

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
CHRISTIAN VOTER PROJECT

ADDRESS (number and street) 100 S ANAHEIM BLVD SUITE 350
 Check if different than previously reported. (ACC)
ANAHEIM CA 92805

2. **FEC IDENTIFICATION NUMBER** C00278283
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on 11 02 2004 in the State of _____

5. Covering Period 10 01 2004 through 11 22 2004

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 Beverly Sheldon
Signature of Treasurer Electronically Filed by Beverly Sheldon Date 02 28 2006

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
CHRISTIAN VOTER PROJECT

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	4

 To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	0	4

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>4</td></tr></table>	Y	Y	Y	Y	2	0	0	4		10407.01
Y	Y	Y	Y							
2	0	0	4							
(b) Cash on Hand at Beginning of Reporting Period	19457.43									
(c) Total Receipts (from Line 19)	158537.48	651133.30								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	177994.91	661540.31								
7. Total Disbursements (from Line 31)	164022.56	647567.96								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	13972.35	13972.35								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	20135.61									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
CHRISTIAN VOTER PROJECT

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	4

 To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	0	4

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	13496.00	42597.00
(i) Itemized (use Schedule A)	145041.48	608536.30
(ii) Unitemized	158537.48	651133.30
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	158537.48	651133.30
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	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))	158537.48	651133.30
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	158537.48	651133.30

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) 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.....	89994.63	307012.35
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	89994.63	307012.35
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	2500.00	13500.00
24. Independent Expenditure (use Schedule E)	71527.93	327055.61
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.....	0.00	0.00
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))..	164022.56	647567.96
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	164022.56	647567.96

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	158537.48	651133.30
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	158537.48	651133.30
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	89994.63	307012.35
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	89994.63	307012.35

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 47
	<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	

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)
CHRISTIAN VOTER PROJECT

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

Mailing Address 26955 Floresta Ln

City Mission Viejo State CA Zip Code 92691

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

Name of Employer Regency Real Estate Occupation Realtor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
319.00

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

Transaction ID: SA11A1.4990

Amount of Each Receipt this Period
319.00

Donation

B. Full Name (Last, First, Middle Initial)
Mr. Jim Arnold

Mailing Address 802 Circle Dr

City Jacksonville State TX Zip Code 75766

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

Name of Employer Exxon Chemical Occupation Retire Chemist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

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

Transaction ID: SA11A1.4988

Amount of Each Receipt this Period
300.00

Donation

C. Full Name (Last, First, Middle Initial)
Ms Doris M Boucher

Mailing Address PO Box 58

City Haddonfield State NJ Zip Code 08033

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

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

Transaction ID: SA11A1.5008

Amount of Each Receipt this Period
250.00

Donation

SUBTOTAL of Receipts This Page (optional)	869.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 47
	<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	

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)
CHRISTIAN VOTER PROJECT

A. Full Name (Last, First, Middle Initial) Mr. Warren D Bridges		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 4
Mailing Address 1715 Fredrica Dr.		Transaction ID: SA11A1.4981
City State Zip Code Orlando FL 32812	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C	Donation	
Name of Employer Unknown Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 2000.00		

B. Full Name (Last, First, Middle Initial) Mrs. Barbara Brown		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 4
Mailing Address PO Box 1098		Transaction ID: SA11A1.4986
City State Zip Code Prairie Grove AR 72753	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Donation	
Name of Employer Unknown Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 500.00		

C. Full Name (Last, First, Middle Initial) Mr. Robert Chaffiot		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 0 4
Mailing Address 8 River Ridge Dr		Transaction ID: SA11A1.4982
City State Zip Code Rockledge FL 32955	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Donation	
Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	2550.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 47
	<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	

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)
CHRISTIAN VOTER PROJECT

A. Full Name (Last, First, Middle Initial) Mr. Clair Champion		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 4
Mailing Address PO Box 196 249 N Genoa		Transaction ID: SA11A1.5009
City Port Republic State NJ Zip Code 08241	Amount of Each Receipt this Period 400.00	
FEC ID number of contributing federal political committee. C		Donation
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

B. Full Name (Last, First, Middle Initial) Mr. Andrew Collins		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 4
Mailing Address 215 Main St		Transaction ID: SA11A1.5018
City Camilla State GA Zip Code 31730	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Donation
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C. Full Name (Last, First, Middle Initial) Mrs. Clarice Collins		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 0 4
Mailing Address PO Box 1705		Transaction ID: SA11A1.5032
City Mason City State IA Zip Code 50402	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Donation
Name of Employer Unknown	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 47
	<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	

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)
CHRISTIAN VOTER PROJECT

Full Name (Last, First, Middle Initial) A. Miss Estelle Crockett		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 4	
Mailing Address 1203 12th St.		Transaction ID: SA11A1.4980	
City State Zip Code Big Stone Gap VA 24219	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		Donation	
Name of Employer Retired Occupation Teacher	Aggregate Year-to-Date ▼ 2000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Mr. William M Davidson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 4	
Mailing Address 70 Mayfair Dr.		Transaction ID: SA11A1.5061	
City State Zip Code Salinas CA 93905	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		Donation	
Name of Employer Unknown Occupation	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Mr. G Edward		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 4	
Mailing Address 2025 Lambert Ct		Transaction ID: SA11A1.4987	
City State Zip Code Plano TX 75075	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C		Donation	
Name of Employer Unknown Occupation	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	1050.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 47
	<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	

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)
CHRISTIAN VOTER PROJECT

A. Full Name (Last, First, Middle Initial)
Mr. Henry E Erhard

Mailing Address PO Box 428

City State Zip Code
Castine ME 04421

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

Name of Employer
Unknown

Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
211.00

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

Transaction ID: SA11A1.5007

Amount of Each Receipt this Period
211.00

Donation

B. Full Name (Last, First, Middle Initial)
Mr. James G Fuqua

Mailing Address 4407 Waterbeck St

City State Zip Code
Fulshear TX 77441

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

Name of Employer
Unknown

Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

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

Transaction ID: SA11A1.5055

Amount of Each Receipt this Period
225.00

Donation

C. Full Name (Last, First, Middle Initial)
Mr. Fred Garrett

Mailing Address 321 S. Palmers Chapel Rd

City State Zip Code
Cottontown TN 37048

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

Name of Employer
Unknown

Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

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

Transaction ID: SA11A1.5029

Amount of Each Receipt this Period
275.00

Donation

SUBTOTAL of Receipts This Page (optional)	▶	711.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 47
	<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	

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)
CHRISTIAN VOTER PROJECT

A. Full Name (Last, First, Middle Initial)
Dr. Frank N Genovese

Mailing Address RR 7 Box 447

City State Zip Code
Kittanning PA 16201

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

Name of Employer Self Occupation Surgeon

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

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

Transaction ID: SA11A1.5013

Amount of Each Receipt this Period
100.00

Donation

B. Full Name (Last, First, Middle Initial)
Mr. Gary Gussel

Mailing Address 25 Siskiwit Cir

City State Zip Code
Madison WI 53719

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

Name of Employer Unknown Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

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

Transaction ID: SA11A1.5049

Amount of Each Receipt this Period
300.00

Donation

C. Full Name (Last, First, Middle Initial)
Mr. Frederick Heiges

Mailing Address 833 Gunnison Rd

City State Zip Code
York PA 17404

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
1 0 / 2 5 / 2 0 0 4

Transaction ID: SA11A1.5014

Amount of Each Receipt this Period
220.00

Donation

SUBTOTAL of Receipts This Page (optional)	▶	620.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 47
	<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	

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)
CHRISTIAN VOTER PROJECT

A. Full Name (Last, First, Middle Initial)
Mr. Harold E Hovland

Mailing Address 1517 Country Club Rd

City State Zip Code
Fort Collins CO 80524

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

Name of Employer Retired Occupation Pharmacist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt
M M / D D / Y Y Y Y
10 / 22 / 2004

Transaction ID: SA11A1.5057

Amount of Each Receipt this Period
240.00

Donation

B. Full Name (Last, First, Middle Initial)
Mr. La Verge P Huffstutler

Mailing Address 1005 Susan Moore Rd

City State Zip Code
Blountsville AL 35031

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

Name of Employer Unknown 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
10 / 13 / 2004

Transaction ID: SA11A1.5027

Amount of Each Receipt this Period
225.00

Donation

C. Full Name (Last, First, Middle Initial)
Dr. Marylou D John

Mailing Address 625 Sunset Dr

City State Zip Code
Bloomsburg PA 17815

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

Name of Employer Retired Occupation Doctor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt
M M / D D / Y Y Y Y
11 / 08 / 2004

Transaction ID: SA11A1.5015

Amount of Each Receipt this Period
220.00

Donation

SUBTOTAL of Receipts This Page (optional)	685.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 47
	<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

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)
CHRISTIAN VOTER PROJECT

A. Full Name (Last, First, Middle Initial) Mrs. Dwight Jones		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 0 4
Mailing Address PO Box 642		Transaction ID: SA11A1.5054
City State Zip Code Minneola KS 67865	Amount of Each Receipt this Period 235.00	
FEC ID number of contributing federal political committee. C	Donation	
Name of Employer Unknown	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00	

B. Full Name (Last, First, Middle Initial) Ms Margaret Klass		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 4
Mailing Address 2600 S. Heritage Woods Dr.		Transaction ID: SA11A1.5051
City State Zip Code Appleton WI 54915	Amount of Each Receipt this Period 221.00	
FEC ID number of contributing federal political committee. C	Donation	
Name of Employer Unknown	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 221.00	

C. Full Name (Last, First, Middle Initial) Mr. Walter H Kleiner		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 4
Mailing Address 1725 89th Place NE		Transaction ID: SA11A1.4991
City State Zip Code Clyde Hill VA 98004	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Donation	
Name of Employer Retired	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

SUBTOTAL of Receipts This Page (optional) ▶	481.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 47
	<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)
CHRISTIAN VOTER PROJECT

A. Full Name (Last, First, Middle Initial) Mr. Michael Klimosko		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 4	
Mailing Address 201 E 83rd St Apt 11F		Transaction ID: SA11A1.5010	
City State Zip Code New York NY 10028	Amount of Each Receipt this Period 270.00		
FEC ID number of contributing federal political committee. C		Donation	
Name of Employer Unknown	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00		

B. Full Name (Last, First, Middle Initial) Ms Mary M Koessler		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 4	
Mailing Address 56122 Old Lake Shore Road		Transaction ID: SA11A1.4979	
City State Zip Code Lake View NY 14085	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C		Donation	
Name of Employer Unknown	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

C. Full Name (Last, First, Middle Initial) Ms Joan H Lee		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 4	
Mailing Address 15581 Shell Point Blvd		Transaction ID: SA11A1.5026	
City State Zip Code Fort Myers FL 33908	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		Donation	
Name of Employer Unknown	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	820.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 47
	<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	

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)
CHRISTIAN VOTER PROJECT

A. Full Name (Last, First, Middle Initial)
Mr. Lawrence D Long

Mailing Address 114 E Ahtanum Rd

City State Zip Code
Yakima WA 98903

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

Name of Employer Unknown Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

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

Transaction ID: SA11A1.5047

Amount of Each Receipt this Period
225.00

Donation

B. Full Name (Last, First, Middle Initial)
Mr. Edward S Martin

Mailing Address 1046 Woodberry Rd

City State Zip Code
New Kensington PA 15068

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

Name of Employer Retired Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

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

Transaction ID: SA11A1.5012

Amount of Each Receipt this Period
150.00

Donation

C. Full Name (Last, First, Middle Initial)
Mr. Robert E Mc Neill

Mailing Address 727 Isle of Pines Rd

City State Zip Code
 Mooresville NC 28117

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

Name of Employer Unknown Occupation
Retired Baptist Minister

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

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

Transaction ID: SA11A1.5017

Amount of Each Receipt this Period
300.00

Donation

SUBTOTAL of Receipts This Page (optional)	675.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 47
	<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	

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)
CHRISTIAN VOTER PROJECT

A. Full Name (Last, First, Middle Initial)
Mr. Harold B Moore

Mailing Address 1061 Highway 74

City State Zip Code
Chelsea AL 35043

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 ▼ **520.00**

Date of Receipt
M M / D D / Y Y Y Y
10 / 15 / 2004

Transaction ID: SA11A1.5028

Amount of Each Receipt this Period
20.00

Donation

B. Full Name (Last, First, Middle Initial)
Mr. Anon October

Mailing Address PO Box 98160

City State Zip Code
Washington DC 20090

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

Name of Employer Unknown Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt
M M / D D / Y Y Y Y
10 / 28 / 2004

Transaction ID: SA11A1.5016

Amount of Each Receipt this Period
275.00

Donation

C. Full Name (Last, First, Middle Initial)
Dr. Robert G Reeves

Mailing Address 10831 Skyline Dr.

City State Zip Code
Santa Ana CA 92705

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

Name of Employer Self Occupation Doctor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
M M / D D / Y Y Y Y
10 / 25 / 2004

Transaction ID: SA11A1.5060

Amount of Each Receipt this Period
250.00

Donation

SUBTOTAL of Receipts This Page (optional)	545.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 47
	<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	

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)
CHRISTIAN VOTER PROJECT

Full Name (Last, First, Middle Initial) A. Mrs. Reginald (Sue) H Roberts		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 4	
Mailing Address 3219 W Price Ave		Transaction ID: SA11A1.5020	
City Tampa	State FL	Zip Code 33611	Amount of Each Receipt this Period 235.00
FEC ID number of contributing federal political committee. C		Donation	
Name of Employer Housewife	Occupation Retired 82 years old		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00		

Full Name (Last, First, Middle Initial) B. Mr. Anthony V Rotondi		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 4	
Mailing Address 3805 SE 12th Ave		Transaction ID: SA11A1.5025	
City Cape Coral	State FL	Zip Code 33904	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Donation	
Name of Employer Sonrise Academy, Inc	Occupation Teacher/Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00		

Full Name (Last, First, Middle Initial) C. Mr. Kenneth G Shotzberger		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 4	
Mailing Address PO Box 7936		Transaction ID: SA11A1.5021	
City Seminole	State FL	Zip Code 33775	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		Donation	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00		

SUBTOTAL of Receipts This Page (optional) ▶	505.00
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 47
	<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	

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)
CHRISTIAN VOTER PROJECT

A. Full Name (Last, First, Middle Initial)
Mrs. Florence Spindler

Mailing Address 1001 E. Crescent Dr.

City State Zip Code
Manitowoc WI 54220

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

Name of Employer
Unknown

Occupation
84 year old widow

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
10 / 12 / 2004

Transaction ID: SA11A1.5050

Amount of Each Receipt this Period
300.00

Donation

B. Full Name (Last, First, Middle Initial)
Mr. Robert F Sullivan

Mailing Address 5003 W 140th St

City State Zip Code
Hawthorne CA 90250

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

Name of Employer
Unknown

Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2004

Transaction ID: SA11A1.5059

Amount of Each Receipt this Period
250.00

Donation

C. Full Name (Last, First, Middle Initial)
Mr. Troye Summitt

Mailing Address 450 Brakebill Rd

City State Zip Code
Vonore TN 37885

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

Name of Employer

Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
314.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2004

Transaction ID: SA11A1.5031

Amount of Each Receipt this Period
75.00

Donation

SUBTOTAL of Receipts This Page (optional)	625.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 47
	<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

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)
CHRISTIAN VOTER PROJECT

Full Name (Last, First, Middle Initial) A. Dr. Lewis E Thomas		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 4
Mailing Address 25 Shadow Woods Ln		Transaction ID: SA11A1.5052
City State Zip Code Waupaca WI 54981	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Donation	
Name of Employer Self Occupation Doctor	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mrs. Ruth D Todd		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 4
Mailing Address 710 S Hanley Rd		Transaction ID: SA11A1.4985
City State Zip Code Saint Louis MO 63105	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Donation	
Name of Employer Unknown Occupation	Aggregate Year-to-Date ▼ 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms Marie Tschurwald		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 4
Mailing Address 900 Camelot Dr. Apt 119		Transaction ID: SA11A1.5056
City State Zip Code Harlingen TX 78550	Amount of Each Receipt this Period 255.00	
FEC ID number of contributing federal political committee. C	Donation	
Name of Employer Unknown Occupation	Aggregate Year-to-Date ▼ 255.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	755.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 47
	<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	

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)
CHRISTIAN VOTER PROJECT

A. Full Name (Last, First, Middle Initial) Mr. Jess G Tucher		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 4
Mailing Address PO Box 2323		Transaction ID: SA11A1.5022
City Lakeland	State FL	Zip Code 33806
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Unknown	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Donation

B. Full Name (Last, First, Middle Initial) Mr. Raymond E Vath		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 4
Mailing Address 5009 134th PI NE		Transaction ID: SA11A1.5048
City Bellevue	State WA	Zip Code 98005
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Donation

C. Full Name (Last, First, Middle Initial) Mr. Archie L Wardell		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 4
Mailing Address 740 N Northwest Hwy		Transaction ID: SA11A1.4983
City Park Ridge	State IL	Zip Code 60068
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer Unknown	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Donation

SUBTOTAL of Receipts This Page (optional) ▶	750.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 21 / 47
(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)
CHRISTIAN VOTER PROJECT

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

Mailing Address 8506 SW 45th Blvd.

City State Zip Code
Gainesville FL 32608

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
380.00

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

Transaction ID: SA11A1.5019

Amount of Each Receipt this Period
105.00

Donation

B. Full Name (Last, First, Middle Initial)
Mr. Charles Whitehead

Mailing Address HC 1 Box 1194

City State Zip Code
Payson AZ 85541

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

Name of Employer Occupation
Unknown

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

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

Transaction ID: SA11A1.5058

Amount of Each Receipt this Period
225.00

Donation

C. Full Name (Last, First, Middle Initial)
Mr. Matthew B Wills

Mailing Address PO Box 60849

City State Zip Code
Colorado Springs CO 80960

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

Name of Employer Occupation
N/A Retired Lawyer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

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

Transaction ID: SA11A1.4989

Amount of Each Receipt this Period
500.00

Donation

SUBTOTAL of Receipts This Page (optional) ► **830.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 22 / 47
	(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)
CHRISTIAN VOTER PROJECT

Full Name (Last, First, Middle Initial) A. Mr. Lumley F Wilson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 8 / 2 0 0 4
Mailing Address 184 Chippewa Park Rd		Transaction ID: SA11A1.5011
City State Zip Code Beaver Falls PA 15010	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C	Donation	
Name of Employer Unknown	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Ms Mary Louise Louise Zimmerman		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 4
Mailing Address 508 Woodrow Ave		Transaction ID: SA11A1.5062
City State Zip Code Modesto CA 95350	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Donation	
Name of Employer Unknown	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional) ▶	325.00
TOTAL This Period (last page this line number only) ▶	13496.00

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)

PAGE 23 / 47

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

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

NAME OF COMMITTEE (In Full)
CHRISTIAN VOTER PROJECT

Full Name (Last, First, Middle Initial) A. AAMP		Transaction ID: SB21B.4948 Date of Disbursement 10 / 08 / 2004	
Mailing Address 9127 Antique Way		Amount of Each Disbursement this Period 9099.60	
City Manassas State VA Zip Code 20110	Purpose of Disbursement Postage Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Admiral Envelope		Transaction ID: SB21B.4949 Date of Disbursement 10 / 06 / 2004	
Mailing Address 122 N Langley Rd		Amount of Each Disbursement this Period 2508.33	
City Glen Burnie State MD Zip Code 21060	Purpose of Disbursement Envelopes Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. American Target Advertising		Transaction ID: SB21B.4951 Date of Disbursement 10 / 13 / 2004	
Mailing Address 3625 Surveyer Ct. Suite 43D		Amount of Each Disbursement this Period 8084.88	
City Manassas State VA Zip Code 20110	Purpose of Disbursement Postage Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	19692.81
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

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)
CHRISTIAN VOTER PROJECT

Full Name (Last, First, Middle Initial) A. American Target Advertising		Transaction ID: SB21B.4962 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 4
Mailing Address 3625 Surveyer Ct. Suite 43D		Amount of Each Disbursement this Period 19699.11
City Manassas State VA Zip Code 20110		
Purpose of Disbursement Print/Mailshop Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. American Target Advertising		Transaction ID: SB21B.4950 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 4
Mailing Address 3625 Surveyer Ct. Suite 43D		Amount of Each Disbursement this Period 15065.82
City Manassas State VA Zip Code 20110		
Purpose of Disbursement Mail Fees Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. AMLC		Transaction ID: SB21B.4953 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 4
Mailing Address 3251 Old Lee Hwy, Suite 400		Amount of Each Disbursement this Period 1363.87
City Manassas State VA Zip Code 20110		
Purpose of Disbursement List Rental Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	36128.80
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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)
CHRISTIAN VOTER PROJECT

A. DMP Full Name (Last, First, Middle Initial) Mailing Address 1150 Conrad St. City Hagerstown State MD Zip Code 21740 Purpose of Disbursement Caging Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B.4954 Date of Disbursement: M M / D D / Y Y Y Y 1 1 / 1 1 / 2 0 0 4 Amount of Each Disbursement this Period: 3453.61 Category/Type
--	--	--

B. Foley & Lardner Full Name (Last, First, Middle Initial) Mailing Address 3000 K Street, NW Suite 500 City Washington State DC Zip Code 20007 Purpose of Disbursement Legal Advice Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B.4978 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 4 Amount of Each Disbursement this Period: 510.00 Category/Type
--	--	---

C. Hagerstown Bank Special Acct. Full Name (Last, First, Middle Initial) Mailing Address 83 W. Washington St. City Hagerstown State MD Zip Code 21740 Purpose of Disbursement Direct Mail Check Processing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B.5066 Date of Disbursement: M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 4 Amount of Each Disbursement this Period: 1320.90 Category/Type
---	--	--

SUBTOTAL of Disbursements This Page (optional) ▶	5284.51
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)

PAGE 26 / 47

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

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

NAME OF COMMITTEE (In Full)
CHRISTIAN VOTER PROJECT

Full Name (Last, First, Middle Initial) A. Hagerstown Bank Special Acct.		Transaction ID: SB21B.5348 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 4
Mailing Address 83 W. Washington St.		Amount of Each Disbursement this Period 870.42
City Hagerstown State MD Zip Code 21740	Purpose of Disbursement Fundraising Expense Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. John G. Hoas		Transaction ID: SB21B.4961 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 4
Mailing Address 11910 Parkriver Drive		Amount of Each Disbursement this Period 4217.74
City Manassas State VA Zip Code 20112	Purpose of Disbursement Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. L & E Meridan		Transaction ID: SB21B.4955 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 4
Mailing Address 7400 Fullerton Road, #110		Amount of Each Disbursement this Period 285.71
City Springfield State VA Zip Code 22153	Purpose of Disbursement Printing Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	5373.87
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 27 / 47

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

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

NAME OF COMMITTEE (In Full)
CHRISTIAN VOTER PROJECT

Full Name (Last, First, Middle Initial) A. Mail Fund		Transaction ID: SB21B.4956	
Mailing Address 117 Indian Lane		Date of Disbursement MM / DD / YYYY 11 / 18 / 2004	
City Annapolis	State MD	Zip Code 21403	Amount of Each Disbursement this Period 1231.66
Purpose of Disbursement Postage	Category/ Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. NCS Direct		Transaction ID: SB21B.4957	
Mailing Address 22635 Davis Dr.		Date of Disbursement MM / DD / YYYY 10 / 20 / 2004	
City Sterling	State VA	Zip Code 20166	Amount of Each Disbursement this Period 400.00
Purpose of Disbursement List Rental	Category/ Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Sam K Pate Associates, Inc		Transaction ID: SB21B.4958	
Mailing Address 4000 Graves Mill Road		Date of Disbursement MM / DD / YYYY 10 / 18 / 2004	
City Lynchburg	State VA	Zip Code 24502	Amount of Each Disbursement this Period 1485.71
Purpose of Disbursement Printing	Category/ Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)	3117.37
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 28 / 47

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

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

NAME OF COMMITTEE (In Full)
CHRISTIAN VOTER PROJECT

Full Name (Last, First, Middle Initial)

A. The Viguerie Company

Mailing Address 3625 Surveyor Ct.
Suite 400

City Manassas State VA Zip Code 20110

Purpose of Disbursement
List Rental

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.4959

Date of Disbursement

/ /

Amount of Each Disbursement this Period

20349.59

SUBTOTAL of Disbursements This Page (optional)

20349.59

TOTAL This Period (last page this line number only)

89946.95

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

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

FOR LINE NUMBER:
(check only one)

PAGE 29 / 47

<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

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)
CHRISTIAN VOTER PROJECT

Full Name (Last, First, Middle Initial) A. COBURN FOR SENATE COMMITTEE		Transaction ID: SB23.4947 Date of Disbursement																				
Mailing Address 3300 N OKMULGEE ST PO BOX 977		<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>1</td><td>1</td><td>/</td><td>0</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>4</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	1	/	2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	0	1	/	2	0	0	4													
City MUSKOGEE	State OK	Zip Code 74402																				
Purpose of Disbursement Donation		Amount of Each Disbursement this Period																				
Candidate Name		<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																			
1000.00																						
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: OK	District: 00																					

Full Name (Last, First, Middle Initial) B. REPUBLICAN NATIONAL COMMITTEE		Transaction ID: SB23.4966 Date of Disbursement																				
Mailing Address 310 FIRST STREET SE		<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>1</td><td>0</td><td>/</td><td>2</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>4</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	6	/	2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
1	0	/	2	6	/	2	0	0	4													
City WASHINGTON	State DC	Zip Code 20003																				
Purpose of Disbursement Donation		Amount of Each Disbursement this Period																				
Candidate Name		<table border="1"><tr><td>1500.00</td></tr></table>	1500.00																			
1500.00																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State:	District:																					

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>2500.00</td></tr></table>	2500.00
2500.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td>2500.00</td></tr></table>	2500.00
2500.00		

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)
CHRISTIAN VOTER PROJECT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Admiral Envelope	Nature of Debt (Purpose): Printing
Mailing Address 122 N Langley Rd	
City State ZIP Code Glen Burnie MD 21060	

Outstanding Balance Beginning This Period 0.05	Transaction ID: SD10.5256	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 0.05

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Admiral Envelope	Nature of Debt (Purpose): Print/Mailshop
Mailing Address 122 N Langley Rd	
City State ZIP Code Glen Burnie MD 21060	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10.5287	
Amount Incurred This Period 393.58	Payment This Period 0.00	Outstanding Balance at Close of This Period 393.58

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor AMLC	Nature of Debt (Purpose): List Rental
Mailing Address 3251 Old Lee Hwy, Suite 400	
City State ZIP Code Manassas VA 20110	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10.5296	
Amount Incurred This Period 5460.14	Payment This Period 0.00	Outstanding Balance at Close of This Period 5460.14

1) SUBTOTALS This Period This Page (optional).....	▶	5853.77
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) 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)
CHRISTIAN VOTER PROJECT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor ATA Postage	Nature of Debt (Purpose): Postage
Mailing Address 3625 Surveyer Ct. Suite 43D	
City State ZIP Code Manassas VA 20110	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10.5291	
Amount Incurred This Period 4094.44	Payment This Period 0.00	Outstanding Balance at Close of This Period 4094.44

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor ATA Prepay	Nature of Debt (Purpose): Print/Mailshop
Mailing Address 3625 Surveyer Ct. Suite 43D	
City State ZIP Code Manassas VA 20110	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10.5289	
Amount Incurred This Period 1853.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1853.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor DMP	Nature of Debt (Purpose): Caging
Mailing Address 1150 Conrad St.	
City State ZIP Code Hagerstown MD 21740	

Outstanding Balance Beginning This Period 2590.26	Transaction ID: SD10.5375	
Amount Incurred This Period 0.00	Payment This Period 2590.26	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional).....	5947.44
2) TOTALS This Period (last page this line number only).....	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) 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)
CHRISTIAN VOTER PROJECT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor DMP	Nature of Debt (Purpose): Caging
Mailing Address 1150 Conrad St.	
City State ZIP Code Hagerstown MD 21740	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10.5297	
Amount Incurred This Period 2000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor L & E Meridan	Nature of Debt (Purpose): Print/Mailshop
Mailing Address 7400 Fullerton Road, #110	
City State ZIP Code Springfield VA 22153	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10.5290	
Amount Incurred This Period 1878.15	Payment This Period 0.00	Outstanding Balance at Close of This Period 1878.15

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor NCS Direct	Nature of Debt (Purpose): Data
Mailing Address 22635 Davis Dr.	
City State ZIP Code Sterling VA 20166	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10.5298	
Amount Incurred This Period 1956.25	Payment This Period 0.00	Outstanding Balance at Close of This Period 1956.25

1) SUBTOTALS This Period This Page (optional).....	▶	5834.40
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) 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)
CHRISTIAN VOTER PROJECT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Viguerie Company			Nature of Debt (Purpose): List Rental
Mailing Address 3625 Surveyor Ct. Suite 400			
City	State	ZIP Code	
Manassas	VA	20110	

Outstanding Balance Beginning This Period		Transaction ID: SD10.5385	
12925.68			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	12925.68	0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor TRS Direct			Nature of Debt (Purpose): Print/Mailshop
Mailing Address 148 Graves Mill Rd			
City	State	ZIP Code	
Lynchburg	VA	24502	

Outstanding Balance Beginning This Period		Transaction ID: SD10.5359	
2500.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	2500.00	

1) SUBTOTALS This Period This Page (optional).....	2500.00
2) TOTALS This Period (last page this line number only).....	20135.61
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) CHRISTIAN VOTER PROJECT	FEC IDENTIFICATION NUMBER ▼ C C00278283
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Admiral Envelope

Mailing Address
122 N Langley Rd

City Glen Burnie	State MD	Zip Code 21060
---------------------	-------------	-------------------

Purpose of Expenditure Print/mailhouse	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
GEORGE W W BUSH

Calendar Year-To-Date Per Election for Office Sought	254601.43
---	-----------

Date

M M 1 0	D D 0 6	Y Y Y Y 2 0 0 4
------------	------------	--------------------

Amount

1881.27

Transaction ID: SE24.5192

Office Sought: House State: _____
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2004
 Other (specify) : _____

Full Name (Last, First, Middle, Initial) of Payee
American Target Advertising

Mailing Address
3625 Surveyer Ct.
Suite 43D

City Manassas	State VA	Zip Code 20110
------------------	-------------	-------------------

Purpose of Expenditure Postage	Category/ Type
-----------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
GEORGE W W BUSH

Calendar Year-To-Date Per Election for Office Sought	260665.03
---	-----------

Date

M M 1 0	D D 1 3	Y Y Y Y 2 0 0 4
------------	------------	--------------------

Amount

6063.60

Transaction ID: SE24.5194

Office Sought: House State: _____
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2004
 Other (specify) : _____

(a) SUBTOTAL of Itemized Independent Expenditures	7944.87
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Beverly Sheldon
Signature

Date

M M 0 2	D D 2 8	Y Y Y Y 2 0 0 6
------------	------------	--------------------

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) CHRISTIAN VOTER PROJECT	FEC IDENTIFICATION NUMBER ▼ C C00278283
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
American Target Advertising

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 4

Mailing Address
3625 Surveyer Ct.
Suite 43D

Amount
14751.81

City State Zip Code
Manassas VA 20110

Transaction ID: SE24.5195
Office Sought: House State: _____
 Senate District: 03
 Presidential

Purpose of Expenditure Category/Type
Print/Mailshop

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:
GEORGE W W BUSH

Disbursement For: Primary General 2004
 Other (specify) : _____

Calendar Year-To-Date Per Election for Office Sought
281445.91

Full Name (Last, First, Middle, Initial) of Payee
American Target Advertising

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

Mailing Address
3625 Surveyer Ct.
Suite 43D

Amount
24710.82

City State Zip Code
Manassas VA 20110

Transaction ID: SE24.5196
Office Sought: House State: _____
 Senate District: 03
 Presidential

Purpose of Expenditure Category/Type
Mail Fees

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:
GEORGE W W BUSH

Disbursement For: Primary General 2004
 Other (specify) : _____

Calendar Year-To-Date Per Election for Office Sought
306371.02

(a) SUBTOTAL of Itemized Independent Expenditures	39462.63
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Beverly Sheldon
Signature

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

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) CHRISTIAN VOTER PROJECT	FEC IDENTIFICATION NUMBER C C00278283
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
AMLC

Mailing Address
3251 Old Lee Hwy,
Suite 400

City Manassas	State VA	Zip Code 20110
------------------	-------------	-------------------

Purpose of Expenditure List Rental	Category/ Type
---------------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
GEORGE W W BUSH

Calendar Year-To-Date Per Election for Office Sought	261687.91
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 0 4

Amount
1022.88

Transaction ID: SE24.5198

Office Sought: House State: _____
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2004
 Other (specify) : _____

Full Name (Last, First, Middle, Initial) of Payee
DMP

Mailing Address
1150 Conrad St.

City Hagerstown	State MD	Zip Code 21740
--------------------	-------------	-------------------

Purpose of Expenditure Caging	Category/ Type
----------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
GEORGE W W BUSH

Calendar Year-To-Date Per Election for Office Sought	252720.16
---	-----------

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

Amount
192.48

Transaction ID: SE24.5376

Office Sought: House State: _____
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2004
 Other (specify) : _____

(a) SUBTOTAL of Itemized Independent Expenditures	1215.36
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Beverly Sheldon
Signature

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

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) CHRISTIAN VOTER PROJECT	FEC IDENTIFICATION NUMBER C C00278283
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
DMP

Mailing Address
1150 Conrad St.

City Hagerstown	State MD	Zip Code 21740
--------------------	-------------	-------------------

Purpose of Expenditure Caging	Category/ Type
----------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
GEORGE W W BUSH

Calendar Year-To-Date Per Election for Office Sought	266694.10
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 4

Amount
428.58

Transaction ID: SE24.5377

Office Sought: House State: _____
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2004
 Other (specify) : _____

Full Name (Last, First, Middle, Initial) of Payee
DMP

Mailing Address
1150 Conrad St.

City Hagerstown	State MD	Zip Code 21740
--------------------	-------------	-------------------

Purpose of Expenditure Caging	Category/ Type
----------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
GEORGE W W BUSH

Calendar Year-To-Date Per Election for Office Sought	281660.20
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 4

Amount
214.29

Transaction ID: SE24.5378

Office Sought: House State: _____
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2004
 Other (specify) : _____

(a) SUBTOTAL of Itemized Independent Expenditures	642.87
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Beverly Sheldon
Signature

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

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) CHRISTIAN VOTER PROJECT	FEC IDENTIFICATION NUMBER C C00278283
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
DMP

Mailing Address
1150 Conrad St.

City Hagerstown	State MD	Zip Code 21740
--------------------	-------------	-------------------

Purpose of Expenditure Caging	Category/ Type
----------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
GEORGE W W BUSH

Calendar Year-To-Date Per Election for Office Sought	306840.19
---	-----------

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

Amount
469.17

Transaction ID: SE24.5379

Office Sought: House State: _____
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2004
 Other (specify) : _____

Full Name (Last, First, Middle, Initial) of Payee
DMP

Mailing Address
1150 Conrad St.

City Hagerstown	State MD	Zip Code 21740
--------------------	-------------	-------------------

Purpose of Expenditure Caging	Category/ Type
----------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
GEORGE W W BUSH

Calendar Year-To-Date Per Election for Office Sought	307268.77
---	-----------

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

Amount
428.58

Transaction ID: SE24.5380

Office Sought: House State: _____
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2004
 Other (specify) : _____

(a) SUBTOTAL of Itemized Independent Expenditures	897.75
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Beverly Sheldon
Signature

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

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) CHRISTIAN VOTER PROJECT	FEC IDENTIFICATION NUMBER C C00278283
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
DMP

Mailing Address
1150 Conrad St.

City State Zip Code
Hagerstown MD 21740

Purpose of Expenditure Category/Type
Caging

Name of Federal Candidate supported or Opposed by expenditure:
GEORGE W W BUSH

Calendar Year-To-Date Per Election for Office Sought 307483.06

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

Amount
214.29

Transaction ID: SE24.5381

Office Sought: House State: _____
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2004
 Other (specify) : _____

Full Name (Last, First, Middle, Initial) of Payee
DMP

Mailing Address
1150 Conrad St.

City State Zip Code
Hagerstown MD 21740

Purpose of Expenditure Category/Type
Caging

Name of Federal Candidate supported or Opposed by expenditure:
GEORGE W W BUSH

Calendar Year-To-Date Per Election for Office Sought 313930.07

Date
M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 0 4

Amount
214.29

Transaction ID: SE24.5382

Office Sought: House State: _____
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2004
 Other (specify) : _____

(a) SUBTOTAL of Itemized Independent Expenditures	428.58
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Beverly Sheldon
Signature

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

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) CHRISTIAN VOTER PROJECT	FEC IDENTIFICATION NUMBER C C00278283
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
DMP

Mailing Address
1150 Conrad St.

City Hagerstown	State MD	Zip Code 21740
--------------------	-------------	-------------------

Purpose of Expenditure Caging	Category/ Type
----------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
GEORGE W W BUSH

Calendar Year-To-Date Per Election for Office Sought	317393.54
---	-----------

Date
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 4

Amount
214.29

Transaction ID: SE24.5383

Office Sought: House State: _____
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2004
 Other (specify) : _____

Full Name (Last, First, Middle, Initial) of Payee
DMP

Mailing Address
1150 Conrad St.

City Hagerstown	State MD	Zip Code 21740
--------------------	-------------	-------------------

Purpose of Expenditure Caging	Category/ Type
----------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
GEORGE W W BUSH

Calendar Year-To-Date Per Election for Office Sought	322760.54
---	-----------

Date
M M / D D / Y Y Y Y
1 1 / 1 1 / 2 0 0 4

Amount
214.29

Transaction ID: SE24.5384

Office Sought: House State: _____
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2004
 Other (specify) : _____

(a) SUBTOTAL of Itemized Independent Expenditures	428.58
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Beverly Sheldon
Signature

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

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) CHRISTIAN VOTER PROJECT	FEC IDENTIFICATION NUMBER C C00278283
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
John G. Hoas

Mailing Address
11910 Parkriver Drive

City Manassas	State VA	Zip Code 20112
------------------	-------------	-------------------

Purpose of Expenditure Print/Mailshop	Category/ Type
--	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
GEORGE W W BUSH

Calendar Year-To-Date Per Election for Office Sought	265965.52
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 4

Amount
3163.32

Transaction ID: SE24.5193

Office Sought: House State: _____
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2004
 Other (specify) : _____

Full Name (Last, First, Middle, Initial) of Payee
NCS Direct

Mailing Address
22635 Davis Dr.

City Sterling	State VA	Zip Code 20166
------------------	-------------	-------------------

Purpose of Expenditure Data	Category/ Type
--------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
GEORGE W W BUSH

Calendar Year-To-Date Per Election for Office Sought	266265.52
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 4

Amount
300.00

Transaction ID: SE24.5200

Office Sought: House State: _____
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2004
 Other (specify) : _____

(a) SUBTOTAL of Itemized Independent Expenditures	3463.32
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Beverly Sheldon
Signature

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

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) CHRISTIAN VOTER PROJECT	FEC IDENTIFICATION NUMBER C C00278283
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Salem Radio Network

Mailing Address
6400 N. Beltline Rd
#220

City Irving	State TX	Zip Code 75063
----------------	-------------	-------------------

Purpose of Expenditure Radio Ad	Category/ Type
------------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
GEORGE W W BUSH

Calendar Year-To-Date Per Election for Office Sought	313715.78
---	-----------

Date
M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 0 4

Amount
3004.00

Transaction ID: SE24.4941

Office Sought: House State: _____
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2004
 Other (specify) : _____

Full Name (Last, First, Middle, Initial) of Payee
Sam K Pate Associates, Inc

Mailing Address
4000 Graves Mill Road

City Lynchburg	State VA	Zip Code 24502
-------------------	-------------	-------------------

Purpose of Expenditure Print/Mailshop	Category/ Type
--	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
GEORGE W W BUSH

Calendar Year-To-Date Per Election for Office Sought	262802.20
---	-----------

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

Amount
1114.29

Transaction ID: SE24.5191

Office Sought: House State: _____
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2004
 Other (specify) : _____

(a) SUBTOTAL of Itemized Independent Expenditures	4118.29
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Beverly Sheldon
Signature

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

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) CHRISTIAN VOTER PROJECT	FEC IDENTIFICATION NUMBER C C00278283
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
The Viguerie Company

Mailing Address
3625 Surveyor Ct.
Suite 400

City	State	Zip Code
Manassas	VA	20110

Purpose of Expenditure List Rental	Category/ Type
---------------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
GEORGE W W BUSH

Calendar Year-To-Date Per Election for Office Sought	310711.78
---	-----------

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

Amount
3228.72

Transaction ID: SE24.5403

Office Sought: House State: _____
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2004
 Other (specify) : _____

Full Name (Last, First, Middle, Initial) of Payee
The Viguerie Company

Mailing Address
3625 Surveyor Ct.
Suite 400

City	State	Zip Code
Manassas	VA	20110

Purpose of Expenditure List Rental	Category/ Type
---------------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
GEORGE W W BUSH

Calendar Year-To-Date Per Election for Office Sought	317179.25
---	-----------

Date
M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 0 4

Amount
3249.18

Transaction ID: SE24.5398

Office Sought: House State: _____
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2004
 Other (specify) : _____

(a) SUBTOTAL of Itemized Independent Expenditures	6477.90
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Beverly Sheldon
Signature

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

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) CHRISTIAN VOTER PROJECT	FEC IDENTIFICATION NUMBER C C00278283
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
The Viguerie Company

Mailing Address
3625 Surveyor Ct.
Suite 400

City	State	Zip Code
Manassas	VA	20110

Purpose of Expenditure List Rental	Category/ Type
---------------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
GEORGE W W BUSH

Calendar Year-To-Date Per Election for Office Sought	320338.67
---	-----------

Date
M M / D D / Y Y Y Y
1 1 / 0 4 / 2 0 0 4

Amount
2945.13

Transaction ID: SE24.5399

Office Sought: House State: _____
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2004
 Other (specify) : _____

Full Name (Last, First, Middle, Initial) of Payee
The Viguerie Company

Mailing Address
3625 Surveyor Ct.
Suite 400

City	State	Zip Code
Manassas	VA	20110

Purpose of Expenditure List Rental	Category/ Type
---------------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
GEORGE W W BUSH

Calendar Year-To-Date Per Election for Office Sought	321193.46
---	-----------

Date
M M / D D / Y Y Y Y
1 1 / 0 4 / 2 0 0 4

Amount
854.79

Transaction ID: SE24.5400

Office Sought: House State: _____
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2004
 Other (specify) : _____

(a) SUBTOTAL of Itemized Independent Expenditures	3799.92
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Beverly Sheldon
Signature

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

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) CHRISTIAN VOTER PROJECT	FEC IDENTIFICATION NUMBER ▼ C C00278283
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
The Viguerie Company

Mailing Address
3625 Surveyor Ct.
Suite 400

City	State	Zip Code
Manassas	VA	20110

Purpose of Expenditure List rental	Category/ Type
---------------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
GEORGE W W BUSH

Calendar Year-To-Date Per Election for Office Sought	322546.25
---	-----------

Date

M M 1 1	D D 0 9	Y Y Y Y 2 0 0 4
------------	------------	--------------------

Amount

1352.79

Transaction ID: SE24.5401

Office Sought: House State: _____
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2004
 Other (specify) : _____

Full Name (Last, First, Middle, Initial) of Payee
The Viguerie Company

Mailing Address
3625 Surveyor Ct.
Suite 400

City	State	Zip Code
Manassas	VA	20110

Purpose of Expenditure List Rental	Category/ Type
---------------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
GEORGE W W BUSH

Calendar Year-To-Date Per Election for Office Sought	324055.61
---	-----------

Date

M M 1 1	D D 1 1	Y Y Y Y 2 0 0 4
------------	------------	--------------------

Amount

1295.07

Transaction ID: SE24.5402

Office Sought: House State: _____
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2004
 Other (specify) : _____

(a) SUBTOTAL of Itemized Independent Expenditures	2647.86
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	71527.93

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Beverly Sheldon
Signature

Date

M M 0 2	D D 2 8	Y Y Y Y 2 0 0 6
------------	------------	--------------------

Image# 26970077214

Form/Schedule: **F3XA**

Please look for the CVP response to FEC letter dated April 8, 2005 concerning best efforts for this period in the F99. We have written all of the donors with over \$200.00 and added the Employer and Occupation of all those who have responded.

Transaction ID:

Form/Schedule: **SD10**

Money is not available to pay for a mailing until the money comes in from the mailing.

Transaction ID: **SD10.5256**

Image# 26970077215

Form/Schedule: **SD10** Money is not available to pay for a mailing until the money comes in from the mailing
Transaction ID: **SD10.5298**

Form/Schedule: **SE24** These expenditures have been allocated to specific letters and placed in the correct quarter of when the mailing
Transaction ID: **SE24.5192** occurred.
