage</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:</b> SB21B.26222</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4142.43"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) HSP Direct</p> <p>Mailing Address 13755 Sunrise Valley Drive Suite 450</p> <p>City Herndon State VA Zip Code 20171</p> <p>Purpose of Disbursement Direct Mail Expenses</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:</b> SB21B.26225</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="403.65"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="15370.56"/></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)

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

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) HSP Direct</p> <p>Mailing Address 13755 Sunrise Valley Drive Suite 450</p> <p>City Herndon State VA Zip Code 20171</p> <p>Purpose of Disbursement Direct Mail Expenses</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> SB21B.26154</p> <p>Date of Disbursement 05 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 13132.71</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) HSP Direct</p> <p>Mailing Address 13755 Sunrise Valley Drive Suite 450</p> <p>City Herndon State VA Zip Code 20171</p> <p>Purpose of Disbursement Direct Mail Expenses</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> SB21B.26164</p> <p>Date of Disbursement 05 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 12216.51</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) HSP Direct</p> <p>Mailing Address 13755 Sunrise Valley Drive Suite 450</p> <p>City Herndon State VA Zip Code 20171</p> <p>Purpose of Disbursement Direct Mail Expenses</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> SB21B.26173</p> <p>Date of Disbursement 06 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 3871.53</p>

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

29220.75

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

A.	Full Name (Last, First, Middle Initial) HSP Direct  Mailing Address 13755 Sunrise Valley Drive Suite 450  City Herndon State VA Zip Code 20171  Purpose of Disbursement Direct Mail 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) ▼	Transaction ID: SB21B.26191 Date of Disbursement 06 / 12 / 2008	Amount of Each Disbursement this Period 5414.29
B.	Full Name (Last, First, Middle Initial) Integram  Mailing Address 8421 Hilltop Rd.  City Fairfax State VA Zip Code 22031  Purpose of Disbursement Direct Mail 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) ▼	Transaction ID: SB21B.26224 Date of Disbursement 04 / 09 / 2008	Amount of Each Disbursement this Period 8432.50
C.	Full Name (Last, First, Middle Initial) Intercollegiate Studies Institute, Inc.  Mailing Address 3901 Centreville Rd PO BOX 4431  City Wilmington State DE Zip Code 19807  Purpose of Disbursement Supplies 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) ▼	Transaction ID: SB21B.26193 Date of Disbursement 06 / 12 / 2008	Amount of Each Disbursement this Period 1200.00

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

15046.79

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

<b>A.</b>	Full Name (Last, First, Middle Initial) Irides, LLC Mailing Address 1000 Wilson Blve, Suite 601 City Arlington State VA Zip Code 22209 Purpose of Disbursement Web Hosting 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> SB21B.26075 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 3 / 2 0 0 8	<b>Amount of Each Disbursement this Period</b> 150.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Iron Mountain Mailing Address PO Box 27128 City New York State NY Zip Code 10087-7128 Purpose of Disbursement Storage Rental 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> SB21B.26046 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 8	<b>Amount of Each Disbursement this Period</b> 697.20
<b>C.</b>	Full Name (Last, First, Middle Initial) Jen Capone Photography Mailing Address 17 North 4th Avenue City Royersford State PA Zip Code 19468 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) ▼	<b>Transaction ID:</b> SB21B.26078 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 3 / 2 0 0 8	<b>Amount of Each Disbursement this Period</b> 1528.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2375.20
<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

A.	Full Name (Last, First, Middle Initial) Konica  Mailing Address 103 Gibraltar Road  City Horsham State PA Zip Code 19044  Purpose of Disbursement Equipment Rental 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) ▼	Transaction ID: SB21B.26116 Date of Disbursement 06 / 26 / 2008  Amount of Each Disbursement this Period 306.00
B.	Full Name (Last, First, Middle Initial) MDI Mail & Imaging  Mailing Address 21721-A Filigree Court  City Adhburn State VA Zip Code 20147  Purpose of Disbursement Direct Mail 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) ▼	Transaction ID: SB21B.26147 Date of Disbursement 04 / 30 / 2008  Amount of Each Disbursement this Period 11121.50
C.	Full Name (Last, First, Middle Initial) MDI Mail & Imaging  Mailing Address 21721-A Filigree Court  City Adhburn State VA Zip Code 20147  Purpose of Disbursement Direct Mail Costs - Printing & Postage 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) ▼	Transaction ID: SB21B.26177 Date of Disbursement 06 / 06 / 2008  Amount of Each Disbursement this Period 14673.70

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

26101.20

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

A.	Full Name (Last, First, Middle Initial) Miller Investment Management, LP	Transaction ID: SB21B.26074 Date of Disbursement 06 / 03 / 2008
	Mailing Address One Tower Bridge 100 Front Street, Suite 1500	Amount of Each Disbursement this Period 2500.00
	City West Conshohocken State PA Zip Code 19428	
	Purpose of Disbursement Rent Expense	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Miller Investment Management, LP	Transaction ID: SB21B.26117 Date of Disbursement 06 / 26 / 2008
	Mailing Address One Tower Bridge 100 Front Street, Suite 1500	Amount of Each Disbursement this Period 2500.00
	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 State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Christopher Minkler	Transaction ID: SB21B.26041 Date of Disbursement 04 / 24 / 2008
	Mailing Address 371 Spruce Street	Amount of Each Disbursement this Period 1501.58
	City Pottstown State PA Zip Code 19464	
	Purpose of Disbursement Mailing Services	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	6501.58
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

A.	Full Name (Last, First, Middle Initial) New Media Communications, Inc.  Mailing Address Summit of Richfield II 3046 Brecksville Road  City Richfield State OH Zip Code 44286  Purpose of Disbursement Website Design & Maintenance Candidate Name <span style="float: right;">Category/Type</span>  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:	Transaction ID: SB21B.26072 Date of Disbursement 06 / 03 / 2008  Amount of Each Disbursement this Period 2500.00
B.	Full Name (Last, First, Middle Initial) Patton-Kiehl Group, Inc.  Mailing Address 17026 Bull Church Road  City Woodford State VA Zip Code 22580  Purpose of Disbursement Direct Mail Expenses Candidate Name <span style="float: right;">Category/Type</span>  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:	Transaction ID: SB21B.26216 Date of Disbursement 04 / 02 / 2008  Amount of Each Disbursement this Period 1554.48
C.	Full Name (Last, First, Middle Initial) Patton-Kiehl Group, Inc.  Mailing Address 17026 Bull Church Road  City Woodford State VA Zip Code 22580  Purpose of Disbursement Direct Mail Expenses Candidate Name <span style="float: right;">Category/Type</span>  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:	Transaction ID: SB21B.26136 Date of Disbursement 04 / 16 / 2008  Amount of Each Disbursement this Period 2536.85

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6591.33
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)  
Patton-Kiehl Group, Inc.

Transaction ID: SB21B.26139  
Date of Disbursement

Mailing Address 17026 Bull Church Road

/   /

City Woodford State VA Zip Code 22580

Amount of Each Disbursement this Period

Purpose of Disbursement  
Direct Mail Expenses

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Patton-Kiehl Group, Inc.

Transaction ID: SB21B.26141  
Date of Disbursement

Mailing Address 17026 Bull Church Road

/   /

City Woodford State VA Zip Code 22580

Amount of Each Disbursement this Period

Purpose of Disbursement  
Printing Costs

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Patton-Kiehl Group, Inc.

Transaction ID: SB21B.26152  
Date of Disbursement

Mailing Address 17026 Bull Church Road

/   /

City Woodford State VA Zip Code 22580

Amount of Each Disbursement this Period

Purpose of Disbursement  
Direct Mail Expenses

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 117 / 138

<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)  
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)  
Patton-Kiehl Group, Inc.

Transaction ID: SB21B.26167

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	0	8

Mailing Address 17026 Bull Church Road

Amount of Each Disbursement this Period

4105.58
---------

City Woodford State VA Zip Code 22580

Purpose of Disbursement  
Direct Mail Expenses

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Patton-Kiehl Group, Inc.

Transaction ID: SB21B.26170

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	0	8

Mailing Address 17026 Bull Church Road

Amount of Each Disbursement this Period

4082.31
---------

City Woodford State VA Zip Code 22580

Purpose of Disbursement  
Direct Mail Expenses

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Patton-Kiehl Group, Inc.

Transaction ID: SB21B.26179

Date of Disbursement

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

Mailing Address 17026 Bull Church Road

Amount of Each Disbursement this Period

3190.37
---------

City Woodford State VA Zip Code 22580

Purpose of Disbursement  
Direct Mail Costs - Printing & Postage

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

11378.26
----------

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

A.	Full Name (Last, First, Middle Initial) Patton-Kiehl Group, Inc.	Transaction ID: SB21B.26194 Date of Disbursement
	Mailing Address 17026 Bull Church Road	<input type="text" value="06"/> / <input type="text" value="12"/> / <input type="text" value="2008"/>
	City Woodford State VA Zip Code 22580	Amount of Each Disbursement this Period
	Purpose of Disbursement Printing & Reproduction	<input type="text" value="315.52"/>
	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.	Full Name (Last, First, Middle Initial) Patton-Kiehl Group, Inc.	Transaction ID: SB21B.26200 Date of Disbursement
	Mailing Address 17026 Bull Church Road	<input type="text" value="06"/> / <input type="text" value="18"/> / <input type="text" value="2008"/>
	City Woodford State VA Zip Code 22580	Amount of Each Disbursement this Period
	Purpose of Disbursement Printing & Reproduction	<input type="text" value="999.40"/>
	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) ▼

C.	Full Name (Last, First, Middle Initial) Patton-Kiehl Group, Inc.	Transaction ID: SB21B.26201 Date of Disbursement
	Mailing Address 17026 Bull Church Road	<input type="text" value="06"/> / <input type="text" value="18"/> / <input type="text" value="2008"/>
	City Woodford State VA Zip Code 22580	Amount of Each Disbursement this Period
	Purpose of Disbursement Direct Mail Costs - Printing	<input type="text" value="2444.20"/>
	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) .....	<input type="text" value="3759.12"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 119 / 138

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

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

A.	Full Name (Last, First, Middle Initial) Patton-Kiehl Group, Inc.	Transaction ID: SB21B.26206 Date of Disbursement 06 / 20 / 2008
	Mailing Address 17026 Bull Church Road	Amount of Each Disbursement this Period 1224.05
	City Woodford State VA Zip Code 22580	
	Purpose of Disbursement Direct Mail Expenses	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Pitney Bowes	Transaction ID: SB21B.26061 Date of Disbursement 05 / 02 / 2008
	Mailing Address PO Box 856390	Amount of Each Disbursement this Period 254.97
	City Louisville State PA Zip Code 40285-6390	
	Purpose of Disbursement Postage	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Pitney Bowes	Transaction ID: SB21B.26080 Date of Disbursement 06 / 03 / 2008
	Mailing Address PO Box 856390	Amount of Each Disbursement this Period 194.00
	City Louisville State PA Zip Code 40285-6390	
	Purpose of Disbursement Postage	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1673.02
<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)

PAGE 120 / 138

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

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

A.	Full Name (Last, First, Middle Initial) Premiere Fulfillment & Processing, Inc.	Transaction ID: SB21B.26138 Date of Disbursement
	Mailing Address 4841 Dillon Drive	<input type="text" value="04"/> / <input type="text" value="18"/> / <input type="text" value="2008"/>
	City Pueblo State CO Zip Code 81008	Amount of Each Disbursement this Period
	Purpose of Disbursement Direct Mail Expenses	<input type="text" value="500.00"/>
	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.	Full Name (Last, First, Middle Initial) Premiere Fulfillment & Processing, Inc.	Transaction ID: SB21B.26142 Date of Disbursement
	Mailing Address 4841 Dillon Drive	<input type="text" value="04"/> / <input type="text" value="25"/> / <input type="text" value="2008"/>
	City Pueblo State CO Zip Code 81008	Amount of Each Disbursement this Period
	Purpose of Disbursement Direct Mail Expenses	<input type="text" value="500.00"/>
	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) ▼

C.	Full Name (Last, First, Middle Initial) Premiere Fulfillment & Processing, Inc.	Transaction ID: SB21B.26153 Date of Disbursement
	Mailing Address 4841 Dillon Drive	<input type="text" value="05"/> / <input type="text" value="07"/> / <input type="text" value="2008"/>
	City Pueblo State CO Zip Code 81008	Amount of Each Disbursement this Period
	Purpose of Disbursement Direct Mail Expenses	<input type="text" value="500.00"/>
	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) .....	<input type="text" value="1500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

**A.** Full Name (Last, First, Middle Initial)  
Premiere Fulfillment & Processing, Inc.

Mailing Address 4841 Dillon Drive

City Pueblo State CO Zip Code 81008

Purpose of Disbursement  
Direct Mail Expenses

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** SB21B.26163

Date of Disbursement

/  /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
Premiere Fulfillment & Processing, Inc.

Mailing Address 4841 Dillon Drive

City Pueblo State CO Zip Code 81008

Purpose of Disbursement  
Direct Mail Expenses

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** SB21B.26174

Date of Disbursement

/  /

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
Premiere Fulfillment & Processing, Inc.

Mailing Address 4841 Dillon Drive

City Pueblo State CO Zip Code 81008

Purpose of Disbursement  
Direct Mail Expenses

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** SB21B.26182

Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER: (check only one)

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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

A.	Full Name (Last, First, Middle Initial) PrintBiz	Transaction ID: SB21B.26048 Date of Disbursement 04 / 24 / 2008
	Mailing Address 601 Grant St.	Amount of Each Disbursement this Period 1041.00
	City Pittsburgh State PA Zip Code 15219	
	Purpose of Disbursement Printing & Reproduction 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.	Full Name (Last, First, Middle Initial) RST Marketing Associates, Inc.	Transaction ID: SB21B.26217 Date of Disbursement 04 / 02 / 2008
	Mailing Address P.O. Box 228	Amount of Each Disbursement this Period 9594.75
	City Forest State VA Zip Code 24551	
	Purpose of Disbursement Direct Mail Expenses Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Sisk Mailing Service, Inc.	Transaction ID: SB21B.26211 Date of Disbursement 04 / 02 / 2008
	Mailing Address 203 Log Canoe Circle	Amount of Each Disbursement this Period 2908.29
	City Stevensville State MD Zip Code 21666	
	Purpose of Disbursement Direct Mail Expenses Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	13544.04
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)  
Sisk Mailing Service, Inc.

Transaction ID: SB21B.26150  
Date of Disbursement

Mailing Address 203 Log Canoe Circle

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

City State Zip Code  
Stevensville MD 21666

Amount of Each Disbursement this Period

2090.12
---------

Purpose of Disbursement  
Direct Mail Expenses

Category/Type
---------------

Candidate Name

Category/Type
---------------

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Sisk Mailing Service, Inc.

Transaction ID: SB21B.26151  
Date of Disbursement

Mailing Address 203 Log Canoe Circle

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

City State Zip Code  
Stevensville MD 21666

Amount of Each Disbursement this Period

3360.51
---------

Purpose of Disbursement  
Direct Mail Expenses

Category/Type
---------------

Candidate Name

Category/Type
---------------

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Sisk Mailing Service, Inc.

Transaction ID: SB21B.26155  
Date of Disbursement

Mailing Address 203 Log Canoe Circle

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	4		2	0	0	8

City State Zip Code  
Stevensville MD 21666

Amount of Each Disbursement this Period

1658.03
---------

Purpose of Disbursement  
Direct Mail Expenses

Category/Type
---------------

Candidate Name

Category/Type
---------------

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

7108.66
---------

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

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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

<p><b>A.</b> Full Name (Last, First, Middle Initial) Sisk Mailing Service, Inc.</p> <p>Mailing Address 203 Log Canoe Circle</p> <p>City Stevensville State MD Zip Code 21666</p> <p>Purpose of Disbursement Direct Mail Expenses</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> SB21B.26157</p> <p>Date of Disbursement 05 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 1202.17</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Sisk Mailing Service, Inc.</p> <p>Mailing Address 203 Log Canoe Circle</p> <p>City Stevensville State MD Zip Code 21666</p> <p>Purpose of Disbursement Direct Mail Expenses</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> SB21B.26162</p> <p>Date of Disbursement 05 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 1862.84</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Sisk Mailing Service, Inc.</p> <p>Mailing Address 203 Log Canoe Circle</p> <p>City Stevensville State MD Zip Code 21666</p> <p>Purpose of Disbursement Direct Mail Expenses</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> SB21B.26180</p> <p>Date of Disbursement 06 / 11 / 2008</p> <p>Amount of Each Disbursement this Period 2663.54</p>

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

5728.55

**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 125 / 138

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

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)  
Sisk Mailing Service, Inc.

Transaction ID: SB21B.26195  
Date of Disbursement

Mailing Address 203 Log Canoe Circle

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

City State Zip Code  
Stevensville MD 21666

Amount of Each Disbursement this Period

3015.13
---------

Purpose of Disbursement  
Direct Mail Expenses

Category/Type
---------------

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Sunrise Data Services

Transaction ID: SB21B.26218  
Date of Disbursement

Mailing Address 13755 Sunrise Valley Drive  
Suite 450

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	0	8

City State Zip Code  
Herndon VA 20171

Amount of Each Disbursement this Period

2294.16
---------

Purpose of Disbursement  
Database Maintenance

Category/Type
---------------

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Sunrise Data Services

Transaction ID: SB21B.26129  
Date of Disbursement

Mailing Address 13755 Sunrise Valley Drive  
Suite 450

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

City State Zip Code  
Herndon VA 20171

Amount of Each Disbursement this Period

536.23
--------

Purpose of Disbursement  
Database Maintenance Services

Category/Type
---------------

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

5845.52
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**TOTAL** This Period (last page this line number only) ..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

<p><b>A.</b> Full Name (Last, First, Middle Initial) Sunrise Data Services</p> <p>Mailing Address 13755 Sunrise Valley Drive Suite 450</p> <p>City Herndon State VA Zip Code 20171</p> <p>Purpose of Disbursement Database Maintenance Costs</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> SB21B.26175</p> <p>Date of Disbursement 06 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 566.83</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Sunrise Data Services</p> <p>Mailing Address 13755 Sunrise Valley Drive Suite 450</p> <p>City Herndon State VA Zip Code 20171</p> <p>Purpose of Disbursement Direct Mail Expenses</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> SB21B.26196</p> <p>Date of Disbursement 06 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 388.32</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Sunrise Data Services</p> <p>Mailing Address 13755 Sunrise Valley Drive Suite 450</p> <p>City Herndon State VA Zip Code 20171</p> <p>Purpose of Disbursement Database Maintenance Services</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> SB21B.26207</p> <p>Date of Disbursement 06 / 20 / 2008</p> <p>Amount of Each Disbursement this Period 1165.07</p>

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

2120.22

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

A.	Full Name (Last, First, Middle Initial) Union League of Philadelphia  Mailing Address 140 South Broad Street  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) ▼	Transaction ID: SB21B.26049 Date of Disbursement 04 / 24 / 2008  Amount of Each Disbursement this Period 1065.72  Category/Type
B.	Full Name (Last, First, Middle Initial) Union League of Philadelphia  Mailing Address 140 South Broad Street  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) ▼	Transaction ID: SB21B.26088 Date of Disbursement 06 / 03 / 2008  Amount of Each Disbursement this Period 1097.22  Category/Type
C.	Full Name (Last, First, Middle Initial) Union League of Philadelphia  Mailing Address 140 South Broad Street  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) ▼	Transaction ID: SB21B.26124 Date of Disbursement 06 / 26 / 2008  Amount of Each Disbursement this Period 762.18  Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2925.12
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

A.	Full Name (Last, First, Middle Initial) United States Treasury	Transaction ID: SB21B.26069 Date of Disbursement 05 / 15 / 2008
	Mailing Address 1500 Pennsylvania Ave, NW	Amount of Each Disbursement this Period 8882.00
	City Washington State DC Zip Code 20220	
	Purpose of Disbursement Tax Payment	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) USPS	Transaction ID: SB21B.26212 Date of Disbursement 04 / 02 / 2008
	Mailing Address 900 Brentwood Rd, NE #118	Amount of Each Disbursement this Period 1200.00
	City Washington State DC Zip Code 20066-9612	
	Purpose of Disbursement Postage	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) USPS	Transaction ID: SB21B.26143 Date of Disbursement 04 / 25 / 2008
	Mailing Address 900 Brentwood Rd, NE #118	Amount of Each Disbursement this Period 1000.00
	City Washington State DC Zip Code 20066-9612	
	Purpose of Disbursement Postage	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	11082.00
<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

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(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

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) USPS</p> <p>Mailing Address 900 Brentwood Rd, NE #118</p> <p>City Washington State DC Zip Code 20066-9612</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.26149</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) USPS</p> <p>Mailing Address 900 Brentwood Rd, NE #118</p> <p>City Washington State DC Zip Code 20066-9612</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.26156</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1500.00"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) USPS</p> <p>Mailing Address 900 Brentwood Rd, NE #118</p> <p>City Washington State DC Zip Code 20066-9612</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.26178</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p>

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:  
(check only one)

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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

<b>A.</b>	Full Name (Last, First, Middle Initial) USPS <hr/> Mailing Address 900 Brentwood Rd, NE #118 <hr/> City Washington State DC Zip Code 20066-9612 <hr/> Purpose of Disbursement Postage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.26199 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 8	Amount of Each Disbursement this Period 200.00
<b>B.</b>	Full Name (Last, First, Middle Initial) USPS <hr/> Mailing Address 900 Brentwood Rd, NE #118 <hr/> City Washington State DC Zip Code 20066-9612 <hr/> Purpose of Disbursement Postage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.26208 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 7 / 2 0 0 8	Amount of Each Disbursement this Period 500.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Verizon <hr/> Mailing Address P.O. Box 28000 <hr/> City Lehigh Valley State PA Zip Code 18002-0646 <hr/> Purpose of Disbursement Telephone Expenses Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.26089 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 3 / 2 0 0 8	Amount of Each Disbursement this Period 475.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1175.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s)  
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FOR LINE NUMBER:  
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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

A.	Full Name (Last, First, Middle Initial) Verizon	Transaction ID: SB21B.26125 Date of Disbursement 06 / 26 / 2008
	Mailing Address P.O. Box 28000	
	City Lehigh Valley State PA Zip Code 18002-0646	Amount of Each Disbursement this Period 215.95
	Purpose of Disbursement Telephone Expenses Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: SB21B.26062 Date of Disbursement 05 / 02 / 2008
	Mailing Address P.O. Box 41556	
	City Philadelphia State PA Zip Code 19101-1464	Amount of Each Disbursement this Period 268.62
	Purpose of Disbursement Telephone Expenses Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Virginia Davis Partners, LLC	Transaction ID: SB21B.26064 Date of Disbursement 05 / 02 / 2008
	Mailing Address 834 Beechwood Dr.	
	City Havertown State PA Zip Code 19083	Amount of Each Disbursement this Period 1136.50
	Purpose of Disbursement Management Fees 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) .....	▶	1621.07
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER:  
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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

A.	Full Name (Last, First, Middle Initial) Virginia Davis Partners, LLC	Transaction ID: SB21B.26079 Date of Disbursement 06 / 03 / 2008
	Mailing Address 834 Beechwood Dr.	
	City Havertown State PA Zip Code 19083	Amount of Each Disbursement this Period 1089.50
	Purpose of Disbursement Management Fees 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.	Full Name (Last, First, Middle Initial) Washington Intelligence Bureau	Transaction ID: SB21B.26219 Date of Disbursement 04 / 03 / 2008
	Mailing Address 4128 Pepsi Place	
	City Chantilly State VA Zip Code 20151	Amount of Each Disbursement this Period 1535.97
	Purpose of Disbursement Direct Mail Expenses Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Washington Intelligence Bureau	Transaction ID: SB21B.26176 Date of Disbursement 06 / 05 / 2008
	Mailing Address 4128 Pepsi Place	
	City Chantilly State VA Zip Code 20151	Amount of Each Disbursement this Period 3192.71
	Purpose of Disbursement Direct Mail Costs - Caging Services Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

5818.18

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)  
William & Jensen, PLLC

Mailing Address 1155 21st Street, NW

City Washington State DC Zip Code 20036-3308

Purpose of Disbursement  
Legal Fees

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.26091  
Date of Disbursement

MM / DD / YYYY  
06 / 03 / 2008

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)  
William & Jensen, PLLC

Mailing Address 1155 21st Street, NW

City Washington State DC Zip Code 20036-3308

Purpose of Disbursement  
Legal Fees

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.26126  
Date of Disbursement

MM / DD / YYYY  
06 / 26 / 2008

Amount of Each Disbursement this Period

2500.00

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

5000.00

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

316449.83

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

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

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

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

A.	Full Name (Last, First, Middle Initial) Citizens for Arlen Specter	Transaction ID: SB23.26103 Date of Disbursement 06 / 26 / 2008
	Mailing Address 426 C Street, NE Rear Building	Amount of Each Disbursement this Period 2500.00
	City Washington State DC Zip Code 20002	
	Purpose of Disbursement Campaign Contribution - General	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Craig Williams for Congress	Transaction ID: SB23.26098 Date of Disbursement 06 / 23 / 2008
	Mailing Address 5035 Township Line Road	Amount of Each Disbursement this Period 2500.00
	City Drexel Hill State PA Zip Code 19026	
	Purpose of Disbursement Campaign Contribution - General	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) McCain Victory Committee	Transaction ID: SB23.26100 Date of Disbursement 06 / 23 / 2008
	Mailing Address c/o Lisa Lisker 228 S. Washington St, Ste 115	Amount of Each Disbursement this Period 2500.00
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)  
AMERICA'S FOUNDATION

A.

Full Name (Last, First, Middle Initial)  
People With Hart, Inc.

Transaction ID: SB23.26119  
Date of Disbursement

Mailing Address P.O. Box 435

/   /

City Wexford State PA Zip Code 15090

Amount of Each Disbursement this Period

Purpose of Disbursement  
Campaign Contribution - General  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼  
State: District:

B.

Full Name (Last, First, Middle Initial)  
Texans for Senator John Cornyn, Inc.

Transaction ID: SB23.26121  
Date of Disbursement

Mailing Address 6850 Austin Centre Blvd  
Suite 180

/   /

City Austin State TX Zip Code 78731

Amount of Each Disbursement this Period

Purpose of Disbursement  
Campaign Contribution - General  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼  
State: District:

C.

Full Name (Last, First, Middle Initial)  
Tom Manion for Congress

Transaction ID: SB23.26087  
Date of Disbursement

Mailing Address

/   /

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement  
Campaign Contribution - General  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼  
State: District:

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

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 136 / 138

<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) Citizens for Sam Smith	Transaction ID: SB29.26105 Date of Disbursement
	Mailing Address 826 Ridge Rd	<input type="text" value="06"/> / <input type="text" value="26"/> / <input type="text" value="2008"/>
	City Punxsutawney State PA Zip Code 15767	Amount of Each Disbursement this Period
	Purpose of Disbursement Campaign Contribution Candidate Name	<input type="text" value="1000.00"/>
	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) ▼

B.	Full Name (Last, First, Middle Initial) Committee to Elect John Taylor	Transaction ID: SB29.26083 Date of Disbursement
	Mailing Address c/o Carl Ciglar 3316 Belgrade Street	<input type="text" value="06"/> / <input type="text" value="03"/> / <input type="text" value="2008"/>
	City Philadelphia State PA Zip Code 19134	Amount of Each Disbursement this Period
	Purpose of Disbursement Campaign Contribution Candidate Name	<input type="text" value="1000.00"/>
	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) ▼

C.	Full Name (Last, First, Middle Initial) Friends of Dominic Pileggi	Transaction ID: SB29.26110 Date of Disbursement
	Mailing Address 101 W Baltimore Ave, 2nd Floor	<input type="text" value="06"/> / <input type="text" value="26"/> / <input type="text" value="2008"/>
	City Media State PA Zip Code 19063	Amount of Each Disbursement this Period
	Purpose of Disbursement Campaign Contribution Candidate Name	<input type="text" value="1000.00"/>
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="3000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 137 / 138

<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) Friends of Joseph Scarnati	Transaction ID: SB29.26112 Date of Disbursement
	Mailing Address PO Box 177	<input type="text" value="06"/> / <input type="text" value="26"/> / <input type="text" value="2008"/>
	City Brockway State PA Zip Code 15824	Amount of Each Disbursement this Period
	Purpose of Disbursement Campaign Contribution Candidate Name	<input type="text" value="1000.00"/>
	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) ▼

B.	Full Name (Last, First, Middle Initial) Friends of Mike Turzai	Transaction ID: SB29.26114 Date of Disbursement
	Mailing Address PO Box 721	<input type="text" value="06"/> / <input type="text" value="26"/> / <input type="text" value="2008"/>
	City Wexford State PA Zip Code 15090	Amount of Each Disbursement this Period
	Purpose of Disbursement Campaign Contribution Candidate Name	<input type="text" value="1000.00"/>
	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) ▼

C.	Full Name (Last, First, Middle Initial) Friends of Tom Corbett	Transaction ID: SB29.26086 Date of Disbursement
	Mailing Address PO Box 181	<input type="text" value="06"/> / <input type="text" value="03"/> / <input type="text" value="2008"/>
	City Harrisburg State PA Zip Code 17108	Amount of Each Disbursement this Period
	Purpose of Disbursement Campaign Contribution Candidate Name	<input type="text" value="2500.00"/>
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="4500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 138 / 138

<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)  
Lance Rogers for State Senate

**Transaction ID:** SB29.26035

Date of Disbursement

Mailing Address 22 West Lancaster Avenue

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	0	8

City Ardmore State PA Zip Code 19003

Amount of Each Disbursement this Period

1000.00
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Purpose of Disbursement  
Campaign Contribution

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

**B.**

Full Name (Last, First, Middle Initial)  
Tom Killion for State Representative

**Transaction ID:** SB29.26123

Date of Disbursement

Mailing Address 3 Laura Lynn Lane

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

City Glen Mills State PA Zip Code 19342

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
Campaign Contribution

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

2000.00
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**TOTAL** This Period (last page this line number only) ..... ►

9500.00
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