

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 FREEDOM'S DEFENSE FUND

ADDRESS (number and street) PO BOX 96396 WASHINGTON DC 20090 6396

2. FEC IDENTIFICATION NUMBER C00401786 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report (Non-election Year Only) (MY), Termination Report (TER) (b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11) (Non-Election Year Only), Dec 20 (M12) (Non-Election Year Only), 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 01 01 2007 through 06 30 2007

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

Type or Print Name of Treasurer SCOTT B MACKENZIE

Signature of Treasurer Electronically Filed by SCOTT B MACKENZIE Date 12 07 2009

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 FE6AN026 FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
FREEDOM'S DEFENSE FUND

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		23796.49
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period .....	23796.49									
(c) Total Receipts (from Line 19) .....	194154.23	194154.23								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	217950.72	217950.72								
7. Total Disbursements (from Line 31) .....	196978.85	196978.85								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	20971.87	20971.87								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	75321.77									

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
FREEDOM'S DEFENSE FUND

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	37550.00	37550.00
(ii) Unitemized .....	155558.72	155558.72
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	193108.72	193108.72
(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) .....	193108.72	193108.72
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) .....	1045.51	1045.51
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	194154.23	194154.23
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	194154.23	194154.23

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<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.....	185128.85	185128.85
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	185128.85	185128.85
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	11100.00	11100.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	750.00	750.00
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))..	196978.85	196978.85
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	196978.85	196978.85

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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) .....	193108.72	193108.72
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	193108.72	193108.72
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	185128.85	185128.85
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	1045.51	1045.51
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	184083.34	184083.34

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 77  
(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)  
**FREEDOM'S DEFENSE FUND**

**A.** Full Name (Last, First, Middle Initial)  
MR HAROLD AHRENDT 808  
Mailing Address PO BOX 1058

City: **WOODLAND PARK**   State: **CO**   Zip Code: **80866**

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

Name of Employer: **NONE**   Occupation: **RETIRED**

Receipt For:  Primary    General    Other (specify) ▼

Aggregate Year-to-Date ▼: **300.00**

Date of Receipt: **06 / 18 / 2007**  
Transaction ID: **SA11AI.4193**  
Amount of Each Receipt this Period: **100.00**

**B.** Full Name (Last, First, Middle Initial)  
MR EDWARD L ALLSPACH 625  
Mailing Address 46 1300TH AVE

City: **MOUNT PULASKI**   State: **IL**   Zip Code: **62548**

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

Name of Employer: **SELF EMPLOYED**   Occupation: **FARMER**

Receipt For:  Primary    General    Other (specify) ▼

Aggregate Year-to-Date ▼: **250.00**

Date of Receipt: **06 / 12 / 2007**  
Transaction ID: **SA11AI.4250**  
Amount of Each Receipt this Period: **250.00**

**C.** Full Name (Last, First, Middle Initial)  
MRS AGNES M ANNEN 973  
Mailing Address 705 TAYLOR ST

City: **MOUNT ANGEL**   State: **OR**   Zip Code: **97362**

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

Name of Employer: **NONE**   Occupation: **RETIRED**

Receipt For:  Primary    General    Other (specify) ▼

Aggregate Year-to-Date ▼: **265.00**

Date of Receipt: **04 / 23 / 2007**  
Transaction ID: **SA11AI.4360**  
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 7 / 77
	<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)  
FREEDOM'S DEFENSE FUND

**A.** Full Name (Last, First, Middle Initial)  
MR EDMUND F BAGAS 108

Mailing Address 355 PELHAM RD APT 203

City State Zip Code  
NEW ROCHELLE NY 10805

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 1 / 1 9 / 2 0 0 7

Transaction ID: SA11AI.4466

Amount of Each Receipt this Period  
400.00

**B.** Full Name (Last, First, Middle Initial)  
MR ELLIOT BAINES 329

Mailing Address 360 INDIAN HARBOR RD

City State Zip Code  
VERO BEACH FL 32963

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

Name of Employer NONE 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  
0 4 / 2 4 / 2 0 0 7

Transaction ID: SA11AI.4506

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
MR ROBERT L BOUGHTON 930

Mailing Address 3449 PADARO LN

City State Zip Code  
CARPINTERIA CA 93013

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

Name of Employer NONE 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 1 / 0 4 / 2 0 0 7

Transaction ID: SA11AI.5106

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1900.00

**TOTAL** This Period (last page this line 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 8 / 77
	<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)  
FREEDOM'S DEFENSE FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) MR J JERALD BRANSON 672	Date of Receipt MM / DD / YYYY 06 / 07 / 2007
	Mailing Address 7373 E 29TH ST N # 105	<b>Transaction ID:</b> SA11AI.5219
	City State Zip Code WICHITA KS 67226	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer NONE 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) MRS SUSAN VALERIA BRUNOFF 175	Date of Receipt MM / DD / YYYY 01 / 11 / 2007
	Mailing Address 334 W CEDAR ST	<b>Transaction ID:</b> SA11AI.5411
	City State Zip Code NEW HOLLAND PA 17557	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer NONE Occupation RETIRED 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) MRS SUSAN VALERIA BRUNOFF 175	Date of Receipt MM / DD / YYYY 03 / 02 / 2007
	Mailing Address 334 W CEDAR ST	<b>Transaction ID:</b> SA11AI.5412
	City State Zip Code NEW HOLLAND PA 17557	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer NONE Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1100.00
<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 9 / 77
	<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)  
FREEDOM'S DEFENSE FUND

**A.** Full Name (Last, First, Middle Initial)  
MRS SUSAN VALERIA BRUNOFF 175

Mailing Address 334 W CEDAR ST

City NEW HOLLAND State PA Zip Code 17557

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: 04 / 13 / 2007  
**Transaction ID: SA11AI.5410**  
 Amount of Each Receipt this Period: 500.00

**B.** Full Name (Last, First, Middle Initial)  
MRS SUSAN VALERIA BRUNOFF 175

Mailing Address 334 W CEDAR ST

City NEW HOLLAND State PA Zip Code 17557

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1750.00

Date of Receipt: 05 / 17 / 2007  
**Transaction ID: SA11AI.5413**  
 Amount of Each Receipt this Period: 250.00

**C.** Full Name (Last, First, Middle Initial)  
MRS SUSAN VALERIA BRUNOFF 175

Mailing Address 334 W CEDAR ST

City NEW HOLLAND State PA Zip Code 17557

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2250.00

Date of Receipt: 06 / 20 / 2007  
**Transaction ID: SA11AI.5414**  
 Amount of Each Receipt this Period: 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1250.00

**TOTAL** This Period (last page this line number 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 / 77  
(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)  
FREEDOM'S DEFENSE FUND

**A.**

Full Name (Last, First, Middle Initial)  
MR D H BURROWS 240, JR

Mailing Address 2301 STANLEY AVE SE

City State Zip Code  
ROANOKE VA 24014

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
MM / DD / YYYY  
05 / 24 / 2007

Transaction ID: SA11AI.5524

Amount of Each Receipt this Period  
300.00

**B.**

Full Name (Last, First, Middle Initial)  
MR ROBERT J CALDWELL 341

Mailing Address 1511 GALLEON DR

City State Zip Code  
NAPLES FL 34102

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
03 / 06 / 2007

Transaction ID: SA11AI.5605

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)  
A R CALLAWAY 797

Mailing Address 1506 N ALLEGHANEY AVE

City State Zip Code  
ODESSA TX 79761

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 17 / 2007

Transaction ID: SA11AI.5621

Amount of Each Receipt this Period  
150.00

**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 11 / 77

(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)  
FREEDOM'S DEFENSE FUND

**A.**

Full Name (Last, First, Middle Initial)  
A R CALLAWAY 797

Mailing Address 1506 N ALLEGHANEY AVE

City State Zip Code  
ODESSA TX 79761

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 18 / 2007

Transaction ID: SA11AI.5623

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)  
MR LOUIS T CAMILLERI 117

Mailing Address 1603 DEWEY AVE

City State Zip Code  
NORTH BELLMORE NY 11710

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y  
04 / 19 / 2007

Transaction ID: SA11AI.5632

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)  
MR GIUSEPPE CECCHI 222

Mailing Address 1700 N MOORE ST

City State Zip Code  
ARLINGTON VA 22209

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

Name of Employer Occupation  
THE IDI GROUP PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 14 / 2007

Transaction ID: SA11AI.5784

Amount of Each Receipt this Period

1000.00

**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 12 / 77

(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)  
FREEDOM'S DEFENSE FUND

**A.**

Full Name (Last, First, Middle Initial)  
MRS GRACE K COHANE 113

Mailing Address 3335 UTOPIA PRKW

City State Zip Code  
FLUSHING NY 11358

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

Name of Employer Occupation  
NONE RETIRED

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

Date of Receipt

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

Transaction ID: SA11AI.6010

Amount of Each Receipt this Period  
50.00

**B.**

Full Name (Last, First, Middle Initial)  
MRS GRACE K COHANE 113

Mailing Address 3335 UTOPIA PRKW

City State Zip Code  
FLUSHING NY 11358

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

Name of Employer Occupation  
NONE RETIRED

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

Date of Receipt

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

Transaction ID: SA11AI.6014

Amount of Each Receipt this Period  
50.00

**C.**

Full Name (Last, First, Middle Initial)  
MRS CLARICE T COLLINS 504

Mailing Address 2002 S GEORGIA AVE

City State Zip Code  
MASON CITY IA 50401

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

Name of Employer Occupation  
NONE RETIRED

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		1	4		2	0	0	7

Transaction ID: SA11AI.6048

Amount of Each Receipt this Period  
100.00

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

200.00

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

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

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

FOR LINE NUMBER: PAGE 13 / 77  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND

**A.** Full Name (Last, First, Middle Initial)  
MRS M C CONKLIN 973

Mailing Address 2796 S MAIN RD UNIT 95

City State Zip Code  
LEBANON OR 97355

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  

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

**Transaction ID:** SA11AI.6087

Amount of Each Receipt this Period  
45.00

**B.** Full Name (Last, First, Middle Initial)  
MRS JAMES COUNTRYMAN 797

Mailing Address 1700 GRAHAM AVE

City State Zip Code  
ODESSA TX 79763

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

Name of Employer Occupation  
NONE HOMEMAKER

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	4	/	2	0	0	7

**Transaction ID:** SA11AI.6176

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
MRS JAMES COUNTRYMAN 797

Mailing Address 1700 GRAHAM AVE

City State Zip Code  
ODESSA TX 79763

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

Name of Employer Occupation  
NONE HOMEMAKER

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1300.00

Date of Receipt  

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

**Transaction ID:** SA11AI.6177

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1345.00**

**TOTAL** This Period (last page this line number 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 / 77  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND

**A.** Full Name (Last, First, Middle Initial)  
MISS BETTY V COVELL 207  
Mailing Address 15707 BRADFORD DR

City State Zip Code  
LAUREL MD 20707

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

Name of Employer NONE Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 04 / 30 / 2007  
Transaction ID: SA11AI.6188  
Amount of Each Receipt this Period: 200.00

**B.** Full Name (Last, First, Middle Initial)  
MISS BETTY V COVELL 207  
Mailing Address 15707 BRADFORD DR

City State Zip Code  
LAUREL MD 20707

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

Name of Employer NONE Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 06 / 20 / 2007  
Transaction ID: SA11AI.6186  
Amount of Each Receipt this Period: 100.00

**C.** Full Name (Last, First, Middle Initial)  
NANCY F COX 787  
Mailing Address 1107 YAUPON VALLEY RD

City State Zip Code  
WEST LAKE HILLS TX 78746

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 ▼ 1000.00

Date of Receipt: 04 / 19 / 2007  
Transaction ID: SA11AI.6205  
Amount of Each Receipt this Period: 1000.00

**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 15 / 77  
(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)  
**FREEDOM'S DEFENSE FUND**

**A.**

Full Name (Last, First, Middle Initial)  
MRS LOIS CRANTZ 945

Mailing Address 617 TERRA CALIFORNIA DR APT 6

City State Zip Code  
WALNUT CREEK CA 94595

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
MM / DD / YYYY  
05 / 11 / 2007

Transaction ID: SA11AI.6229

Amount of Each Receipt this Period  
50.00

**B.**

Full Name (Last, First, Middle Initial)  
MISS RUTH ESTELLE CROCKETT 242

Mailing Address 1203 1ST AVE E

City State Zip Code  
BIG STONE GAP VA 24219

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
06 / 14 / 2007

Transaction ID: SA11AI.6275

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)  
MR MARSHALL CUSICK 678

Mailing Address PO BOX 414

City State Zip Code  
MINNEOLA KS 67865

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
MM / DD / YYYY  
04 / 19 / 2007

Transaction ID: SA11AI.6361

Amount of Each Receipt this Period  
140.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **440.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 77  
(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)  
**FREEDOM'S DEFENSE FUND**

**A.** Full Name (Last, First, Middle Initial)  
MR MARSHALL CUSICK 678

Mailing Address PO BOX 414

City State Zip Code  
**MINNEOLA KS 67865**

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

Name of Employer: NONE Occupation: RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **295.00**

Date of Receipt: **06 / 11 / 2007**

Transaction ID: SA11AI.6358

Amount of Each Receipt this Period: **50.00**

**B.** Full Name (Last, First, Middle Initial)  
MRS MARJORIE DAVIS 043

Mailing Address 6 HUCKLEBERRY LN

City State Zip Code  
**AUGUSTA ME 04330**

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

Name of Employer: NONE Occupation: RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt: **02 / 26 / 2007**

Transaction ID: SA11AI.6440

Amount of Each Receipt this Period: **300.00**

**C.** Full Name (Last, First, Middle Initial)  
MRS MARJORIE DAVIS 043

Mailing Address 6 HUCKLEBERRY LN

City State Zip Code  
**AUGUSTA ME 04330**

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

Name of Employer: NONE Occupation: RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt: **03 / 19 / 2007**

Transaction ID: SA11AI.6439

Amount of Each Receipt this Period: **200.00**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **550.00**

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 77  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**FREEDOM'S DEFENSE FUND**

**A.** Full Name (Last, First, Middle Initial)  
MRS MARJORIE DAVIS 043

Mailing Address **6 HUCKLEBERRY LN**

City **AUGUSTA** State **ME** Zip Code **04330**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt **04 / 26 / 2007**  
**Transaction ID: SA11AI.6437**  
 Amount of Each Receipt this Period **300.00**

**B.** Full Name (Last, First, Middle Initial)  
MRS MARJORIE DAVIS 043

Mailing Address **6 HUCKLEBERRY LN**

City **AUGUSTA** State **ME** Zip Code **04330**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1800.00**

Date of Receipt **05 / 31 / 2007**  
**Transaction ID: SA11AI.6436**  
 Amount of Each Receipt this Period **1000.00**

**C.** Full Name (Last, First, Middle Initial)  
MRS MARJORIE DAVIS 043

Mailing Address **6 HUCKLEBERRY LN**

City **AUGUSTA** State **ME** Zip Code **04330**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2050.00**

Date of Receipt **06 / 28 / 2007**  
**Transaction ID: SA11AI.6438**  
 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 18 / 77  
(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)  
FREEDOM'S DEFENSE FUND

**A.**

Full Name (Last, First, Middle Initial)  
MR CONRAD C DELEEUW 076

Mailing Address 11 CHAPMAN DR

City State Zip Code  
LITTLE FERRY NJ 07643

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
MM / DD / YYYY  
06 / 19 / 2007

**Transaction ID:** SA11AI.6543

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
MRS CLARA DISNEY 210

Mailing Address 7541 B A BLVD NE

City State Zip Code  
GLEN BURNIE MD 21060

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2007

**Transaction ID:** SA11AI.6668

Amount of Each Receipt this Period  
300.00

**C.**

Full Name (Last, First, Middle Initial)  
MRS CLARA DISNEY 210

Mailing Address 7541 B A BLVD NE

City State Zip Code  
GLEN BURNIE MD 21060

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
04 / 18 / 2007

**Transaction ID:** SA11AI.6667

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 500.00

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

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

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

FOR LINE NUMBER: PAGE 19 / 77  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND

**A.** Full Name (Last, First, Middle Initial)  
MR BREWSTER J DURKEE 322  
 Mailing Address 5027 RIVER POINT RD  
 City JACKSONVILLE State FL Zip Code 32207  
 Date of Receipt 04 / 17 / 2007  
 Transaction ID: SA11AI.6780  
 Amount of Each Receipt this Period 200.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 275.00

**B.** Full Name (Last, First, Middle Initial)  
MR BREWSTER J DURKEE 322  
 Mailing Address 5027 RIVER POINT RD  
 City JACKSONVILLE State FL Zip Code 32207  
 Date of Receipt 05 / 24 / 2007  
 Transaction ID: SA11AI.6782  
 Amount of Each Receipt this Period 100.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 375.00

**C.** Full Name (Last, First, Middle Initial)  
MR BREWSTER J DURKEE 322  
 Mailing Address 5027 RIVER POINT RD  
 City JACKSONVILLE State FL Zip Code 32207  
 Date of Receipt 06 / 15 / 2007  
 Transaction ID: SA11AI.6779  
 Amount of Each Receipt this Period 200.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 575.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 500.00  
**TOTAL** This Period (last page this line number only) ..... ▶

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

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

FOR LINE NUMBER: PAGE 20 / 77  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND

**A.** Full Name (Last, First, Middle Initial)  
MR ROBERT J EICHENBERG 926  
Mailing Address 1 COLLINS IS

City State Zip Code  
NEWPORT BEACH CA 92662

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

Name of Employer Occupation  
ELLISON ED EQUIP INC BUSINESS OWNER

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 3 / 2 0 0 7

Transaction ID: SA11AI.6872  
Amount of Each Receipt this Period 1000.00

**B.** Full Name (Last, First, Middle Initial)  
MRS HELEN E FARSON 918  
Mailing Address 211 S 6TH ST

City State Zip Code  
ALHAMBRA CA 91801

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.7108  
Amount of Each Receipt this Period 15.00

**C.** Full Name (Last, First, Middle Initial)  
MRS HELEN E FARSON 918  
Mailing Address 211 S 6TH ST

City State Zip Code  
ALHAMBRA CA 91801

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

Name of Employer Occupation  
NONE RETIRED

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

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

Transaction ID: SA11AI.7102  
Amount of Each Receipt this Period 15.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1030.00

**TOTAL** This Period (last page this line number 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 / 77  
(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)  
FREEDOM'S DEFENSE FUND

**A.** Full Name (Last, First, Middle Initial)  
MR FRANK FIELDER 148

Mailing Address 1384 COUNTY RD

City ALPINE State NY Zip Code 14805

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 04 / 16 / 2007  
**Transaction ID: SA11AI.7173**  
 Amount of Each Receipt this Period: 150.00

**B.** Full Name (Last, First, Middle Initial)  
MR WILLIAM H FOWLKES 687

Mailing Address 53740 833 RD

City MEADOW GROVE State NE Zip Code 68752

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt: 03 / 19 / 2007  
**Transaction ID: SA11AI.7525**  
 Amount of Each Receipt this Period: 45.00

**C.** Full Name (Last, First, Middle Initial)  
MR ARNOLD GARRISON 024

Mailing Address 181 PINE RIDGE RD

City WABAN State MA Zip Code 02468

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 06 / 11 / 2007  
**Transaction ID: SA11AI.7237**  
 Amount of Each Receipt this Period: 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1195.00

**TOTAL** This Period (last page this line number 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 / 77

(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)  
FREEDOM'S DEFENSE FUND

**A.**

Full Name (Last, First, Middle Initial)  
MR PHILIP O GEIER 452, JR

Mailing Address 6000 REDBIRD HOLLOW LN

City State Zip Code  
CINCINNATI OH 45243

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

Name of Employer Occupation  
NONE RETIRED

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

Date of Receipt

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

Transaction ID: SA11AI.7262

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)  
MR PHILIP O GEIER 452, JR

Mailing Address 6000 REDBIRD HOLLOW LN

City State Zip Code  
CINCINNATI OH 45243

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

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

Transaction ID: SA11AI.7261

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)  
MR RICHARD S GRIFFITH 705

Mailing Address PO BOX 91610

City State Zip Code  
LAFAYETTE LA 70509

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

Name of Employer Occupation  
RICHARD GRIFFITH INVESTER

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 6 / 1 8 / 2 0 0 7

Transaction ID: SA11AI.7938

Amount of Each Receipt this Period

100.00

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

300.00

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

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

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

FOR LINE NUMBER: PAGE 23 / 77  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND

**A.** Full Name (Last, First, Middle Initial)  
MR RICHARD S GRIFFITH 705  
Mailing Address PO BOX 91610

City State Zip Code  
LAFAYETTE LA 70509

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

Name of Employer Occupation  
RICHARD GRIFFITH INVESTER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
06 / 25 / 2007

Transaction ID: SA11AI.7937

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
DR THOMAS HAGGERTY 920  
Mailing Address 1408 LA PLAZA DR

City State Zip Code  
SAN MARCOS CA 92078

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

Name of Employer Occupation  
DOCTOR

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
MM / DD / YYYY  
06 / 18 / 2007

Transaction ID: SA11AI.8068

Amount of Each Receipt this Period  
110.00

**C.** Full Name (Last, First, Middle Initial)  
MRS HELEN B HEINZEN 337  
Mailing Address 8333 SEMINOLE BLVD APT 338

City State Zip Code  
SEMINOLE FL 33772

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
MM / DD / YYYY  
05 / 17 / 2007

Transaction ID: SA11AI.8439

Amount of Each Receipt this Period  
215.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 425.00

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

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

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

FOR LINE NUMBER: PAGE 24 / 77  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND

**A.** Full Name (Last, First, Middle Initial)  
MRS DORIS T HENDRICKS 212  
 Mailing Address 8810 WALTHER BLVD APT 2229  
 City State Zip Code  
 PARKVILLE MD 21234  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 1 6 / 2 0 0 7  
**Transaction ID:** SA11AI.8485  
 Amount of Each Receipt this Period  
 40.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

**B.** Full Name (Last, First, Middle Initial)  
MRS DORIS T HENDRICKS 212  
 Mailing Address 8810 WALTHER BLVD APT 2229  
 City State Zip Code  
 PARKVILLE MD 21234  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 1 8 / 2 0 0 7  
**Transaction ID:** SA11AI.8486  
 Amount of Each Receipt this Period  
 40.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

**C.** Full Name (Last, First, Middle Initial)  
MRS AUDREY HICKMAN 338  
 Mailing Address 109 FLORA DR  
 City State Zip Code  
 HAINES CITY FL 33844  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 2 4 / 2 0 0 7  
**Transaction ID:** SA11AI.8563  
 Amount of Each Receipt this Period  
 500.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 580.00  
**TOTAL** This Period (last page this line number 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 / 77  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**FREEDOM'S DEFENSE FUND**

**A.** Full Name (Last, First, Middle Initial)  
MR TATNALL L HILLMAN 025

Mailing Address PO BOX 332

City State Zip Code  
**CHILMARK MA 02535**

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

Name of Employer NONE Occupation **RETIRED**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt MM / DD / YYYY  
**01 / 08 / 2007**

**Transaction ID: SA11AI.8611**

Amount of Each Receipt this Period **250.00**

**B.** Full Name (Last, First, Middle Initial)  
MR TATNALL L HILLMAN 025

Mailing Address PO BOX 332

City State Zip Code  
**CHILMARK MA 02535**

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

Name of Employer NONE Occupation **RETIRED**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1750.00**

Date of Receipt MM / DD / YYYY  
**06 / 21 / 2007**

**Transaction ID: SA11AI.8610**

Amount of Each Receipt this Period **1500.00**

**C.** Full Name (Last, First, Middle Initial)  
MR HARRY JEFFCOAT 352, JR

Mailing Address 5266 GRANTSWOOD RD

City State Zip Code  
**BIRMINGHAM AL 35210**

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

Name of Employer RETIRED Occupation **MECHANICAL ENGINEER**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt MM / DD / YYYY  
**06 / 14 / 2007**

**Transaction ID: SA11AI.9062**

Amount of Each Receipt this Period **250.00**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2000.00**

**TOTAL** This Period (last page this line number 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 / 77

(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)  
FREEDOM'S DEFENSE FUND

**A.**

Full Name (Last, First, Middle Initial)

MRS PHYLLIS JENKINS 834

Mailing Address 3091 E 1425 N

City State Zip Code  
ASHTON ID 83420

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 223.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 3 / 2 0 0 7

Transaction ID: SA11AI.9073

Amount of Each Receipt this Period

35.00

**B.**

Full Name (Last, First, Middle Initial)

MRS PHYLLIS JENKINS 834

Mailing Address 3091 E 1425 N

City State Zip Code  
ASHTON ID 83420

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 243.00

Date of Receipt

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

Transaction ID: SA11AI.9074

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

MR WILLIAM R JOHNSON 288

Mailing Address 34 LAMBETH DR

City State Zip Code  
ASHEVILLE NC 28803

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

Name of Employer Occupation  
NONE RETIRED

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

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 5 / 2 0 0 7

Transaction ID: SA11AI.9144

Amount of Each Receipt this Period

250.00

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

305.00

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

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

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

FOR LINE NUMBER: PAGE 27 / 77  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND

**A.** Full Name (Last, First, Middle Initial)  
MRS MARY JORDAN 628  
Mailing Address 321 W SOUTH ST  
City GRAYVILLE State IL Zip Code 62844  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NONE Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00  
Date of Receipt 05 / 24 / 2007  
Transaction ID: SA11AI.9295  
Amount of Each Receipt this Period 180.00

**B.** Full Name (Last, First, Middle Initial)  
MRS MARY JORDAN 628  
Mailing Address 321 W SOUTH ST  
City GRAYVILLE State IL Zip Code 62844  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NONE Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 330.00  
Date of Receipt 06 / 21 / 2007  
Transaction ID: SA11AI.9293  
Amount of Each Receipt this Period 30.00

**C.** Full Name (Last, First, Middle Initial)  
MRS SUSAN KOTTA 115  
Mailing Address 33 LITTLEWORTH LN  
City SEA CLIFF State NY Zip Code 11579  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NONE Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 275.00  
Date of Receipt 06 / 18 / 2007  
Transaction ID: SA11AI.9765  
Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 310.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 77

(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)  
**FREEDOM'S DEFENSE FUND**

**A.**

Full Name (Last, First, Middle Initial)  
DR QUENTIN E KRAFKA 785

Mailing Address 921 SANTA ANNA DR

City State Zip Code  
**ALAMO TX 78516**

FEC ID number of contributing federal political committee. C

Name of Employer NONE Occupation **RETIRED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt MM / DD / YYYY  
04 / 23 / 2007

**Transaction ID: SA11AI.9780**

Amount of Each Receipt this Period 100.00

**B.**

Full Name (Last, First, Middle Initial)  
DR QUENTIN E KRAFKA 785

Mailing Address 921 SANTA ANNA DR

City State Zip Code  
**ALAMO TX 78516**

FEC ID number of contributing federal political committee. C

Name of Employer NONE Occupation **RETIRED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt MM / DD / YYYY  
05 / 04 / 2007

**Transaction ID: SA11AI.9779**

Amount of Each Receipt this Period 50.00

**C.**

Full Name (Last, First, Middle Initial)  
DR QUENTIN E KRAFKA 785

Mailing Address 921 SANTA ANNA DR

City State Zip Code  
**ALAMO TX 78516**

FEC ID number of contributing federal political committee. C

Name of Employer NONE Occupation **RETIRED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt MM / DD / YYYY  
06 / 19 / 2007

**Transaction ID: SA11AI.9776**

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 29 / 77  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND

**A.** Full Name (Last, First, Middle Initial)  
DR QUENTIN E KRAFKA 785  
Mailing Address 921 SANTA ANNA DR  
City ALAMO State TX Zip Code 78516  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NONE Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 700.00  
Date of Receipt 06 / 22 / 2007  
Transaction ID: SA11AI.9778  
Amount of Each Receipt this Period 250.00

**B.** Full Name (Last, First, Middle Initial)  
MR ROBERT R MAULDIN 278  
Mailing Address PO BOX 7786  
City ROCKY MOUNT State NC Zip Code 27804  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NONE Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00  
Date of Receipt 04 / 16 / 2007  
Transaction ID: SA11AI.10068  
Amount of Each Receipt this Period 250.00

**C.** Full Name (Last, First, Middle Initial)  
MRS MADELINE A MELGARD 209  
Mailing Address 3701 INTERNATIONAL DR APT 507  
City SILVER SPRING State MD Zip Code 20906  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NONE Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 06 / 13 / 2007  
Transaction ID: SA11AI.10933  
Amount of Each Receipt this Period 35.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 535.00  
**TOTAL** This Period (last page this line 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 30 / 77
	<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)  
FREEDOM'S DEFENSE FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) MR KENDALL C MILLER 936	Date of Receipt MM / DD / YYYY 04 / 13 / 2007
	Mailing Address 7350 WAKEFIELD AVE	<b>Transaction ID:</b> SA11AI.11072
	City State Zip Code REEDLEY CA 93654	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation KENCAROL INC FARM MANAGER	
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) MR ROGER MILLIKEN 293	Date of Receipt MM / DD / YYYY 06 / 14 / 2007
	Mailing Address PO BOX 3167	<b>Transaction ID:</b> SA11AI.11078
	City State Zip Code SPARTANBURG SC 29304	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation MILLIKEN & COMPANY INDUSTRIALIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) MR CLIFTON A MORRIS 180	Date of Receipt MM / DD / YYYY 06 / 28 / 2007
	Mailing Address 2725 NAZARETH RD	<b>Transaction ID:</b> SA11AI.11238
	City State Zip Code EASTON PA 18045	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation NONE RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5350.00
<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: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	PAGE 31 / 77
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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) MR CHARLES S MYERS 280	Date of Receipt MM / DD / YYYY 04 / 12 / 2007
	Mailing Address 1201 ODELL SCHOOL RD	<b>Transaction ID:</b> SA11AI.11360
	City State Zip Code CONCORD NC 28027	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer SHILOH FARMS	Occupation REAL ESTATE SALES	
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 RICHARD J NELSON 940	Date of Receipt MM / DD / YYYY 04 / 30 / 2007
	Mailing Address 81 CRESTWOOD DR APT 16	<b>Transaction ID:</b> SA11AI.11435
	City State Zip Code DALY CITY CA 94015	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer NONE	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 K THOMAS NOELL 705	Date of Receipt MM / DD / YYYY 06 / 14 / 2007
	Mailing Address 630 GREENBRIAR RD	<b>Transaction ID:</b> SA11AI.11543
	City State Zip Code LAFAYETTE LA 70503	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer RETIRED	Occupation PHYSICIAN	
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) .....	▶	1250.00
<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 32 / 77

(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)  
FREEDOM'S DEFENSE FUND

**A.**

Full Name (Last, First, Middle Initial)  
MR RAY P ODEN 711, JR

Mailing Address 702 THORA BLVD

City State Zip Code  
SHREVEPORT LA 71106

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

Name of Employer Occupation  
NONE RETIRED

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

Date of Receipt

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

Transaction ID: SA11AI.11621

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
MR RAY P ODEN 711, JR

Mailing Address 702 THORA BLVD

City State Zip Code  
SHREVEPORT LA 71106

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 350.00

Date of Receipt

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

Transaction ID: SA11AI.11620

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
MR RAY P ODEN 711, JR

Mailing Address 702 THORA BLVD

City State Zip Code  
SHREVEPORT LA 71106

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

Name of Employer Occupation  
NONE RETIRED

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

Date of Receipt

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

Transaction ID: SA11AI.11619

Amount of Each Receipt this Period  
250.00

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

600.00

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 77  
(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)  
**FREEDOM'S DEFENSE FUND**

**A.** Full Name (Last, First, Middle Initial)  
MR JAY L PETERS 277

Mailing Address 3811 DARWIN RD

City State Zip Code  
**DURHAM NC 27707**

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

Name of Employer Occupation  
**DURHAM TECH COMM COLL PROFESSOR**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **06 / 25 / 2007**

**Transaction ID: SA11AI.11986**

Amount of Each Receipt this Period **100.00**

**B.** Full Name (Last, First, Middle Initial)  
MR E STUART QUARNGESSER 212

Mailing Address 116 W UNIVERSITY PKWY APT 1334

City State Zip Code  
**BALTIMORE MD 21210**

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

Name of Employer Occupation  
**NONE RETIRED**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **850.00**

Date of Receipt **05 / 16 / 2007**

**Transaction ID: SA11AI.12245**

Amount of Each Receipt this Period **750.00**

**C.** Full Name (Last, First, Middle Initial)  
MR E STUART QUARNGESSER 212

Mailing Address 116 W UNIVERSITY PKWY APT 1334

City State Zip Code  
**BALTIMORE MD 21210**

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

Name of Employer Occupation  
**NONE RETIRED**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **950.00**

Date of Receipt **06 / 19 / 2007**

**Transaction ID: SA11AI.12247**

Amount of Each Receipt this Period **100.00**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **950.00**

**TOTAL** This Period (last page this line number 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 / 77  
(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)  
FREEDOM'S DEFENSE FUND

**A.**

Full Name (Last, First, Middle Initial)  
MR MAURICE J REESE 537

Mailing Address 713 LAKEWOOD BLVD

City MADISON State WI Zip Code 53704

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 06 / 25 / 2007  
**Transaction ID:** SA11AI.12379  
 Amount of Each Receipt this Period: 250.00

**B.**

Full Name (Last, First, Middle Initial)  
LUNS福德 RICHARDSON 068

Mailing Address 7 INDIAN SPRING RD

City NORWALK State CT Zip Code 06853

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

Name of Employer DIRECTOR Occupation VARIOUS CORPORATIONS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 04 / 16 / 2007  
**Transaction ID:** SA11AI.12469  
 Amount of Each Receipt this Period: 500.00

**C.**

Full Name (Last, First, Middle Initial)  
MRS MARGARET E RICHARDSON 619

Mailing Address 514 N HICKORY ST

City WINDSOR State IL Zip Code 61957

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 04 / 17 / 2007  
**Transaction ID:** SA11AI.12481  
 Amount of Each Receipt this Period: 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **800.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 77  
(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

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)  
FREEDOM'S DEFENSE FUND

**A.**

Full Name (Last, First, Middle Initial)  
MRS MARGARET E RICHARDSON 619

Mailing Address 514 N HICKORY ST

City State Zip Code  
WINDSOR IL 61957

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
310.00

Date of Receipt  
MM / DD / YYYY  
05 / 14 / 2007

Transaction ID: SA11AI.12479

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
MRS ELIZABETH J SCHAFER 921

Mailing Address 610 1ST ST

City State Zip Code  
CORONADO CA 92118

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

Name of Employer Occupation  
NONE HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
01 / 10 / 2007

Transaction ID: SA11AI.12944

Amount of Each Receipt this Period  
500.00

**C.**

Full Name (Last, First, Middle Initial)  
MRS ELIZABETH J SCHAFER 921

Mailing Address 610 1ST ST

City State Zip Code  
CORONADO CA 92118

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

Name of Employer Occupation  
NONE HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2007

Transaction ID: SA11AI.12946

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1100.00**

**TOTAL** This Period (last page this line 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 36 / 77
	<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)  
FREEDOM'S DEFENSE FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) MRS ELIZABETH J SCHAFER 921		Date of Receipt
	Mailing Address 610 1ST 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
	City	State	Zip Code
	CORONADO	CA	92118
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.12945
Name of Employer NONE		Occupation HOMEMAKER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00	<input type="text"/> 1000.00

<b>B.</b>	Full Name (Last, First, Middle Initial) MR PAUL SCHILLING 852		Date of Receipt
	Mailing Address 9515 E SUNDANCE TRL		<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
	City	State	Zip Code
	SCOTTSDALE	AZ	85262
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.12986
Name of Employer RETIRED		Occupation ATTORNEY	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	<input type="text"/> 500.00

<b>C.</b>	Full Name (Last, First, Middle Initial) MR EDWIN A SEIPP 940		Date of Receipt
	Mailing Address 49 TUSCALOOSA 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
	City	State	Zip Code
	ATHERTON	CA	94027
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.13244
Name of Employer NONE		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	<input type="text"/> 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 2000.00
<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: PAGE 37 / 77  
(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
							17

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND

**A.**

Full Name (Last, First, Middle Initial)  
MR JAMES J SHEA 922, JR

Mailing Address 70168 SONORA RD

City State Zip Code  
RANCHO MIRAGE CA 92270

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 09 / 2007

Transaction ID: SA11AI.13324

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
MR RAYMOND L SIBLEY 559

Mailing Address 632 8TH ST SW

City State Zip Code  
ROCHESTER MN 55902

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

Name of Employer AMERICAN BUSINESS FINANCIAL SERVICES Occupation FINANCE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
06 / 18 / 2007

Transaction ID: SA11AI.13391

Amount of Each Receipt this Period  
200.00

**C.**

Full Name (Last, First, Middle Initial)  
MS EDITH A SIKORSKY 180

Mailing Address 1144 WALNUT DR

City State Zip Code  
DANIELSVILLE PA 18038

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2007

Transaction ID: SA11AI.13413

Amount of Each Receipt this Period  
150.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **600.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 77  
(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)  
FREEDOM'S DEFENSE FUND

**A.**

Full Name (Last, First, Middle Initial)  
MS EDITH A SIKORSKY 180

Mailing Address 1144 WALNUT DR

City State Zip Code  
DANIELSVILLE PA 18038

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
MM / DD / YYYY  
06 / 18 / 2007

Transaction ID: SA11AI.13412

Amount of Each Receipt this Period  
75.00

**B.**

Full Name (Last, First, Middle Initial)  
MISS VIOLETA SMADBECK 100

Mailing Address 211 CENTRAL PARK W # 2J  
# 2J

City State Zip Code  
NEW YORK NY 10024

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
MM / DD / YYYY  
06 / 19 / 2007

Transaction ID: SA11AI.13532

Amount of Each Receipt this Period  
35.00

**C.**

Full Name (Last, First, Middle Initial)  
MR DONALD G STEVENS 349

Mailing Address 13508 NW COCO PLUM CT

City State Zip Code  
PALM CITY FL 34990

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
06 / 19 / 2007

Transaction ID: SA11AI.13778

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 360.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 77
	<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)  
FREEDOM'S DEFENSE FUND

**A.**

Full Name (Last, First, Middle Initial) MRS ADA STRASENBURGH 082		Date of Receipt
Mailing Address PO BOX 608 2370 R R 9		<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
City	State	Zip Code
OCEAN VIEW	NJ	08230
FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.13857
<input type="text"/> C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text"/> 100.00
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date	
<input type="checkbox"/> Primary <input type="checkbox"/> General	▼	
<input type="checkbox"/> Other (specify) ▼	<input type="text"/>	235.00

**B.**

Full Name (Last, First, Middle Initial) MR JOHN STRASENBURGH 082		Date of Receipt
Mailing Address 2370 RTE 9		<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
City	State	Zip Code
OCEAN VIEW	NJ	08230
FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.13861
<input type="text"/> C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text"/> 250.00
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date	
<input type="checkbox"/> Primary <input type="checkbox"/> General	▼	
<input type="checkbox"/> Other (specify) ▼	<input type="text"/>	250.00

**C.**

Full Name (Last, First, Middle Initial) MRS BETTY STRONG 716		Date of Receipt
Mailing Address 6811 BRINKLEY 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
City	State	Zip Code
PINE BLUFF	AR	71603
FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.13880
<input type="text"/> C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text"/> 250.00
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date	
<input type="checkbox"/> Primary <input type="checkbox"/> General	▼	
<input type="checkbox"/> Other (specify) ▼	<input type="text"/>	250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 600.00
<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: PAGE 40 / 77  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND

**A.** Full Name (Last, First, Middle Initial)  
MR ALBERT TOVAR 951  
Mailing Address 4966 KINGSTON WAY

City State Zip Code  
SAN JOSE CA 95130

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

Name of Employer NONE Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 1 / 1 5 / 2 0 0 7

Transaction ID: SA11AI.14251

Amount of Each Receipt this Period  
225.00

**B.** Full Name (Last, First, Middle Initial)  
MR JAMES VAN VALKENBURG 190  
Mailing Address 535 GRADYVILLE RD B125

City State Zip Code  
NEWTOWN SQUARE PA 19073

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

Name of Employer NONE 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  
0 4 / 1 6 / 2 0 0 7

Transaction ID: SA11AI.14417

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
MR JACQUES VINMONT 334  
Mailing Address 21 ASPEN CT

City State Zip Code  
BOYNTON BEACH FL 33436

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

Name of Employer NONE 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  
0 4 / 1 0 / 2 0 0 7

Transaction ID: SA11AI.14478

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 725.00

**TOTAL** This Period (last page this line number 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 / 77  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND

**A.** Full Name (Last, First, Middle Initial)  
MR WILLIAM WAGGY 956  
Mailing Address 363 BUCK AVE  
City VACAVILLE State CA Zip Code 95688  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NONE Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00  
Date of Receipt 01 / 11 / 2007  
Transaction ID: SA11AI.14534  
Amount of Each Receipt this Period 250.00

**B.** Full Name (Last, First, Middle Initial)  
MRS MADONNA WALTISPERGER 781  
Mailing Address 6462 FM 1144  
City KARNES CITY State TX Zip Code 78118  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NONE Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 275.00  
Date of Receipt 05 / 24 / 2007  
Transaction ID: SA11AI.14613  
Amount of Each Receipt this Period 150.00

**C.** Full Name (Last, First, Middle Initial)  
MR ROBERT D WELCHLI 482  
Mailing Address 348 PROVENCAL RD  
City GROSSE POINTE FARM State MI Zip Code 48236  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NONE Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00  
Date of Receipt 04 / 26 / 2007  
Transaction ID: SA11AI.14762  
Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 500.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 77

(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)  
FREEDOM'S DEFENSE FUND

**A.**

Full Name (Last, First, Middle Initial)  
MR ROBERT D WELCHLI 482

Mailing Address 348 PROVENAL RD

City State Zip Code  
GROSSE POINTE FARM MI 48236

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt

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

Transaction ID: SA11AI.14763

Amount of Each Receipt this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)  
MR ROBERT D WELCHLI 482

Mailing Address 348 PROVENAL RD

City State Zip Code  
GROSSE POINTE FARM MI 48236

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

Name of Employer Occupation  
NONE RETIRED

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

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 5 / 2 0 0 7

Transaction ID: SA11AI.14761

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)  
MR JAMES R WHEATON 319, JR

Mailing Address 5962 MANASSAS DR

City State Zip Code  
COLUMBUS GA 31909

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

Name of Employer Occupation

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

Date of Receipt

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

Transaction ID: SA11AI.14826

Amount of Each Receipt this Period

300.00

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

550.00

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

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

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

FOR LINE NUMBER: PAGE 43 / 77

(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)  
FREEDOM'S DEFENSE FUND

**A.**

Full Name (Last, First, Middle Initial)  
MR JAMES WHITCOMB 852, JR

Mailing Address 22840 N COUNTRY CLUB TRL

City State Zip Code  
SCOTTSDALE AZ 85255

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

Name of Employer Occupation  
NONE 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 / 2 2 / 2 0 0 7

Transaction ID: SA11AI.14839

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
MR JACK V WILLIAMS 769

Mailing Address 3716 MARINER TER

City State Zip Code  
SAN ANGELO TX 76903

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 465.00

Date of Receipt

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

Transaction ID: SA11AI.14955

Amount of Each Receipt this Period  
400.00

**C.**

Full Name (Last, First, Middle Initial)  
MISS BETTY K WOLFE 761

Mailing Address 1600 TEXAS ST APT 1611

City State Zip Code  
FORT WORTH TX 76102

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

Name of Employer Occupation  
NONE 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 3 / 0 1 / 2 0 0 7

Transaction ID: SA11AI.15048

Amount of Each Receipt this Period  
300.00

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

950.00

**TOTAL** This Period (last page this line number 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 / 77  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND

**A.** Full Name (Last, First, Middle Initial)  
MISS BETTY K WOLFE 761  
Mailing Address 1600 TEXAS ST APT 1611

City State Zip Code  
FORT WORTH TX 76102

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

Name of Employer NONE Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt  
MM / DD / YYYY  
04 / 26 / 2007

Transaction ID: SA11AI.15046

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
MISS BETTY K WOLFE 761  
Mailing Address 1600 TEXAS ST APT 1611

City State Zip Code  
FORT WORTH TX 76102

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

Name of Employer NONE Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt  
MM / DD / YYYY  
05 / 24 / 2007

Transaction ID: SA11AI.15049

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
MISS BETTY K WOLFE 761  
Mailing Address 1600 TEXAS ST APT 1611

City State Zip Code  
FORT WORTH TX 76102

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

Name of Employer NONE Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1400.00

Date of Receipt  
MM / DD / YYYY  
06 / 28 / 2007

Transaction ID: SA11AI.15044

Amount of Each Receipt this Period  
300.00

**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 45 / 77  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND

**A.**

Full Name (Last, First, Middle Initial)  
MISS JOSEPHINE E WOOD 245

Mailing Address 1400 ENTERPRISE DR APT N330

City State Zip Code  
LYNCHBURG VA 24502

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

Name of Employer Occupation  
FAIRFAX PUBLIC SCHOOLS EDUCATOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 1 3 / 2 0 0 7

Transaction ID: SA11AI.15082

Amount of Each Receipt this Period  
150.00

**B.**

Full Name (Last, First, Middle Initial)  
MISS JOSEPHINE E WOOD 245

Mailing Address 1400 ENTERPRISE DR APT N330

City State Zip Code  
LYNCHBURG VA 24502

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

Name of Employer Occupation  
FAIRFAX PUBLIC SCHOOLS EDUCATOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.15084

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	37550.00

B. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.15084**

Best Efforts Procedures: Within thirty (30) days of receipt of a contribution, the committee takes the following steps to satisfy the 'best efforts' requirements: (i) a letter is sent, clearly asking for the missing information, without soliciting a contribution; (ii) the contributor is informed of the requirements of federal law for the reporting of such information; and (iii) a return envelope is provided, as well as a fax number and an email address. Upon receipt of the information the committee amends its reports to provide the newly obtained information.

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 47 / 77	
	(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)  
FREEDOM'S DEFENSE FUND

**A.** Full Name (Last, First, Middle Initial)  
CONSOLIDATED MAILING SERVICES

Mailing Address 504 SHAW ROAD

City State Zip Code  
STERLING VA 20166

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1045.51

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 1 / 2 0 0 7

Transaction ID: SA15.15478

Amount of Each Receipt this Period  
1045.51

REFUND

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1045.51
<b>TOTAL</b> This Period (last page this line number only) .....	▶	1045.51

**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)  
FREEDOM'S DEFENSE FUND

A.	Full Name (Last, First, Middle Initial) ACCESS NATIONAL BANK	Transaction ID: SB21B.15474 Date of Disbursement
	Mailing Address 1800 ROBERT FULTON DR	<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2007"/>
	City RESTON State VA Zip Code 20191	Amount of Each Disbursement this Period
	Purpose of Disbursement BANK CHARGES	<input type="text" value="106.27"/>
	Candidate Name FREEDOM'S DEFENSE FUND	<input type="text" value="001"/> 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) ACCESS NATIONAL BANK	Transaction ID: SB21B.15475 Date of Disbursement
	Mailing Address 1800 ROBERT FULTON DR	<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2007"/>
	City RESTON State VA Zip Code 20191	Amount of Each Disbursement this Period
	Purpose of Disbursement BANK CHARGES	<input type="text" value="219.84"/>
	Candidate Name FREEDOM'S DEFENSE FUND	<input type="text" value="001"/> 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) ACCESS NATIONAL BANK	Transaction ID: SB21B.15476 Date of Disbursement
	Mailing Address 1800 ROBERT FULTON DR	<input type="text" value="05"/> / <input type="text" value="31"/> / <input type="text" value="2007"/>
	City RESTON State VA Zip Code 20191	Amount of Each Disbursement this Period
	Purpose of Disbursement BANK CHARGES	<input type="text" value="291.12"/>
	Candidate Name FREEDOM'S DEFENSE FUND	<input type="text" value="001"/> 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="617.23"/>
<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 49 / 77

<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)  
FREEDOM'S DEFENSE FUND

A.

Full Name (Last, First, Middle Initial)  
ACCESS NATIONAL BANK

Transaction ID: SB21B.15477  
Date of Disbursement

Mailing Address 1800 ROBERT FULTON DR

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

City RESTON State VA Zip Code 20191

Amount of Each Disbursement this Period

360.19
--------

Purpose of Disbursement  
BANK CHARGES

001
-----

Category/  
Type

Candidate Name  
FREEDOM'S DEFENSE FUND

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

B.

Full Name (Last, First, Middle Initial)  
KIMBERLY BELLISSIMO

Transaction ID: SB21B.15467  
Date of Disbursement

Mailing Address 1155 - 15TH STREET NW  
SUITE 410

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	0	7

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

595.00
--------

Purpose of Disbursement  
REIMB - EVANS & NOVAK POLITICAL FORUM

007
-----

Category/  
Type

Candidate Name  
FREEDOM'S DEFENSE FUND

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

C.

Full Name (Last, First, Middle Initial)  
BMW DIRECT INC

Transaction ID: SB21B.15379  
Date of Disbursement

Mailing Address 1155 - 15TH STREET, NW  
SUITE 410

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

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

236.45
--------

Purpose of Disbursement  
DIRECT MAIL FUNDRAISING FOR FDF

003
-----

Category/  
Type

Candidate Name  
FREEDOM'S DEFENSE FUND

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

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

1191.64
---------

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)

PAGE 50 / 77

<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)  
FREEDOM'S DEFENSE FUND

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) BMW DIRECT INC</p> <p>Mailing Address 1155 - 15TH STREET, NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DIRECT MAIL FUNDRAISING FOR FDF</p> <p>Candidate Name FREEDOM'S DEFENSE FUND</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.15380</p> <p>Date of Disbursement MM / DD / YYYY 03 / 14 / 2007</p> <p>Amount of Each Disbursement this Period 225.00</p> <p>Category/Type 003</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) BMW DIRECT INC</p> <p>Mailing Address 1155 - 15TH STREET, NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DIRECT MAIL FUNDRAISING FOR FDF</p> <p>Candidate Name FREEDOM'S DEFENSE FUND</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.15381</p> <p>Date of Disbursement MM / DD / YYYY 03 / 21 / 2007</p> <p>Amount of Each Disbursement this Period 497.95</p> <p>Category/Type 003</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) BMW DIRECT INC</p> <p>Mailing Address 1155 - 15TH STREET, NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DIRECT MAIL FUNDRAISING FOR FDF</p> <p>Candidate Name FREEDOM'S DEFENSE FUND</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.15382</p> <p>Date of Disbursement MM / DD / YYYY 04 / 19 / 2007</p> <p>Amount of Each Disbursement this Period 184.56</p> <p>Category/Type 003</p>

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

907.51

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

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

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

FOR LINE NUMBER: (check only one)

<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)  
FREEDOM'S DEFENSE FUND

A.	Full Name (Last, First, Middle Initial) BMW DIRECT INC	Transaction ID: SB21B.15383 Date of Disbursement
	Mailing Address 1155 - 15TH STREET, NW SUITE 410	<input type="text" value="04"/> / <input type="text" value="25"/> / <input type="text" value="2007"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL FUNDRAISING FOR FDF	<input type="text" value="1060.64"/>
	Candidate Name FREEDOM'S DEFENSE FUND	<input type="text" value="003"/> 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.	Full Name (Last, First, Middle Initial) BMW DIRECT INC	Transaction ID: SB21B.15384 Date of Disbursement
	Mailing Address 1155 - 15TH STREET, NW SUITE 410	<input type="text" value="06"/> / <input type="text" value="20"/> / <input type="text" value="2007"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL FUNDRAISING FOR FDF	<input type="text" value="1970.04"/>
	Candidate Name FREEDOM'S DEFENSE FUND	<input type="text" value="003"/> 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:	
C.	Full Name (Last, First, Middle Initial) BMW DIRECT INC	Transaction ID: SB21B.15385 Date of Disbursement
	Mailing Address 1155 - 15TH STREET, NW SUITE 410	<input type="text" value="06"/> / <input type="text" value="27"/> / <input type="text" value="2007"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL FUNDRAISING FOR FDF	<input type="text" value="836.65"/>
	Candidate Name FREEDOM'S DEFENSE FUND	<input type="text" value="003"/> 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="3867.33"/>
<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)  
FREEDOM'S DEFENSE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICES</p> <p>Mailing Address 1155 - 15TH STREET, NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DIRECT MAIL FUNDRAISING FOR FDF</p> <p>Candidate Name FREEDOM'S DEFENSE FUND</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.15420 <b>Date of Disbursement</b> 01 / 03 / 2007</p> <p>Amount of Each Disbursement this Period 2890.69</p> <p>003 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICES</p> <p>Mailing Address 1155 - 15TH STREET, NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DIRECT MAIL FUNDRAISING FOR FDF</p> <p>Candidate Name FREEDOM'S DEFENSE FUND</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.15421 <b>Date of Disbursement</b> 01 / 17 / 2007</p> <p>Amount of Each Disbursement this Period 10879.69</p> <p>003 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICES</p> <p>Mailing Address 1155 - 15TH STREET, NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DIRECT MAIL FUNDRAISING FOR FDF</p> <p>Candidate Name FREEDOM'S DEFENSE FUND</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.15422 <b>Date of Disbursement</b> 01 / 24 / 2007</p> <p>Amount of Each Disbursement this Period 2730.99</p> <p>003 Category/ Type</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	16501.37
<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)  
FREEDOM'S DEFENSE FUND

A.	Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICES	Transaction ID: SB21B.15423 Date of Disbursement
	Mailing Address 1155 - 15TH STREET, NW SUITE 410	<input type="text" value="02"/> <input type="text" value="07"/> / <input type="text" value="2007"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL FUNDRAISING FOR FDF	<input type="text" value="2985.38"/>
	Candidate Name FREEDOM'S DEFENSE FUND	<input type="text" value="003"/> 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.	Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICES	Transaction ID: SB21B.15425 Date of Disbursement
	Mailing Address 1155 - 15TH STREET, NW SUITE 410	<input type="text" value="03"/> <input type="text" value="21"/> / <input type="text" value="2007"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL FUNDRAISING FOR FDF	<input type="text" value="2600.00"/>
	Candidate Name FREEDOM'S DEFENSE FUND	<input type="text" value="003"/> 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:	

C.	Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICES	Transaction ID: SB21B.15426 Date of Disbursement
	Mailing Address 1155 - 15TH STREET, NW SUITE 410	<input type="text" value="04"/> <input type="text" value="11"/> / <input type="text" value="2007"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL FUNDRAISING FOR FDF	<input type="text" value="3303.84"/>
	Candidate Name FREEDOM'S DEFENSE FUND	<input type="text" value="003"/> 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="8889.22"/>
<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)  
FREEDOM'S DEFENSE FUND

A.	Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICES	Transaction ID: SB21B.15427 Date of Disbursement																			
	Mailing Address 1155 - 15TH STREET, NW SUITE 410	<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>4</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	9		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	9		2	0	0	7												
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DIRECT MAIL FUNDRAISING FOR FDF	<table border="1"><tr><td>9522.49</td></tr></table>	9522.49																		
9522.49																					
	Candidate Name FREEDOM'S DEFENSE FUND	<table border="1"><tr><td>003</td></tr></table> Category/Type	003																		
003																					
	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) CENTURY DATA MAILING SERVICES	Transaction ID: SB21B.15428 Date of Disbursement																			
	Mailing Address 1155 - 15TH STREET, NW SUITE 410	<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>4</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	5		2	0	0	7												
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DIRECT MAIL FUNDRAISING FOR FDF	<table border="1"><tr><td>9098.84</td></tr></table>	9098.84																		
9098.84																					
	Candidate Name FREEDOM'S DEFENSE FUND	<table border="1"><tr><td>003</td></tr></table> Category/Type	003																		
003																					
	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) CENTURY DATA MAILING SERVICES	Transaction ID: SB21B.15429 Date of Disbursement																			
	Mailing Address 1155 - 15TH STREET, NW SUITE 410	<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>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	2		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	2		2	0	0	7												
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DIRECT MAIL FUNDRAISING FOR FDF	<table border="1"><tr><td>3260.49</td></tr></table>	3260.49																		
3260.49																					
	Candidate Name FREEDOM'S DEFENSE FUND	<table border="1"><tr><td>003</td></tr></table> Category/Type	003																		
003																					
	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) .....	<table border="1"><tr><td>21881.82</td></tr></table>	21881.82
21881.82		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

**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)  
FREEDOM'S DEFENSE FUND

A.

Full Name (Last, First, Middle Initial)  
CENTURY DATA MAILING SERVICES

Transaction ID: SB21B.15430  
Date of Disbursement

Mailing Address 1155 - 15TH STREET, NW  
SUITE 410

/   /

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

Purpose of Disbursement  
DIRECT MAIL FUNDRAISING FOR FDF

Category/  
Type

Candidate Name  
FREEDOM'S DEFENSE FUND

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

B.

Full Name (Last, First, Middle Initial)  
CENTURY DATA MAILING SERVICES

Transaction ID: SB21B.15431  
Date of Disbursement

Mailing Address 1155 - 15TH STREET, NW  
SUITE 410

/   /

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

Purpose of Disbursement  
DIRECT MAIL FUNDRAISING FOR FDF

Category/  
Type

Candidate Name  
FREEDOM'S DEFENSE FUND

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

C.

Full Name (Last, First, Middle Initial)  
CENTURY DATA MAILING SERVICES

Transaction ID: SB21B.15432  
Date of Disbursement

Mailing Address 1155 - 15TH STREET, NW  
SUITE 410

/   /

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

Purpose of Disbursement  
DIRECT MAIL FUNDRAISING FOR FDF

Category/  
Type

Candidate Name  
FREEDOM'S DEFENSE FUND

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)

<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)  
FREEDOM'S DEFENSE FUND

A.	Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICES	Transaction ID: SB21B.15433 Date of Disbursement
	Mailing Address 1155 - 15TH STREET, NW SUITE 410	<input type="text" value="06"/> / <input type="text" value="20"/> / <input type="text" value="2007"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL FUNDRAISING FOR FDF	<input type="text" value="2190.48"/>
	Candidate Name FREEDOM'S DEFENSE FUND	<input type="text" value="003"/> 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.	Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICES	Transaction ID: SB21B.15434 Date of Disbursement
	Mailing Address 1155 - 15TH STREET, NW SUITE 410	<input type="text" value="06"/> / <input type="text" value="27"/> / <input type="text" value="2007"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL FUNDRAISING FOR FDF	<input type="text" value="12964.10"/>
	Candidate Name FREEDOM'S DEFENSE FUND	<input type="text" value="003"/> 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:	

C.	Full Name (Last, First, Middle Initial) COLORTREE	Transaction ID: SB21B.15386 Date of Disbursement
	Mailing Address PO BOX 18160	<input type="text" value="06"/> / <input type="text" value="20"/> / <input type="text" value="2007"/>
	City MERRIFIELD State VA Zip Code 22118	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL FUNDRAISING FOR FDF	<input type="text" value="3843.00"/>
	Candidate Name FREEDOM'S DEFENSE FUND	<input type="text" value="003"/> 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="37997.58"/>
<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)  
FREEDOM'S DEFENSE FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) COLORTREE</p> <p>Mailing Address PO BOX 18160</p> <p>City MERRIFIELD State VA Zip Code 22118</p> <p>Purpose of Disbursement DIRECT MAIL FUNDRAISING FOR FDF</p> <p>Candidate Name FREEDOM'S DEFENSE FUND</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB21B.15387</p> <p><b>Date of Disbursement</b> 06 / 27 / 2007</p> <p><b>Amount of Each Disbursement this Period</b> 4071.09</p> <p>003 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) CONSOLIDATED MAILING SERVICES</p> <p>Mailing Address 504 SHAW ROAD</p> <p>City STERLING State VA Zip Code 20166</p> <p>Purpose of Disbursement DIRECT MAIL FUNDRAISING FOR FDF</p> <p>Candidate Name FREEDOM'S DEFENSE FUND</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB21B.15389</p> <p><b>Date of Disbursement</b> 03 / 14 / 2007</p> <p><b>Amount of Each Disbursement this Period</b> 2821.95</p> <p>003 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) CONSOLIDATED MAILING SERVICES</p> <p>Mailing Address 504 SHAW ROAD</p> <p>City STERLING State VA Zip Code 20166</p> <p>Purpose of Disbursement DIRECT MAIL FUNDRAISING FOR FDF</p> <p>Candidate Name FREEDOM'S DEFENSE FUND</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB21B.15390</p> <p><b>Date of Disbursement</b> 04 / 19 / 2007</p> <p><b>Amount of Each Disbursement this Period</b> 3621.95</p> <p>003 Category/ Type</p>

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

10514.99

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)  
FREEDOM'S DEFENSE FUND

**A.** Full Name (Last, First, Middle Initial)  
CONSOLIDATED MAILING SERVICES

Mailing Address 504 SHAW ROAD

City STERLING State VA Zip Code 20166

Purpose of Disbursement  
DIRECT MAIL FUNDRAISING FOR FDF

Candidate Name  
FREEDOM'S DEFENSE FUND

003  
Category/  
Type

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

Transaction ID: SB21B.15391  
Date of Disbursement

05 / 09 / 2007

Amount of Each Disbursement this Period

7141.22

**B.** Full Name (Last, First, Middle Initial)  
CONSOLIDATED MAILING SERVICES

Mailing Address 504 SHAW ROAD

City STERLING State VA Zip Code 20166

Purpose of Disbursement  
DIRECT MAIL FUNDRAISING FOR FDF

Candidate Name  
FREEDOM'S DEFENSE FUND

003  
Category/  
Type

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

Transaction ID: SB21B.15392  
Date of Disbursement

05 / 16 / 2007

Amount of Each Disbursement this Period

5500.00

**C.** Full Name (Last, First, Middle Initial)  
CONSOLIDATED MAILING SERVICES

Mailing Address 504 SHAW ROAD

City STERLING State VA Zip Code 20166

Purpose of Disbursement  
DIRECT MAIL FUNDRAISING FOR FDF

Candidate Name  
FREEDOM'S DEFENSE FUND

003  
Category/  
Type

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

Transaction ID: SB21B.15393  
Date of Disbursement

06 / 06 / 2007

Amount of Each Disbursement this Period

1048.70

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

13689.92

**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 59 / 77

<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)  
FREEDOM'S DEFENSE FUND

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) <b>CONSOLIDATED MAILING SERVICES</b></p> <p>Mailing Address <b>504 SHAW ROAD</b></p> <p>City <b>STERLING</b> State <b>VA</b> Zip Code <b>20166</b></p> <p>Purpose of Disbursement <b>DIRECT MAIL FUNDRAISING FOR FDF</b></p> <p>Candidate Name <b>FREEDOM'S DEFENSE FUND</b></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.15394 <b>Date of Disbursement</b> 06 / 20 / 2007</p> <p><b>Amount of Each Disbursement this Period</b> 7682.60</p> <p><b>Category/Type</b> 003</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) <b>CONSOLIDATED MAILING SERVICES</b></p> <p>Mailing Address <b>504 SHAW ROAD</b></p> <p>City <b>STERLING</b> State <b>VA</b> Zip Code <b>20166</b></p> <p>Purpose of Disbursement <b>DIRECT MAIL FUNDRAISING FOR FDF</b></p> <p>Candidate Name <b>FREEDOM'S DEFENSE FUND</b></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.15395 <b>Date of Disbursement</b> 06 / 27 / 2007</p> <p><b>Amount of Each Disbursement this Period</b> 3129.83</p> <p><b>Category/Type</b> 003</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) <b>INTEGRAM</b></p> <p>Mailing Address <b>8421 HILLTOP ROAD</b></p> <p>City <b>FAIRFAX</b> State <b>VA</b> Zip Code <b>22031</b></p> <p>Purpose of Disbursement <b>DELUXE BUSINESS SYSTEMS</b></p> <p>Candidate Name <b>FREEDOM'S DEFENSE FUND</b></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.15398 <b>Date of Disbursement</b> 01 / 17 / 2007</p> <p><b>Amount of Each Disbursement this Period</b> 2953.86</p> <p><b>Category/Type</b> 003</p>

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

**13766.29**

**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 60 / 77

<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)  
FREEDOM'S DEFENSE FUND

A.	Full Name (Last, First, Middle Initial) INTEGRAM	Transaction ID: SB21B.15399 Date of Disbursement
	Mailing Address 8421 HILLTOP ROAD	<input type="text" value="04"/> / <input type="text" value="19"/> / <input type="text" value="2007"/>
	City FAIRFAX State VA Zip Code 22031	Amount of Each Disbursement this Period
	Purpose of Disbursement DELUXE BUSINESS SYSTEMS	<input type="text" value="1573.78"/>
	Candidate Name FREEDOM'S DEFENSE FUND	<input type="text" value="003"/> 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) LEGACY LIST MANAGEMENT INC	Transaction ID: SB21B.15400 Date of Disbursement
	Mailing Address 1155 - 15TH STREET, NW SUITE 410	<input type="text" value="01"/> / <input type="text" value="03"/> / <input type="text" value="2007"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement LIST RENTALS	<input type="text" value="690.00"/>
	Candidate Name FREEDOM'S DEFENSE FUND	<input type="text" value="003"/> 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) LEGACY LIST MANAGEMENT INC	Transaction ID: SB21B.15409 Date of Disbursement
	Mailing Address 1155 - 15TH STREET, NW SUITE 410	<input type="text" value="01"/> / <input type="text" value="03"/> / <input type="text" value="2007"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement LIST RENTALS	<input type="text" value="607.66"/>
	Candidate Name FREEDOM'S DEFENSE FUND	<input type="text" value="003"/> 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="2871.44"/>
<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)  
FREEDOM'S DEFENSE FUND

A.	Full Name (Last, First, Middle Initial) LEGACY LIST MANAGEMENT INC	Transaction ID: SB21B.15401 Date of Disbursement
	Mailing Address 1155 - 15TH STREET, NW SUITE 410	<input type="text" value="01"/> / <input type="text" value="24"/> / <input type="text" value="2007"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement LIST RENTALS	<input type="text" value="570.00"/>
	Candidate Name FREEDOM'S DEFENSE FUND	<input type="text" value="003"/> 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) LEGACY LIST MANAGEMENT INC	Transaction ID: SB21B.15402 Date of Disbursement
	Mailing Address 1155 - 15TH STREET, NW SUITE 410	<input type="text" value="02"/> / <input type="text" value="07"/> / <input type="text" value="2007"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement LIST RENTALS	<input type="text" value="4400.72"/>
	Candidate Name FREEDOM'S DEFENSE FUND	<input type="text" value="003"/> 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) LEGACY LIST MANAGEMENT INC	Transaction ID: SB21B.15403 Date of Disbursement
	Mailing Address 1155 - 15TH STREET, NW SUITE 410	<input type="text" value="02"/> / <input type="text" value="14"/> / <input type="text" value="2007"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement LIST RENTALS	<input type="text" value="1395.00"/>
	Candidate Name FREEDOM'S DEFENSE FUND	<input type="text" value="003"/> 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) .....

**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)  
FREEDOM'S DEFENSE FUND

A.	Full Name (Last, First, Middle Initial) LEGACY LIST MANAGEMENT INC	Transaction ID: SB21B.15410 Date of Disbursement
	Mailing Address 1155 - 15TH STREET, NW SUITE 410	<input type="text" value="02"/> / <input type="text" value="14"/> / <input type="text" value="2007"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement LIST RENTALS	<input type="text" value="277.48"/>
	Candidate Name FREEDOM'S DEFENSE FUND	<input type="text" value="003"/> 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) LEGACY LIST MANAGEMENT INC	Transaction ID: SB21B.15404 Date of Disbursement
	Mailing Address 1155 - 15TH STREET, NW SUITE 410	<input type="text" value="02"/> / <input type="text" value="21"/> / <input type="text" value="2007"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement LIST RENTALS	<input type="text" value="1370.00"/>
	Candidate Name FREEDOM'S DEFENSE FUND	<input type="text" value="003"/> 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) LEGACY LIST MANAGEMENT INC	Transaction ID: SB21B.15411 Date of Disbursement
	Mailing Address 1155 - 15TH STREET, NW SUITE 410	<input type="text" value="02"/> / <input type="text" value="21"/> / <input type="text" value="2007"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement LIST RENTALS	<input type="text" value="330.14"/>
	Candidate Name FREEDOM'S DEFENSE FUND	<input type="text" value="003"/> 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) ..... ▶

**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)  
FREEDOM'S DEFENSE FUND

A.	Full Name (Last, First, Middle Initial) LEGACY LIST MANAGEMENT INC	Transaction ID: SB21B.15405 Date of Disbursement																			
	Mailing Address 1155 - 15TH STREET, NW SUITE 410	<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>2</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	8		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	8		2	0	0	7												
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period																			
	Purpose of Disbursement LIST RENTALS	<table border="1"><tr><td>2050.00</td></tr></table>	2050.00																		
2050.00																					
	Candidate Name FREEDOM'S DEFENSE FUND	<table border="1"><tr><td>003</td></tr></table> Category/Type	003																		
003																					
	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) LEGACY LIST MANAGEMENT INC	Transaction ID: SB21B.15406 Date of Disbursement																			
	Mailing Address 1155 - 15TH STREET, NW SUITE 410	<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>3</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	4		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	4		2	0	0	7												
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period																			
	Purpose of Disbursement LIST RENTALS	<table border="1"><tr><td>3415.00</td></tr></table>	3415.00																		
3415.00																					
	Candidate Name FREEDOM'S DEFENSE FUND	<table border="1"><tr><td>003</td></tr></table> Category/Type	003																		
003																					
	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) LEGACY LIST MANAGEMENT INC	Transaction ID: SB21B.15412 Date of Disbursement																			
	Mailing Address 1155 - 15TH STREET, NW SUITE 410	<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>3</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	4		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	4		2	0	0	7												
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period																			
	Purpose of Disbursement LIST RENTALS	<table border="1"><tr><td>271.44</td></tr></table>	271.44																		
271.44																					
	Candidate Name FREEDOM'S DEFENSE FUND	<table border="1"><tr><td>003</td></tr></table> Category/Type	003																		
003																					
	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) .....	<table border="1"><tr><td>5736.44</td></tr></table>	5736.44
5736.44		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

**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)  
FREEDOM'S DEFENSE FUND

A.	Full Name (Last, First, Middle Initial) LEGACY LIST MANAGEMENT INC	Transaction ID: SB21B.15413 Date of Disbursement																			
	Mailing Address 1155 - 15TH STREET, NW SUITE 410	<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>4</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	4		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	4		2	0	0	7												
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period																			
	Purpose of Disbursement LIST RENTALS	<table border="1"><tr><td>650.00</td></tr></table>	650.00																		
650.00																					
	Candidate Name FREEDOM'S DEFENSE FUND	003 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) LEGACY LIST MANAGEMENT INC	Transaction ID: SB21B.15407 Date of Disbursement																			
	Mailing Address 1155 - 15TH STREET, NW SUITE 410	<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>4</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	1		2	0	0	7												
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period																			
	Purpose of Disbursement LIST RENTALS	<table border="1"><tr><td>675.00</td></tr></table>	675.00																		
675.00																					
	Candidate Name FREEDOM'S DEFENSE FUND	003 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) LEGACY LIST MANAGEMENT INC	Transaction ID: SB21B.15408 Date of Disbursement																			
	Mailing Address 1155 - 15TH STREET, NW SUITE 410	<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>4</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	9		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	9		2	0	0	7												
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period																			
	Purpose of Disbursement LIST RENTALS	<table border="1"><tr><td>2705.00</td></tr></table>	2705.00																		
2705.00																					
	Candidate Name FREEDOM'S DEFENSE FUND	003 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) .....	<table border="1"><tr><td>4030.00</td></tr></table>	4030.00
4030.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	



**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)  
FREEDOM'S DEFENSE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) LEGACY LIST MANAGEMENT INC <hr/> Mailing Address 1155 - 15TH STREET, NW SUITE 410 <hr/> City WASHINGTON State DC Zip Code 20005 <hr/> Purpose of Disbursement LIST RENTALS Candidate Name FREEDOM'S DEFENSE FUND 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.15414 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7
	Amount of Each Disbursement this Period 2960.88 Category/Type: 003
<b>B.</b> Full Name (Last, First, Middle Initial) LEGACY LIST MANAGEMENT INC <hr/> Mailing Address 1155 - 15TH STREET, NW SUITE 410 <hr/> City WASHINGTON State DC Zip Code 20005 <hr/> Purpose of Disbursement LIST RENTALS Candidate Name FREEDOM'S DEFENSE FUND 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.15415 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
	Amount of Each Disbursement this Period 1555.71 Category/Type: 003
<b>C.</b> Full Name (Last, First, Middle Initial) LEGACY LIST MANAGEMENT INC <hr/> Mailing Address 1155 - 15TH STREET, NW SUITE 410 <hr/> City WASHINGTON State DC Zip Code 20005 <hr/> Purpose of Disbursement LIST RENTALS Candidate Name FREEDOM'S DEFENSE FUND 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.15416 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 7
	Amount of Each Disbursement this Period 2087.15 Category/Type: 003

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

6603.74

**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)  
FREEDOM'S DEFENSE FUND

A.	Full Name (Last, First, Middle Initial) LEGACY LIST MANAGEMENT INC	Transaction ID: SB21B.15417 Date of Disbursement																			
	Mailing Address 1155 - 15TH STREET, NW SUITE 410	<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>6</td><td>/</td><td>0</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6	/	0	6	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6	/	0	6	/	2	0	0	7												
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period																			
	Purpose of Disbursement LIST RENTALS	<table border="1"><tr><td>967.72</td></tr></table>	967.72																		
967.72																					
	Candidate Name FREEDOM'S DEFENSE FUND	003 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) MDI IMAGING & MAIL	Transaction ID: SB21B.15418 Date of Disbursement																			
	Mailing Address 21721-A FILGREE COURT	<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>1</td><td>/</td><td>0</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	0	3	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1	/	0	3	/	2	0	0	7												
	City ASHBURN State VA Zip Code 20147	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DIRECT MAIL FUNDRAISING FOR FDF	<table border="1"><tr><td>6233.21</td></tr></table>	6233.21																		
6233.21																					
	Candidate Name FREEDOM'S DEFENSE FUND	003 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) MDI IMAGING & MAIL	Transaction ID: SB21B.15419 Date of Disbursement																			
	Mailing Address 21721-A FILGREE COURT	<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>1</td><td>/</td><td>1</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	1	7	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1	/	1	7	/	2	0	0	7												
	City ASHBURN State VA Zip Code 20147	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DELUXE BUSINESS SYSTEMS	<table border="1"><tr><td>4251.24</td></tr></table>	4251.24																		
4251.24																					
	Candidate Name FREEDOM'S DEFENSE FUND	003 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) .....	<table border="1"><tr><td>11452.17</td></tr></table>	11452.17
11452.17		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td> </td></tr></table>	

**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)  
FREEDOM'S DEFENSE FUND

A.	Full Name (Last, First, Middle Initial) US POSTMASTER	Transaction ID: SB21B.15435 Date of Disbursement
	Mailing Address 10660 PAGE AVE	<input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2007"/>
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period
	Purpose of Disbursement PO BOX RENEWAL	<input type="text" value="485.00"/>
	Candidate Name FREEDOM'S DEFENSE FUND	<input type="text" value="001"/> 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.15436 Date of Disbursement
	Mailing Address 4128 PEPSI PL	<input type="text" value="01"/> / <input type="text" value="03"/> / <input type="text" value="2007"/>
	City CHANTILLY State VA Zip Code 20151	Amount of Each Disbursement this Period
	Purpose of Disbursement MONEY PROCESSING & ESCROW	<input type="text" value="1556.81"/>
	Candidate Name FREEDOM'S DEFENSE FUND	<input type="text" value="001"/> 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.15437 Date of Disbursement
	Mailing Address 4128 PEPSI PL	<input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2007"/>
	City CHANTILLY State VA Zip Code 20151	Amount of Each Disbursement this Period
	Purpose of Disbursement MONEY PROCESSING & ESCROW	<input type="text" value="679.83"/>
	Candidate Name FREEDOM'S DEFENSE FUND	<input type="text" value="001"/> 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="2721.64"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

A. Form/Schedule : **SB21B**  
Transaction ID : **SB21B.15435**

The committee's Disclosure Report disclosed limited payments for administrative expenses. Freedom's Defense Fund has no paid staff and an office is not maintained by the committee; this is a volunteer operation, with the purpose of giving all net proceeds to candidates. All expenditures related to the committee have been fully disclosed.

**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)  
FREEDOM'S DEFENSE FUND

A.	Full Name (Last, First, Middle Initial) WASHINGTON INTELLIGENCE BUREAU	Transaction ID: SB21B.15438 Date of Disbursement
	Mailing Address 4128 PEPSI PL	<input type="text" value="02"/> <input type="text" value="07"/> / <input type="text" value="2007"/>
	City CHANTILLY State VA Zip Code 20151	Amount of Each Disbursement this Period
	Purpose of Disbursement MONEY PROCESSING & ESCROW	<input type="text" value="968.97"/>
	Candidate Name FREEDOM'S DEFENSE FUND	<input type="text" value="001"/> 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.15439 Date of Disbursement
	Mailing Address 4128 PEPSI PL	<input type="text" value="04"/> <input type="text" value="04"/> / <input type="text" value="2007"/>
	City CHANTILLY State VA Zip Code 20151	Amount of Each Disbursement this Period
	Purpose of Disbursement MONEY PROCESSING & ESCROW	<input type="text" value="1263.13"/>
	Candidate Name FREEDOM'S DEFENSE FUND	<input type="text" value="001"/> 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.15440 Date of Disbursement
	Mailing Address 4128 PEPSI PL	<input type="text" value="04"/> <input type="text" value="19"/> / <input type="text" value="2007"/>
	City CHANTILLY State VA Zip Code 20151	Amount of Each Disbursement this Period
	Purpose of Disbursement MONEY PROCESSING & ESCROW	<input type="text" value="713.14"/>
	Candidate Name FREEDOM'S DEFENSE FUND	<input type="text" value="001"/> 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="2945.24"/>
<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)  
FREEDOM'S DEFENSE FUND

**A.** Full Name (Last, First, Middle Initial)  
WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PL

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement  
MONEY PROCESSING & ESCROW

Candidate Name  
FREEDOM'S DEFENSE FUND

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Transaction ID: SB21B.15441  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	5		2	0	0	7

Amount of Each Disbursement this Period

680.50
--------

**B.** Full Name (Last, First, Middle Initial)  
WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PL

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement  
MONEY PROCESSING & ESCROW

Candidate Name  
FREEDOM'S DEFENSE FUND

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Transaction ID: SB21B.15442  
Date of Disbursement

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

Amount of Each Disbursement this Period

1607.51
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SUBTOTAL of Disbursements This Page (optional) .....

2288.01
---------

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

184850.96
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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 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)  
FREEDOM'S DEFENSE FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>BOB SCHAFFER FOR US SENATE</b>  Mailing Address <b>PO BOX 102135</b>  City <b>DENVER</b> State <b>CO</b> Zip Code <b>80250</b>  Purpose of Disbursement <b>POLITICAL CONTRIBUTION</b>  Candidate Name <b>BOB SCHAFFER FOR US SENATE</b>  Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: <b>CO</b> District: <b>00</b>	<b>Transaction ID: SB23.15535</b> Date of Disbursement M M / D D / Y Y Y Y <b>0 5 / 2 2 / 2 0 0 7</b>  Amount of Each Disbursement this Period 1000.00
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>CMTE TO RE-ELECT DANA ROHRABACHER</b>  Mailing Address <b>PO BOX 823</b>  City <b>HUNTINGTON BEACH</b> State <b>CA</b> Zip Code <b>92648</b>  Purpose of Disbursement <b>POLITICAL CONTRIBUTION</b>  Candidate Name <b>DANA ROHRABACHER</b>  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: <b>CA</b> District: <b>46</b>	<b>Transaction ID: SB23.15445</b> Date of Disbursement M M / D D / Y Y Y Y <b>0 3 / 0 7 / 2 0 0 7</b>  Amount of Each Disbursement this Period 600.00
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>DAVID DAVIS VICTORY FUND</b>  Mailing Address <b>PO Box 781</b>  City <b>Johnson City</b> State <b>TN</b> Zip Code <b>37605</b>  Purpose of Disbursement <b>POLITICAL CONTRIBUTION</b>  Candidate Name <b>DAVID DAVIS</b>  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: <b>TN</b> District: <b>01</b>	<b>Transaction ID: SB23.15453</b> Date of Disbursement M M / D D / Y Y Y Y <b>0 5 / 2 2 / 2 0 0 7</b>  Amount of Each Disbursement this Period 1000.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2600.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
FREEDOM'S DEFENSE FUND

A.

Full Name (Last, First, Middle Initial)  
DAVID DAVIS VICTORY FUND

Transaction ID: SB23.154699

Date of Disbursement

Mailing Address PO Box 781

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

City Johnson City State TN Zip Code 37605

Amount of Each Disbursement this Period

-1000.00
----------

Purpose of Disbursement  
CHECK VOIDED

011  
Category/  
Type

Candidate Name  
DAVID DAVIS

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: TN District: 01

B.

Full Name (Last, First, Middle Initial)  
GEOFF DAVIS FOR CONGRESS

Transaction ID: SB23.15449

Date of Disbursement

Mailing Address 3161 Dixie Highway Suite F

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

City Erlanger State KY Zip Code 41018

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
POLITICAL CONTRIBUTION

011  
Category/  
Type

Candidate Name  
GEOFFREY C DAVIS

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: KY District: 04

C.

Full Name (Last, First, Middle Initial)  
GILMORE FOR PRESIDENT

Transaction ID: SB23.15462

Date of Disbursement

Mailing Address PO BOX 19128

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

City ALEXANDRIA State VA Zip Code 22320

Amount of Each Disbursement this Period

5000.00
---------

Purpose of Disbursement  
IN-KIND CONTRIBUTION

011  
Category/  
Type

Candidate Name  
JAMES S III GILMORE

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District: 00

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

5000.00
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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 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)  
FREEDOM'S DEFENSE FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>HAYES FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.15451
	Mailing Address: Post Office Box 2000	Date of Disbursement: 03 / 27 / 2007
	City: Concord State: NC Zip Code: 28026	Amount of Each Disbursement this Period: 1000.00
	Purpose of Disbursement: POLITICAL CONTRIBUTION Candidate Name: ROBERT C. (ROBIN) HAYES Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 08 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type: 011
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>JIM RYUN FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.15447
	Mailing Address: PO BOX 826	Date of Disbursement: 03 / 26 / 2007
	City: TOPEKA State: KS Zip Code: 66601	Amount of Each Disbursement this Period: 2500.00
	Purpose of Disbursement: POLITICAL CONTRIBUTION Candidate Name: JAMES R RYUN Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 02 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type: 011
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>THE MADISON HOTEL</b>	<b>Transaction ID:</b> SB23.15463
	Mailing Address: 1150 - 15TH STREET	Date of Disbursement: 05 / 29 / 2007
	City: WASHINGTON State: DC Zip Code: 20005	Amount of Each Disbursement this Period: 5000.00
	Purpose of Disbursement: IN-KIND CONTRIBUTION - RECEPTION Candidate Name: GILMORE FOR PRESIDENT Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type: 011 <b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>11100.00</b>

# 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 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)  
FREEDOM'S DEFENSE FUND

**A.** Full Name (Last, First, Middle Initial)  
FRIENDS OF JEFF FREDERICK

Mailing Address PO BOX 58

City WOODBRIDGE State VA Zip Code 22194

Purpose of Disbursement  
POLITICAL CONTRIBUTION (12/22)

Candidate Name

012  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB29.15469  
Date of Disbursement

01 / 05 / 2007

Amount of Each Disbursement this Period

250.00

**B.** Full Name (Last, First, Middle Initial)  
FRIENDS OF JEFF FREDERICK

Mailing Address PO BOX 58

City WOODBRIDGE State VA Zip Code 22194

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name

012  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB29.15471  
Date of Disbursement

06 / 08 / 2007

Amount of Each Disbursement this Period

500.00

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

750.00

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

750.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> BMW DIRECT INC			Nature of Debt (Purpose): DIRECT MAIL FUNDRAISING FOR FDF
Mailing Address 1155 - 15TH STREET, NW SUITE 410			
City WASHINGTON	State DC	ZIP Code 20005	

Outstanding Balance Beginning This Period 25445.28		<b>Transaction ID:</b> SD10.15373	
Amount Incurred This Period 0.00	Payment This Period 5011.29	Outstanding Balance at Close of This Period 20433.99	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> CENTURY DATA MAILING SERVICES			Nature of Debt (Purpose): DIRECT MAIL FUNDRAISING FOR FDF
Mailing Address 1155 - 15TH STREET, NW SUITE 410			
City WASHINGTON	State DC	ZIP Code 20005	

Outstanding Balance Beginning This Period 19486.75		<b>Transaction ID:</b> SD10.15377	
Amount Incurred This Period 95568.56	Payment This Period 89461.03	Outstanding Balance at Close of This Period 25594.28	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> CONSOLIDATED MAILING SERVICES			Nature of Debt (Purpose): DIRECT MAIL FUNDRAISING FOR FDF
Mailing Address 504 SHAW ROAD			
City STERLING	State VA	ZIP Code 20166	

Outstanding Balance Beginning This Period 0.00		<b>Transaction ID:</b> SD10.15388	
Amount Incurred This Period 42717.04	Payment This Period 30946.25	Outstanding Balance at Close of This Period 11770.79	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	▶	57799.06
<b>2) TOTALS</b> This Period (last page this line number only).....	▶	
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor INTEGRAM			Nature of Debt (Purpose): DIRECT MAIL FUNDRAISING FOR FDF
Mailing Address 8421 HILLTOP ROAD			
City FAIRFAX	State VA	ZIP Code 22031	

Outstanding Balance Beginning This Period 2953.86		Transaction ID: SD10.15374	
Amount Incurred This Period 1573.78	Payment This Period 4527.64	Outstanding Balance at Close of This Period 0.00	

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor LEGACY LIST MANAGEMENT INC			Nature of Debt (Purpose): LIST RENTALS
Mailing Address 1155 - 15TH STREET, NW SUITE 410			
City WASHINGTON	State DC	ZIP Code 20005	

Outstanding Balance Beginning This Period 26303.90		Transaction ID: SD10.15375	
Amount Incurred This Period 12702.33	Payment This Period 26978.90	Outstanding Balance at Close of This Period 12027.33	

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor MDI IMAGING & MAIL			Nature of Debt (Purpose): DIRECT MAIL FUNDRAISING FOR FDF
Mailing Address 21721-A FILGREE COURT			
City ASHBURN	State VA	ZIP Code 20147	

Outstanding Balance Beginning This Period 9658.95		Transaction ID: SD10.15376	
Amount Incurred This Period 825.50	Payment This Period 10484.45	Outstanding Balance at Close of This Period 0.00	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	▶	12027.33
<b>2) TOTALS</b> This Period (last page this line number only).....	▶	
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> RST MARKET ASSOCIATES			Nature of Debt (Purpose): DIRECT MAIL FUNDRAISING FOR FDF
Mailing Address 1272 CORPORATE PARK RD			
City FOREST	State VA	ZIP Code 24551	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: SD10.15483	
Amount Incurred This Period <input type="text" value="3481.36"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3481.36"/>	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> MS JEAN C TALMAGE 334			Nature of Debt (Purpose): REFUND OF EXCESSIVE CONTRIBUTION
Mailing Address 1138 DEVONSHIRE WAY			
City PALM BEACH GARDENSFL	State 	ZIP Code 33418	

Outstanding Balance Beginning This Period <input type="text" value="1000.00"/>		Transaction ID: SD10.15537	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1000.00"/>	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> WASHINGTON INTELLIGENCE BUREAU			Nature of Debt (Purpose): MONEY PROCESSING & ESCROW
Mailing Address 4128 PEPSI PL			
City CHANTILLY	State VA	ZIP Code 20151	

Outstanding Balance Beginning This Period <input type="text" value="2236.64"/>		Transaction ID: SD10.15378	
Amount Incurred This Period <input type="text" value="6247.27"/>	Payment This Period <input type="text" value="7469.89"/>	Outstanding Balance at Close of This Period <input type="text" value="1014.02"/>	

1) <b>SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="5495.38"/>
2) <b>TOTALS</b> This Period (last page this line number only).....	<input type="text" value="75321.77"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text" value="75321.77"/>