

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

RECEIVED  
FEC MAIL CENTER

Office Use Only OH 12 45

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

LIBERTY COMMITTEE, THE

ADDRESS (number and street)

4337 WEST ANDERSON ROAD

Check if different  
than previously  
reported. (ACC)

SOUTH EUCLID

OH 44121-3574

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00324871

3. IS THIS  
REPORT



NEW  
(N)

OR



AMENDED  
(A)

4. TYPE OF REPORT  
(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report (Q1)

July 15  
Quarterly Report (Q2)

October 15  
Quarterly Report (Q3)

January 31  
Year-End Report (YE)

July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)

Termination Report  
(TER)

(b) Monthly  
Report  
Due On:

Feb 20 (M2)

May 20 (M5)

Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)

Jun 20 (M6)

Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)

Jul 20 (M7)

Oct 20 (M10)

Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

In the  
State of

(d) 30-Day  
POST-Election  
Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

11 04 2008

In the  
State of

OH

5. Covering Period

10 01 2008

through

11 24 2008

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

Type or Print Name of Treasurer

MARILYN L. WEHLING

Signature of Treasurer

Marilyn L. Wehling

Date

12 04 2008

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

Office  
Use  
Only

**FEC FORM 3X**  
Rev. 12/2004

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

LIBERTY COMMITTEE, THE C00324871

Report Covering the Period:

From:

10 01 2008

To:

11 24 2008

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <u>2008</u>		<u>1338.65</u>
(b) Cash on Hand at Beginning of Reporting Period.....	<u>1581.83</u>	
(c) Total Receipts (from Line 19) .....	<u>8042.46</u>	<u>10069.93</u>
(d) Subtotal (add Lines 6(b) and 8(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	<u>9624.29</u>	<u>11408.58</u>
7. Total Disbursements (from Line 31) .....	<u>3708.59</u>	<u>5492.88</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<u>5915.70</u>	<u>5915.70</u>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....	<u>0</u>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....	<u>0</u>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**LIBERTY COMMITTEE, THE** **000324871**

Report Covering the Period: From:

**10 01 2008**

To:

**11 24 2008**

**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).....

**5169.38**

**6131.85**

(ii) Unitemized.....

**2873.08**

**3938.08**

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

**8042.46**

**10069.93**

(b) Political Party Committees.....

(c) Other Political Committees (such as PACs).....

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

**8042.46**

**10069.93**

**12. Transfers From Affiliated/Other Party Committees.....**

**13. All Loans Received.....**

**14. Loan Repayments Received.....**

**15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....**

**16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....**

**17. Other Federal Receipts (Dividends, Interest, etc.).....**

**18. Transfers from Non-Federal and Levin Funds**

(a) Non-Federal Account (from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

**19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶**

**8042.46**

**10069.93**

**20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶**

**8042.46**

**10069.93**

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 .....		
(ii) Non-Federal Share .....		
(b) Other Federal Operating Expenditures .....	308.59	1592.88
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	308.59	1592.88
22. Transfers to Affiliated/Other Party Committees .....		
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	2500.00	3000.00
24. Independent Expenditures (use Schedule E) .....		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F) .....		
26. Loan Repayments Made .....		
27. Loans Made .....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....		
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs) .....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0	0
29. Other Disbursements .....	900.00	900.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....		
(ii) "Levin" Share .....		
(b) Federal Election Activity Paid Entirely With Federal Funds .....		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	3708.59	5492.88
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) .....	3708.59	5492.88

DETAILED SUMMARY PAGE  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Ex-  
pendituresCOLUMN A  
Total This PeriodCOLUMN B  
Calendar Year-to-Date

33. Total Contributions (other than loans)  
(from Line 11(d), page 3) .....
34. Total Contribution Refunds  
(from Line 28(d)) .....
35. Net Contributions (other than loans)  
(subtract Line 34 from Line 33) .....
36. Total Federal Operating Expenditures  
(add Line 21(a)(i) and Line 21(b)) ..... ►
37. Offsets to Operating Expenditures  
(from Line 15, page 3) .....
38. Net Operating Expenditures  
(subtract Line 37 from Line 36) ..... ►

8042.46

0

8042.46

308.59

0

308.59

10069.93

0

10069.93

159288

A

159288

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

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

FOR LINE NUMBER:

PAGE 1 OF 4

(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)

**LIBERTY COMMITTEE, THE**

**C00324871**

A. Full Name (Last, First, Middle Initial)  
**DEBORAH L. BARTLEY**

Mailing Address  
**5156 ST. ANDREWS ST NW**

City **CANTON** State **OH** Zip Code **44708-1878**

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

Name of Employer  
**HOMEMAKER**

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

Aggregate Year-to-Date ▼  
**3000.00**

Date of Receipt

**10 ' 02 ' 2008**

Amount of Each Receipt this Period

**3000.00**

B. Full Name (Last, First, Middle Initial)  
**DON W. CHAPMAN**

Mailing Address  
**18747 ORCHARD HILL**

City **WALTON HILLS** State **OH** Zip Code **44146**

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

Name of Employer  
**CHARLES SCHWAB**

Occupation  
**PROJECT MANAGER**

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

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt

**10 ' 02 ' 2008**

Amount of Each Receipt this Period

**250.00**

C. Full Name (Last, First, Middle Initial)  
**LEONARD DOLCE**

Mailing Address  
**2550 CRIDER RD**

City **MANFIELD** State **OH** Zip Code **44903**

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

Name of Employer  
**DOLCE'S TREE SERVICE**

Occupation  
**TREE SERVICES**

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

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt

**10 ' 06 ' 2008**

Amount of Each Receipt this Period

**500.00**

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

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

**3750.00**

**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 2 OF 4

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

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NAME OF COMMITTEE (In Full)

**LIBERTY COMMITTEE, THE**

**C00324871**

Full Name (Last, First, Middle Initial)

A. **BARBARA A. KNIGHT**

Mailing Address

**580 EASTWOOD RD**

City

**HINKLEY**

State

**OH**

Zip Code

**44233**

FEC ID number of contributing  
federal political committee.

**C**

Date of Receipt

**10 / 29 / 2008**

Amount of Each Receipt this Period

**250.00**

Name of Employer

**SELF-EMPLOYED**

Occupation

**REAL ESTATE**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Full Name (Last, First, Middle Initial)

B. **MARCIA ROBSON**

Mailing Address

**7641 WHITE OAK RD**

City

**OLON**

State

**OH**

Zip Code

**44139**

FEC ID number of contributing  
federal political committee.

**C**

Date of Receipt

**10 / 06 / 2008**

Amount of Each Receipt this Period

**500.00**

Name of Employer

**PARKSIDE CHURCH**

Occupation

**RETAIL SALES**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Full Name (Last, First, Middle Initial)

C. **ALICE J. SANDERS**

Mailing Address

**2341 MANCHESTER AVE SW**

City

**MASSILLON**

State

**OH**

Zip Code

**44647**

FEC ID number of contributing  
federal political committee.

**C**

Date of Receipt

**10 / 14 / 2008**

Amount of Each Receipt this Period

**30.00**

Name of Employer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Occupation

**HOMEMAKER**

Aggregate Year-to-Date ▼

**190.00**

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

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

**780.00**

**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 3 OF 4

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

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NAME OF COMMITTEE (In Full)

**LIBERTY COMMITTEE, THE** **C00324871**

A. Full Name (Last, First, Middle Initial) **ALICE J. SANDERS**  
Mailing Address **2341 MANCHESTER AVE SW**  
City **MASSILLON** State **OH** Zip Code **44647**  
FEC ID number of contributing federal political committee. **C**  
Name of Employer \_\_\_\_\_ Occupation **HOMEMAKER**  
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ☐  
Aggregate Year-to-Date **210.00**

Date of Receipt

**10** / **29** / **2008**

Amount of Each Receipt this Period

**20.00**

B. Full Name (Last, First, Middle Initial) **ALICE J. SANDERS**  
Mailing Address **2341 MANCHESTER AVE SW**  
City **MASSILLON** State **OH** Zip Code **44647**  
FEC ID number of contributing federal political committee. **C**  
Name of Employer \_\_\_\_\_ Occupation **HOMEMAKER**  
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ☐  
Aggregate Year-to-Date **230.00**

Date of Receipt

**11** / **19** / **2008**

Amount of Each Receipt this Period

**20.00**

C. Full Name (Last, First, Middle Initial) **BARBARA J. TUCKER**  
Mailing Address **2508 STATE RT 39**  
City **LUCAS** State **OH** Zip Code **44843-9504**  
FEC ID number of contributing federal political committee. **C**  
Name of Employer \_\_\_\_\_ Occupation **HOMEMAKER**  
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ☐  
Aggregate Year-to-Date **250.00**

Date of Receipt

**10** / **02** / **2008**

Amount of Each Receipt this Period

**250.00**

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

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

**290.00**



**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 4 OF 4

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

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NAME OF COMMITTEE (In Full)

**LIBERTY COMMITTEE, THE C00324871**

Full Name (Last, First, Middle Initial)

A. **TAYLOR, CHRISTINE**

Mailing Address

**4864 MYRTLE AVE NW**

City

**CHAMPION TOWNSHIP OH 44483**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

**HOMEMAKER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1079.47**

Date of Receipt

**10 02 2008**

Amount of Each Receipt this Period

**117.00**

Full Name (Last, First, Middle Initial)

B. **TAYLOR, CHRISTINE**

Mailing Address

**4864 MYRTLE AVE NW**

City

**CHAMPION TOWNSHIP OH 44483**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

**HOMEMAKER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1195.61**

Date of Receipt

**10 14 2008**

Amount of Each Receipt this Period

**116.14**

Full Name (Last, First, Middle Initial)

C. **TAYLOR, CHRISTINE**

Mailing Address

**4864 MYRTLE AVE NW**

City

**CHAMPION TOWNSHIP OH 44483**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

**HOMEMAKER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1311.85**

Date of Receipt

**11 06 2008**

Amount of Each Receipt this Period

**116.24**

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

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

**349.38**

**5169.38**

**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)

PAGE / OF 2

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

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NAME OF COMMITTEE (In Full)

**LIBERTY COMMITTEE, THE C00324871**

Full Name (Last, First, Middle Initial)

A. **INNOVATIVE MERCHANT SOLUTIONS**

Date of Disbursement

Mailing Address

**26541 AGOURA RD #200**

**10/03/2008**

City

**CALABASAS**

State

**CA**

Zip Code

**91302**

Purpose of Disbursement

**CREDIT CARD PROCESSING**

**001**

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

**73.29**

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. **INNOVATIVE MERCHANT SOLUTIONS**

Date of Disbursement

Mailing Address

**26541 AGOURA RD #200**

**11/03/2008**

City

**CALABASAS**

State

**CA**

Zip Code

**91302**

Purpose of Disbursement

**CREDIT CARD PROCESSING**

**001**

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

**45.51**

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. **MARILYN WEHLING**

Date of Disbursement

Mailing Address

**4337 W. ANDERSON RD**

**11/19/2008**

City

**SOUTH EUCLID OH**

State

Zip Code

**44121**

Purpose of Disbursement

**SBC INTERNET SERVICE**

**001**

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

**9000**

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).....▶

**208.80**

**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)

PAGE **2** OF **2**

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

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NAME OF COMMITTEE (In Full)

**LIBERTY COMMITTEE, THE C00324871**

Full Name (Last, First, Middle Initial)

A.

**MARILYN WEHLING**

Mailing Address

**4337 W. ANDERSON RD**

City

**SOUTH EUCLID OH 44121**

Purpose of Disbursement

**MILEAGE REIMBURSE-  
MENT**

Candidate Name

**002**  
Category/  
Type

Date of Disbursement

**11/19/2008**

Amount of Each Disbursement this Period

**40.77**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B.

**BANK OF AMERICA**

Mailing Address

**PO BOX 15710**

City

**WILMINGTON DE 19866**

Purpose of Disbursement

**CREDIT CARD PAYMENT**

Candidate Name

**001**  
Category/  
Type

Date of Disbursement

**10/19/2008**

Amount of Each Disbursement this Period

**1.00**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C.

**BANK OF AMERICA**

Mailing Address

**PO BOX 15710**

City

**WILMINGTON DE 19866**

Purpose of Disbursement

**SERVICE CHARGE**

Candidate Name

**001**  
Category/  
Type

Date of Disbursement

**09/26/2008**

Amount of Each Disbursement this Period

**1.00**

**MEMO - BANK OF AM DISB.**

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).....▶

**41.77**  
**250.57**

**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)

PAGE 1 OF 1

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

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NAME OF COMMITTEE (In Full)

**LIBERTY COMMITTEE, THE** **C00324871**

Full Name (Last, First, Middle Initial)

A. **BANK OF AMERICA**

Date of Disbursement

**10/19/2008**

Mailing Address

**PO BOX 15710**

City

**WILMINGTON DE 19866**

Purpose of Disbursement

**CREDIT CARD PAYMENT**

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

**2500.00**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. **MC CAIN PALIN VICTORY COMM**

Date of Disbursement

**09/24/2008**

Mailing Address

**228 S. WASHINGTON ST #115**

City

**ALEXANDRIA VA 22314**

Purpose of Disbursement

**CONTRIBUTION**

Candidate Name

**MC CAIN + PALIN**

Category/  
Type

Amount of Each Disbursement this Period

**2500.00**

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

**MM/DD/YYYY**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

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).....▶

**2500.00**

**2500.00**

28039950992

**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 / OF 2

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

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NAME OF COMMITTEE (In Full)

**LIBERTY COMMITTEE, THE** **000324871**

Full Name (Last, First, Middle Initial)

A. **CITIZENS FOR GRADY**

Date of Disbursement

**10' 28' 2008**

Mailing Address

**18782 S. INLET DR**

City

**STRONGSVILLE OH 44136**

Purpose of Disbursement

**CONTRIBUTION-NON FED.**

**011**

Candidate Name

**COLLEEN GRADY**

Category/  
Type

Amount of Each Disbursement this Period

**100.00**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. **GINTER FOR STATE SENATE**

Date of Disbursement

**10' 28' 2008**

Mailing Address

**4 ELYSIAN WAY**

City

**EAST LIVERPOOL OH 43920**

Purpose of Disbursement

**CONTRIBUTION-NON FED**

**011**

Candidate Name

**TIM GINTER**

Category/  
Type

Amount of Each Disbursement this Period

**200.00**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. **MORRIS CAMPAIGN COMMITTEE**

Date of Disbursement

**10' 28' 2008**

Mailing Address

**13805 HOLLAND ROAD**

City

**BROOK PARK OH 44142**

Purpose of Disbursement

**CONTRIBUTION-NON FED**

**011**

Candidate Name

**DAVID MORRIS**

Category/  
Type

Amount of Each Disbursement this Period

**100.00**

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).....▶

**400.00**

28039950993

**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 **2** OF **2**

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

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NAME OF COMMITTEE (In Full)

**LIBERTY COMMITTEE, THE** **C00324871**

Full Name (Last, First, Middle Initial)

A. **PAULA BROOKS COMMITTEE**

Date of Disbursement

**10 ' 28 ' 2008**

Mailing Address

**PO BOX 1446**

City

**COLUMBUS**

State

**OH**

Zip Code

**43216**

Purpose of Disbursement

**CONTRIBUTION-NOIY FEO**

**011**

Amount of Each Disbursement this Period

**500.00**

Candidate Name

**PAULA BROOKS**

Category/  
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

**10 ' 28 ' 2008**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

**10 ' 28 ' 2008**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

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

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**500.00**

**900.00**

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