



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**The Freedom Project**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>		<input type="text" value="890661.12"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="890661.12"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="57760.45"/>	<input type="text" value="57760.45"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="948421.57"/>	<input type="text" value="948421.57"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="115519.68"/>	<input type="text" value="115519.68"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="832901.89"/>	<input type="text" value="832901.89"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

## DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**The Freedom Project**

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2015 To: M M / D D / Y Y Y Y 01 / 31 / 2015

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).....	0.00	0.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)..... ▶	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	20000.00	20000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	20000.00	20000.00
12. Transfers From Affiliated/Other Party Committees.....	37760.45	37760.45
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	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 Transfers (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))..... ▶	57760.45	57760.45
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	57760.45	57760.45

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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 .....	57519.68	57519.68
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	57519.68	57519.68
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	58000.00	58000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated 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)) ..	115519.68	115519.68
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	115519.68	115519.68

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	20000.00	20000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	20000.00	20000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	57519.68	57519.68
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	57519.68	57519.68

**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 6 OF 27
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**The Freedom Project**

Full Name (Last, First, Middle Initial) <b>A. DEPOSITORY TRUST &amp; CLEARING CORPORATION, PAC</b>		Date of Receipt MM / DD / YYYY 01 / 28 / 2015 <b>Transaction ID : SA11.623812</b>
Mailing Address 228 S. WASHINGTON STREET SUITE 115		Amount of Each Receipt this Period 5000.00
City ALEXANDRIA	State VA	Zip Code 22314-5404
FEC ID number of contributing federal political committee. <b>C</b> C00497917	CONTRIBUTION	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B. LOCKHEED MARTIN EMPLOYEES' POLITICAL ACTION COMMITTEE</b>		Date of Receipt MM / DD / YYYY 01 / 28 / 2015 <b>Transaction ID : SA11.623811</b>
Mailing Address 2121 CRYSTAL DRIVE SUITE 100		Amount of Each Receipt this Period 5000.00
City ARLINGTON	State VA	Zip Code 22202-3706
FEC ID number of contributing federal political committee. <b>C</b> C00303024	CONTRIBUTION	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C. NATIONAL ASSOCIATION OF BROADCASTERS PAC</b>		Date of Receipt MM / DD / YYYY 01 / 28 / 2015 <b>Transaction ID : SA11.623810</b>
Mailing Address 1771 N. STREET NW		Amount of Each Receipt this Period 5000.00
City WASHINGTON	State DC	Zip Code 20036-2800
FEC ID number of contributing federal political committee. <b>C</b> C00009985	CONTRIBUTION	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15000.00
<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 7 OF 27  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**The Freedom Project**

**A. UPSPAC-UNITED PARCEL SERVICE PAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address 55 GLENLAKE PARKWAY NE  
City ATLANTA State GA Zip Code 30328-3474  
FEC ID number of contributing federal political committee. **C** C00064766  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 29 / 2015  
**Transaction ID : SA11.624089**  
Amount of Each Receipt this Period  
5000.00  
**CONTRIBUTION**

**B.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
Amount of Each Receipt this Period

**C.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	20000.00

**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 OF 27
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**The Freedom Project**

**A. BOEHNER FOR SPEAKER**

Full Name (Last, First, Middle Initial)  
Mailing Address 320 FIRST STREET, SE

City WASHINGTON State DC Zip Code 20003-1838

FEC ID number of contributing federal political committee. **C** C00478354

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
37760.45

Date of Receipt  
01 / 31 / 2015  
**Transaction ID : SA12.624532**

Amount of Each Receipt this Period  
37760.45

DISTRIBUTION OF NET JFC PROCEEDS

SEE MEMO ENTRIES

**B. MICHELLE M. HOROWITZ**

Full Name (Last, First, Middle Initial)  
Mailing Address 27241 LA PAZ RD. STE. B

City LAGUNA NIGUEL State CA Zip Code 92677-3636

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

Name of Employer Occupation  
SELF EMPLOYED INVESTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
09 / 26 / 2014  
**Transaction ID : SA12.623585.4.0115**

Amount of Each Receipt this Period  
600.00

TRANSFER

**[MEMO ITEM]**  
TRANSFER FROM BOEHNER FOR SPEAKER

**C. AECOM US FEDERAL PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 2450 CRYSTAL DRIVE SUITE 500

City ARLINGTON State VA Zip Code 22202-3892

FEC ID number of contributing federal political committee. **C** C00374447

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
01 / 28 / 2015  
**Transaction ID : SA12.623832.4.0115**

Amount of Each Receipt this Period  
2500.00

TRANSFER

**[MEMO ITEM]**  
TRANSFER FROM BOEHNER FOR SPEAKER

<b>SUBTOTAL</b> of Receipts This Page (optional).....	37760.45
<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 OF 27
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**The Freedom Project**

Full Name (Last, First, Middle Initial)  
**A. AMERICAN HEALTH CARE ASSOCIATION PAC (AHCA PAC)**

Mailing Address 1201 L STREET NW

City WASHINGTON State DC Zip Code 20005-4024

FEC ID number of contributing federal political committee. **C** C00006080

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 28 / 2015  
**Transaction ID : SA12.623827.4.0115**

Amount of Each Receipt this Period  
 2500.00

TRANSFER

**[MEMO ITEM]**  
TRANSFER FROM BOEHNER FOR SPEAKER

Full Name (Last, First, Middle Initial)  
**B. AMERICAN STAFFING ASSOCIATION STAFFINGPAC**

Mailing Address 277 S. WASHINGTON STREET  
SUITE 200

City ALEXANDRIA State VA Zip Code 22314-3675

FEC ID number of contributing federal political committee. **C** C00145623

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 28 / 2015  
**Transaction ID : SA12.624054.4.0115**

Amount of Each Receipt this Period  
 5000.00

TRANSFER

**[MEMO ITEM]**  
TRANSFER FROM BOEHNER FOR SPEAKER

Full Name (Last, First, Middle Initial)  
**C. COCA-COLA COMPANY NONPARTISAN COMMITTEE**

Mailing Address P.O. BOX 1734

City ATLANTA State GA Zip Code 30301-1734

FEC ID number of contributing federal political committee. **C** C00012468

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 28 / 2015  
**Transaction ID : SA12.623828.4.0115**

Amount of Each Receipt this Period  
 2500.00

TRANSFER

**[MEMO ITEM]**  
TRANSFER FROM BOEHNER FOR SPEAKER

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<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 10 OF 27
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**The Freedom Project**

Full Name (Last, First, Middle Initial)  
**A. COMMUNITY FINANCIAL SERVICES ASSOCIATION PAC (CFSA PAC)**

Mailing Address 515 KING STREET  
SUITE 300

City ALEXANDRIA State VA Zip Code 22314-3137

FEC ID number of contributing federal political committee. **C** C00432534

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1250.00

Date of Receipt  
01 / 28 / 2015  
**Transaction ID : SA12.623833.4.0115**

Amount of Each Receipt this Period  
1250.00

TRANSFER

**[MEMO ITEM]**  
TRANSFER FROM BOEHNER FOR SPEAKER

Full Name (Last, First, Middle Initial)  
**B. DIRECT SUPPLY INC. PARTNERS PAC (DSI PARTNERS PAC)**

Mailing Address 6767 N INDUSTRIAL ROAD

City MILWAUKEE State WI Zip Code 53223-5815

FEC ID number of contributing federal political committee. **C** C00409516

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
01 / 28 / 2015  
**Transaction ID : SA12.623834.4.0115**

Amount of Each Receipt this Period  
2500.00

TRANSFER

**[MEMO ITEM]**  
TRANSFER FROM BOEHNER FOR SPEAKER

Full Name (Last, First, Middle Initial)  
**C. HCR MANOR CARE PAC**

Mailing Address 333 N. SUMMIT STREET  
P.O. BOX 10086

City TOLEDO State OH Zip Code 43604-1531

FEC ID number of contributing federal political committee. **C** C00260141

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
01 / 28 / 2015  
**Transaction ID : SA12.623826.4.0115**

Amount of Each Receipt this Period  
2500.00

TRANSFER

**[MEMO ITEM]**  
TRANSFER FROM BOEHNER FOR SPEAKER

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

**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 11 OF 27
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**The Freedom Project**

**A. HONEYWELL INTERNATIONAL PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 101 CONSTITUTION AVENUE NW  
 SUITE 500 W.  
 City WASHINGTON State DC Zip Code 20001-2133  
 FEC ID number of contributing federal political committee. **C** C00096156  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 28 / 2015  
**Transaction ID : SA12.624061.4.0115**  
 Amount of Each Receipt this Period 5000.00  
 TRANSFER  
**[MEMO ITEM]**  
 TRANSFER FROM BOEHNER FOR SPEAKER

**B. KINDRED HEALTHCARE INC. POLITICAL ACTION COMMITTEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address ONE VENCOR PLACE  
 City LOUISVILLE State KY Zip Code 40202  
 FEC ID number of contributing federal political committee. **C** C00242271  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 28 / 2015  
**Transaction ID : SA12.624058.4.0115**  
 Amount of Each Receipt this Period 5000.00  
 TRANSFER  
**[MEMO ITEM]**  
 TRANSFER FROM BOEHNER FOR SPEAKER

**C. MARATHON PETROLEUM CORPORATION EMPLOYEES PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 539 S. MAIN STREET  
 City FINDLAY State OH Zip Code 45840-3229  
 FEC ID number of contributing federal political committee. **C** C00496307  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 28 / 2015  
**Transaction ID : SA12.623835.4.0115**  
 Amount of Each Receipt this Period 5000.00  
 TRANSFER  
**[MEMO ITEM]**  
 TRANSFER FROM BOEHNER FOR SPEAKER

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<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 12 OF 27
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**The Freedom Project**

Full Name (Last, First, Middle Initial) <b>A. MONDELEZ INTERNATIONAL INC. PAC</b>		Date of Receipt MM / DD / YYYY 01 / 28 / 2015 <b>Transaction ID : SA12.624060.4.0115</b>
Mailing Address 975 F STREET, NW		Amount of Each Receipt this Period 1250.00
City WASHINGTON	State DC	Zip Code 20004-1454
FEC ID number of contributing federal political committee. C C00529073		TRANSFER
Name of Employer	Occupation	<b>[MEMO ITEM]</b> TRANSFER FROM BOEHNER FOR SPEAKER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

Full Name (Last, First, Middle Initial) <b>B. REYNOLDS AMERICAN PAC</b>		Date of Receipt MM / DD / YYYY 01 / 28 / 2015 <b>Transaction ID : SA12.623831.4.0115</b>
Mailing Address PO BOX 718 401 N. MAIN STREET		Amount of Each Receipt this Period 5000.00
City WINSTON SALEM	State NC	Zip Code 27102-0718
FEC ID number of contributing federal political committee. C C00042002		TRANSFER
Name of Employer	Occupation	<b>[MEMO ITEM]</b> TRANSFER FROM BOEHNER FOR SPEAKER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C. SPRINT CORPORATION PAC</b>		Date of Receipt MM / DD / YYYY 01 / 28 / 2015 <b>Transaction ID : SA12.623830.4.0115</b>
Mailing Address 12502 SUNRISE VALLEY DR		Amount of Each Receipt this Period 1250.00
City RESTON	State VA	Zip Code 20191-3438
FEC ID number of contributing federal political committee. C C00089342		TRANSFER
Name of Employer	Occupation	<b>[MEMO ITEM]</b> TRANSFER FROM BOEHNER FOR SPEAKER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<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 13 OF 27
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**The Freedom Project**

Full Name (Last, First, Middle Initial)  
**A. TWENTY-FIRST CENTURY FOX INC. PAC**

Mailing Address 400 N. CAPITOL ST.  
STE. 890

City WASHINGTON State DC Zip Code 20001-1555

FEC ID number of contributing federal political committee. **C** C00330019

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
01 / 28 / 2015  
**Transaction ID : SA12.623829.4.0115**

Amount of Each Receipt this Period  
5000.00

TRANSFER

**[MEMO ITEM]**  
TRANSFER FROM BOEHNER FOR SPEAKER

Full Name (Last, First, Middle Initial)  
**B. TYCO INTERNATIONAL EMPLOYEES PAC**

Mailing Address 607 14TH STREET, NW  
SUITE 550

City WASHINGTON State DC Zip Code 20005-2014

FEC ID number of contributing federal political committee. **C** C00113753

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
01 / 28 / 2015  
**Transaction ID : SA12.624057.4.0115**

Amount of Each Receipt this Period  
5000.00

TRANSFER

**[MEMO ITEM]**  
TRANSFER FROM BOEHNER FOR SPEAKER

Full Name (Last, First, Middle Initial)  
**C. YUM! BRANDS INC. GOOD GOVERNMENT FUND**

Mailing Address 1441 GARDINER LANE

City LOUISVILLE State KY Zip Code 40213-1914

FEC ID number of contributing federal political committee. **C** C00329474

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
01 / 28 / 2015  
**Transaction ID : SA12.624059.4.0115**

Amount of Each Receipt this Period  
5000.00

TRANSFER

**[MEMO ITEM]**  
TRANSFER FROM BOEHNER FOR SPEAKER

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	37760.45

**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)  
**The Freedom Project**

Full Name (Last, First, Middle Initial)

**A. CAITLIN WOHLFARTH FRANKLIN**

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003-1838

Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 15 / 2015

**Transaction ID : SB21B.I21928**

Amount of Each Disbursement this Period

301.96

Full Name (Last, First, Middle Initial)

**B. CAITLIN WOHLFARTH FRANKLIN**

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003-1838

Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 30 / 2015

**Transaction ID : SB21B.I21943**

Amount of Each Disbursement this Period

301.97

Full Name (Last, First, Middle Initial)

**C. BRIDGET GRIBBIN**

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003-1838

Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 15 / 2015

**Transaction ID : SB21B.I21929**

Amount of Each Disbursement this Period

226.87

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

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

830.80

**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)  
**The Freedom Project**

Full Name (Last, First, Middle Initial)

**A. BRIDGET GRIBBIN**

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003-1838

Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 30 / 2015

Transaction ID : SB21B.I21944

Amount of Each Disbursement this Period

226.88

Full Name (Last, First, Middle Initial)

**B. LAUREN G. HAMEL**

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003-1838

Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 15 / 2015

Transaction ID : SB21B.I21930

Amount of Each Disbursement this Period

377.79

Full Name (Last, First, Middle Initial)

**C. LAUREN G. HAMEL**

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003-1838

Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 30 / 2015

Transaction ID : SB21B.I21945

Amount of Each Disbursement this Period

377.80

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

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

982.47

# 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)  
**The Freedom Project**

Full Name (Last, First, Middle Initial)

### A. GRACE HUFFMAN

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003-1838

Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 15 / 2015

Transaction ID : SB21B.I21931

Amount of Each Disbursement this Period

202.64

Category/  
Type

Full Name (Last, First, Middle Initial)

### B. GRACE HUFFMAN

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003-1838

Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 30 / 2015

Transaction ID : SB21B.I21946

Amount of Each Disbursement this Period

201.64

Category/  
Type

Full Name (Last, First, Middle Initial)

### C. KEVIN MCGRANN

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003-1838

Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 15 / 2015

Transaction ID : SB21B.I21932

Amount of Each Disbursement this Period

1377.70

Category/  
Type

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

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

1781.98

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<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)  
**The Freedom Project**

Full Name (Last, First, Middle Initial)

### A. KEVIN MCGRANN

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003-1838

Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 30 / 2015

Transaction ID : SB21B.I21947

Amount of Each Disbursement this Period

1377.70

Full Name (Last, First, Middle Initial)

### B. GRANT SAUNDERS

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003-1838

Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 15 / 2015

Transaction ID : SB21B.I21933

Amount of Each Disbursement this Period

522.94

Full Name (Last, First, Middle Initial)

### C. GRANT SAUNDERS

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003-1838

Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 30 / 2015

Transaction ID : SB21B.I21948

Amount of Each Disbursement this Period

522.93

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

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

2423.57

**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)  
**The Freedom Project**

Full Name (Last, First, Middle Initial)

**A. EMILY STIER**

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003-1838

Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 15 / 2015

**Transaction ID : SB21B.I21934**

Amount of Each Disbursement this Period

179.14

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. EMILY STIER**

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003-1838

Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 30 / 2015

**Transaction ID : SB21B.I21949**

Amount of Each Disbursement this Period

179.15

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. COMPLIANCE CONSULTING OF VIRGINIA**

Mailing Address PO BOX 365

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 20 / 2015

**Transaction ID : SB21B.I21920**

Amount of Each Disbursement this Period

1000.00

Category/  
Type

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

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

1358.29

**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)  
**The Freedom Project**

Full Name (Last, First, Middle Initial)

**A. DEPARTMENT OF EMPLOYMENT SERVICES**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		30		2015

Mailing Address PO BOX 96664

**Transaction ID : SB21B.I21941**

City WASHINGTON State DC Zip Code 20090-6664

Amount of Each Disbursement this Period

236.25
--------

Purpose of Disbursement  
PAYROLL TAXES

--

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. FIRST FINANCIAL BANK**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		08		2015

Mailing Address 7795 TYLERSVILLE ROAD

**Transaction ID : SB21B.I21927**

City WEST CHESTER State OH Zip Code 45069-2592

Amount of Each Disbursement this Period

5801.00
---------

Purpose of Disbursement  
CREDIT CARD PAYMENT-SEE MEMOS

--

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. 123 TOGETHER.COM**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		08		2015

Mailing Address 111 S BEDFORD STREET  
SUITE 200

**Transaction ID : SB21B.I21953**

City BURLINGTON State MA Zip Code 01803-5145

Amount of Each Disbursement this Period

253.98
--------

Purpose of Disbursement  
WEB SERVICES

--

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

**[MEMO ITEM]**

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

6037.25
---------

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**The Freedom Project**

Full Name (Last, First, Middle Initial)

**A. CMDI**

Mailing Address 1593 SPRING HILL ROAD  
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement  
DATA MANAGEMENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Transaction ID : SB21B.I21957

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. CONGRESSIONAL LIQUORS**

Mailing Address 404 1ST STREET SE

City WASHINGTON State DC Zip Code 20003-1826

Purpose of Disbursement  
CATERING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Transaction ID : SB21B.I21958

Amount of Each Disbursement this Period

6	5	5	0	9	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. DURABLE SAFETY PRODUCTS**

Mailing Address 898 WATERWAY PLACE

City LONGWOOD State FL Zip Code 32750-3573

Purpose of Disbursement  
DONOR GIFTS

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Transaction ID : SB21B.I21959

Amount of Each Disbursement this Period

4	4	1	8	2	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

[MEMO ITEM]

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

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

0	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

0	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

**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)  
**The Freedom Project**

Full Name (Last, First, Middle Initial)

**A. HONEYCOMB GROCER**

Mailing Address 1309 5TH ST., NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement  
CATERING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 08 / 2015

Transaction ID : SB21B.I21964

Amount of Each Disbursement this Period

1200.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. OFFICE DEPOT**

Mailing Address 11001 LEE HIGHWAY

City FAIRFAX State VA Zip Code 22030-5018

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 08 / 2015

Transaction ID : SB21B.I21961

Amount of Each Disbursement this Period

208.64

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. STAPLES**

Mailing Address 8 TECHNOLOGY DRIVE  
# 1020

City WESTBOROUGH State MA Zip Code 01581-1756

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 08 / 2015

Transaction ID : SB21B.I21965

Amount of Each Disbursement this Period

685.46

[MEMO ITEM]

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

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

0.00

**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)  
**The Freedom Project**

Full Name (Last, First, Middle Initial)

**A. THE MONOCLE**

Mailing Address 107 D STREET NE

City WASHINGTON State DC Zip Code 20002-5613

Purpose of Disbursement  
CATERING

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 08 / 2015

Transaction ID : **SB21B.I21968**

Amount of Each Disbursement this Period

448.40

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. TRATTORIA ALBERTO**

Mailing Address 506 8TH STREET SE

City WASHINGTON State DC Zip Code 20003-2834

Purpose of Disbursement  
CATERING

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 08 / 2015

Transaction ID : **SB21B.I21969**

Amount of Each Disbursement this Period

576.78

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. NJI NEW MEDIA, LLC**

Mailing Address 201 KING STREET

City ALEXANDRIA State VA Zip Code 22314-6600

Purpose of Disbursement  
WEB CONSULTING

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 14 / 2015

Transaction ID : **SB21B.I21917**

Amount of Each Disbursement this Period

4933.34

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

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

4933.34

**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)  
**The Freedom Project**

Full Name (Last, First, Middle Initial)

**A. OCCASIONS CATERERS**

Mailing Address 5458 3RD STREET NE

City WASHINGTON State DC Zip Code 20011-6316

Purpose of Disbursement  
CATERING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 14 / 2015

Transaction ID : SB21B.I21918

Amount of Each Disbursement this Period

29824.63

Full Name (Last, First, Middle Initial)

**B. OFFICE OF TAX AND REVENUE**

Mailing Address PO BOX 96385

City WASHINGTON State DC Zip Code 20090-6385

Purpose of Disbursement  
PAYROLL TAXES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 30 / 2015

Transaction ID : SB21B.I21952

Amount of Each Disbursement this Period

279.00

Full Name (Last, First, Middle Initial)

**C. UNITED STATES TREASURY**

Mailing Address PO BOX 6796

City CHICAGO State IL Zip Code 60680-6796

Purpose of Disbursement  
PAYROLL TAXES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 15 / 2015

Transaction ID : SB21B.I21935

Amount of Each Disbursement this Period

966.41

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

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

31070.04

**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)  
**The Freedom Project**

Full Name (Last, First, Middle Initial)

**A. UNITED STATES TREASURY**

Mailing Address PO BOX 6796

City CHICAGO State IL Zip Code 60680-6796

Purpose of Disbursement  
PAYROLL TAXES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 30 / 2015

Transaction ID : SB21B.I21942

Amount of Each Disbursement this Period

353.72

Full Name (Last, First, Middle Initial)

**B. UNITED STATES TREASURY**

Mailing Address PO BOX 6796

City CHICAGO State IL Zip Code 60680-6796

Purpose of Disbursement  
PAYROLL TAXES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 30 / 2015

Transaction ID : SB21B.I21950

Amount of Each Disbursement this Period

966.38

Full Name (Last, First, Middle Initial)

**C. VERIZON WIRELESS**

Mailing Address PO BOX 17464

City BALTIMORE State MD Zip Code 21297-1464

Purpose of Disbursement  
CELL PHONE/INTERNET

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 14 / 2015

Transaction ID : SB21B.I21915

Amount of Each Disbursement this Period

1181.39

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

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

2501.49

**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)  
**The Freedom Project**

Full Name (Last, First, Middle Initial)

**A. WILEY REIN LLP**

Mailing Address 1776 K STREET NW

City WASHINGTON State DC Zip Code 20006-2304

Purpose of Disbursement  
LEGAL FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
01 / 20 / 2015

**Transaction ID : SB21B.I21919**

Amount of Each Disbursement this Period

5167.15

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

5167.15

57086.38



**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)  
**The Freedom Project**

Full Name (Last, First, Middle Initial)

**A. NATIONAL REPUBLICAN SENATORIAL COMMITTEE**

Mailing Address 425 2ND STREET NE

City WASHINGTON State DC Zip Code 20002-4914

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 13 / 2015

Transaction ID : SB23.I21912

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

**B. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Mailing Address 320 1ST STREET SE

City WASHINGTON State DC Zip Code 20003-1838

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 13 / 2015

Transaction ID : SB23.I21914

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

**C. REPUBLICAN NATIONAL COMMITTEE**

Mailing Address 310 1ST STREET SE

City WASHINGTON State DC Zip Code 20003-1885

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 13 / 2015

Transaction ID : SB23.I21913

Amount of Each Disbursement this Period

15000.00

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

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

45000.00

58000.00