

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) FREEDOM PROJECT; THE

ADDRESS (number and street) 509 7th Street NW Third Floor Washington DC 20004

2. FEC IDENTIFICATION NUMBER C00305805 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 06 01 2006 through 06 30 2006

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 Margee Dotter Clancy

Signature of Treasurer Electronically Filed by Margee Dotter Clancy Date 07 20 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
FREEDOM PROJECT; THE

Report Covering the Period: From:

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	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>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		148979.97
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	369183.04									
(c) Total Receipts (from Line 19)	261333.24	759238.64								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	630516.28	908218.61								
7. Total Disbursements (from Line 31)	172595.93	450298.26								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	457920.35	457920.35								
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)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
FREEDOM PROJECT; THE

Report Covering the Period: From:

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

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	107333.24	293833.24
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized		
(iii) TOTAL (add Lines 11(a)(i) and (ii)	107333.24	293833.24
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	154000.00	464500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	261333.24	758333.24
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	905.40
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))	261333.24	759238.64
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	261333.24	759238.64

DETAILED SUMMARY PAGE

of Disbursements

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.....	46089.73	200939.32
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	46089.73	200939.32
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	126506.20	249358.94
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	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))..	172595.93	450298.26
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	172595.93	450298.26

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)	261333.24	758333.24
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	261333.24	758333.24
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	46089.73	200939.32
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	905.40
38. Net Operating Expenditures (subtract Line 37 from Line 36)	46089.73	200033.92

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 / 50
	<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)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial)
Alameel Family Partners

Mailing Address 5020 Tanbark

City State Zip Code
Dallas TX 75229

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2006

Transaction ID: SA11A1.5217

Amount of Each Receipt this Period
5000.00

Partnership Contribution

B. Full Name (Last, First, Middle Initial)
Mr. Mark Alameel

Mailing Address 5020 Tanbark

City State Zip Code
Dallas TX 75229

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

Name of Employer Occupation
Alameel Family Partners Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2006

Transaction ID: SA11A1.5217.0

Amount of Each Receipt this Period
5000.00

Contribution

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Mr. John R. Albers

Mailing Address 3825 Gillon

City State Zip Code
Dallas TX 75205

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

Name of Employer Occupation
Fairfield Enterprises, Inc. President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2006

Transaction ID: SA11A1.5221

Amount of Each Receipt this Period
5000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	10000.00
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 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Ms. Sevima Beal		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006	
Mailing Address 3816 Stratford		Transaction ID: SA11A1.5208	
City State Zip Code Dallas TX 75205		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Homemaker	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) B. Mr. Alan J. Bernon		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006	
Mailing Address 4301 Belclaire Avenue		Transaction ID: SA11A1.5223	
City State Zip Code Dallas TX 75205		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Dean Foods	Occupation President, Dairy Group		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) C. Mrs. Emeline Boich		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006	
Mailing Address 17 S. High Street		Transaction ID: SA11A1.5153	
City State Zip Code Columbus OH 43215		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Homemaker	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

SUBTOTAL of Receipts This Page (optional) ▶	15000.00
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 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Mr. Wayne Boich		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006
Mailing Address 17 S. High Street		Transaction ID: SA11A1.5151
City Columbus State OH Zip Code 43215	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Boich Companies Occupation Retired President & CEO	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Wayne Michael Boich		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006
Mailing Address 400 Alton Road		Transaction ID: SA11A1.5155
City Miami Beach State FL Zip Code 33139	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Boich Companies Occupation President	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mrs. Christina Melton Crain		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006
Mailing Address 5521 Greenville Avenue		Transaction ID: SA11A1.5228
City Dallas State TX Zip Code 75206	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Christina Melton Crain P.-C. Occupation Attorney	Aggregate Year-to-Date ▼ 2500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	12500.00
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 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial)
Mr. Nate E. Crain

Mailing Address 5521 Greenville Avenue

City State Zip Code
Dallas TX 75206

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

Name of Employer
Crain Info Systems, Inc. Occupation
President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 30 / 2006

Transaction ID: SA11A1.5225

Amount of Each Receipt this Period
2500.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. Gregg L. Engles

Mailing Address 2515 McKinney Avenue

City State Zip Code
Dallas TX 75201

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

Name of Employer
Dean Foods Occupation
Chairman

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 30 / 2006

Transaction ID: SA11A1.5232

Amount of Each Receipt this Period
5000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Stevan Hammond

Mailing Address 9346 Sunnybrook Lane

City State Zip Code
Dallas TX 75220

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

Name of Employer
Allied Marketing Occupation
CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 30 / 2006

Transaction ID: SA11A1.5234

Amount of Each Receipt this Period
5000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	12500.00
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 / 50
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Mr. Gregg Hartley		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 700 13th Street, NW		Transaction ID: SA11A1.5320
City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Cassidy & Associates	Occupation COO & Vice Chairman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) B. Ms. Cinda Cree Hicks		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 10000 Hollow Way		Transaction ID: SA11A1.5205
City State Zip Code Dallas TX 75229	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Mr. Thomas O. Hicks		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 100 Crescent Court		Transaction ID: SA11A1.5238
City State Zip Code Dallas TX 75201	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Hicks Holding	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional) ▶	12500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial)
Mr. Al G. Hill

Mailing Address 1601 Elm Street

City State Zip Code
Dallas TX 75229

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

Name of Employer Hill Development Occupation Investor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2006

Transaction ID: SA11A1.5212

Amount of Each Receipt this Period
5000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. Joseph Jurson

Mailing Address 13 Tribrook

City State Zip Code
South Salem NY 10590

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

Name of Employer Self Occupation Artist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
06 / 14 / 2006

Transaction ID: SA11A1.5286

Amount of Each Receipt this Period
1000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Edward Samuel Kutler

Mailing Address 6405 Treetop Circle

City State Zip Code
Columbia MD 21045

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

Name of Employer Clark & Weinstock Occupation Managing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
06 / 14 / 2006

Transaction ID: SA11A1.5282

Amount of Each Receipt this Period
1000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	7000.00
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 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial) Mr. Marc Lampkin		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 6
Mailing Address 1133 Connecticut Avenue, NW 5th Floor		Transaction ID: SA11A1.5288
City State Zip Code Washington DC 20036	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Quinn Gillespie & Associates	Occupation Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

B. Full Name (Last, First, Middle Initial) Loeffler Tuggey Pauerstein Rosenthal LLP		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 755 E. Mulberry Suite 200		Transaction ID: SA11A1.5158
City State Zip Code San Antonio TX 78212	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C		Partnership Contribution
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

C. Full Name (Last, First, Middle Initial) Mr. Robert A. Rosenthal		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 755 E. Mulberry Suite 200		Transaction ID: SA11A1.5158.0
City State Zip Code San Antonio TX 78212	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Contribution [MEMO ITEM]
Name of Employer Loeffler Tuggey Pauerstein	Occupation Rosenthal LLP - Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	4500.00
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 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial)
Mr. Jonathan D. Pauerstein

Mailing Address 755 E. Mulberry Suite 200

City San Antonio State TX Zip Code 78212

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

Name of Employer Loeffler Tuggey Pauerstein Occupation Rosenthal, LLP - Partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2006

Transaction ID: SA11A1.5158.1

Amount of Each Receipt this Period
1000.00

Contribution

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Mr. David Lugar

Mailing Address 1133 Connecticut Ave., NW 5th Floor

City Washington State DC Zip Code 20036

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

Name of Employer Quinn Gillespie & Associates Occupation Lobbyist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
06 / 14 / 2006

Transaction ID: SA11A1.5290

Amount of Each Receipt this Period
1000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Andrew K. Maloney

Mailing Address 3020 Macomb Street, NW

City Washington State DC Zip Code 20008

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

Name of Employer Federalist Group Occupation Managing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2006

Transaction ID: SA11A1.5173

Amount of Each Receipt this Period
2500.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	3500.00
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 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial)
Mr. John R. Muse

Mailing Address 4800 Preston Road

City State Zip Code
Dallas TX 75205

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

Name of Employer Occupation
HM Capital Partners Chairman

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2833.24

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 30 / 2006

Transaction ID: SA11A1.5322

Amount of Each Receipt this Period
2833.24

In-kind - Fundraising Food & Beverage

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

Mailing Address 14926 Redwood Bend Trail

City State Zip Code
Houston TX 77062

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

Name of Employer Occupation
Yellow Cab of Greater Houston President & GM

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 30 / 2006

Transaction ID: SA11A1.5199

Amount of Each Receipt this Period
2500.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Barney J. Skladany, Jr.

Mailing Address 1333 New Hampshire Avenue, NW

City State Zip Code
Washington DC 20036

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

Name of Employer Occupation
Akin Gump Lobbyist

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

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 19 / 2006

Transaction ID: SA11A1.5250

Amount of Each Receipt this Period
1000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	6333.24
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 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial)
Mr. Sheldon Stein

Mailing Address 4662 Meadowood

City State Zip Code
Dallas TX 75220

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

Name of Employer Occupation
Bear Stearns Senior Managing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2006

Transaction ID: SA11A1.5240

Amount of Each Receipt this Period
5000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. Raymond K. Turner

Mailing Address 1406 Hays Street

City State Zip Code
Houston TX 77009

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

Name of Employer Occupation
Yellow Cab Texas Taxi Inc. President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2006

Transaction ID: SA11A1.5203

Amount of Each Receipt this Period
2500.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mrs. Herb B. Vest

Mailing Address 16434 Ashbourne Drive

City State Zip Code
Dallas TX 75248

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

Name of Employer Occupation
True.com CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2006

Transaction ID: SA11A1.5210

Amount of Each Receipt this Period
5000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	12500.00
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 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial)
Mr. William Walters

Mailing Address 625 Slaters Lane

City State Zip Code
Alexandria VA 22314

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

Name of Employer
Acute Long Term Hosp. Ass-oc.

Occupation
CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 14 / 2006

Transaction ID: SA11A1.5284

Amount of Each Receipt this Period
1000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. Jerry Williamson

Mailing Address 6700 Denton Drive

City State Zip Code
Dallas TX 75235

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

Name of Employer
Williamson Printing Corp.

Occupation
President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2006

Transaction ID: SA11A1.5245

Amount of Each Receipt this Period
5000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Pete Wittmann

Mailing Address 4814 Kelsey

City State Zip Code
Dallas TX 75229

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

Name of Employer
Self

Occupation
Investments

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2006

Transaction ID: SA11A1.5247

Amount of Each Receipt this Period
5000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	11000.00
TOTAL This Period (last page this line number only)	▶	107333.24

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 / 50
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial)
ACCENTURE PAC

Mailing Address 800 Connecticut Ave NW

City State Zip Code
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00300707

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 30 / 2006

Transaction ID: SA11C.5215

Amount of Each Receipt this Period
5000.00

Contribution

B. Full Name (Last, First, Middle Initial)
AKIN, GUMP, STRAUSS, HAUER & FELD LLP CIVIC ACTION COMMITTEE

Mailing Address 1333 NEW HAMPSHIRE AVE/NW STE 400

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00104901

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 30 / 2006

Transaction ID: SA11C.5260

Amount of Each Receipt this Period
5000.00

Contribution

C. Full Name (Last, First, Middle Initial)
AMERICA'S COMMUNITY BANKERS COMMUNITY CAMPAIGN COMMITTEE

Mailing Address 900 19th St. NW Suite 400

City State Zip Code
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00001875

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 19 / 2006

Transaction ID: SA11C.5252

Amount of Each Receipt this Period
5000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	15000.00
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 18 / 50
	(check only one)
<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial)
AMERICAN HEALTH CARE ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1201 L Street NW

City State Zip Code
Washington DC 20005

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2006

Transaction ID: SA11C.5181

Amount of Each Receipt this Period
5000.00

Contribution

B. Full Name (Last, First, Middle Initial)
AMERICAN HOSPITAL ASSOCIATION PAC

Mailing Address 325 Seventh Street NW
Suite 700

City State Zip Code
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00106146

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2006

Transaction ID: SA11C.5177

Amount of Each Receipt this Period
5000.00

Contribution

C. Full Name (Last, First, Middle Initial)
AMERICAN INSURANCE ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1130 Connecticut Avenue NW
Suite 1000

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00103143

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2006

Transaction ID: SA11C.5193

Amount of Each Receipt this Period
2500.00

Contribution

SUBTOTAL of Receipts This Page (optional)	12500.00
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 19 / 50
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial)
AMGEN INC. POLITICAL ACTION COMMITTEE

Mailing Address 555 13th Street
Suite 600 West

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00251876

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

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

Transaction ID: SA11C.5268

Amount of Each Receipt this Period
5000.00

Contribution

B. Full Name (Last, First, Middle Initial)
ASSOCIATED BUILDERS AND CONTRACTORS PAC

Mailing Address 4250 North Fairfax Drive 9th Floor

City Arlington State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00010421

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

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

Transaction ID: SA11C.5280

Amount of Each Receipt this Period
5000.00

Contribution

C. Full Name (Last, First, Middle Initial)
AUCTION MARKETS POLITICAL ACTION COMMITTEE OF THE CHICAGO BOARD OF TRADE A/K/A AUCTION

Mailing Address 1455 PENNSYLVANIA AVENUE NW
SUITE 1225

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00059832

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

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

Transaction ID: SA11C.5264

Amount of Each Receipt this Period
5000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	15000.00
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 / 50
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. AUTOMOTIVE FREE INTERNATIONAL TRADE PAC		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 1625 Prince Street Suite 225		Transaction ID: SA11C.5169
City State Zip Code Alexandria VA 22314	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00250399	Contribution	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. BANK OF AMERICA CORPORATION FEDERAL POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 100 North Tryon Street		Transaction ID: SA11C.5168
City State Zip Code Charlotte NC 28255	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00364778	Contribution	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. BOEING POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 1200 Wilson Blvd		Transaction ID: SA11C.5188
City State Zip Code Arlington VA 22209	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00142711	Contribution	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	10000.00
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 21 / 50
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. CALIFORNIA DAIRIES INC FEDERAL POLITICAL ACTION COMMITTEE		Date of Receipt MM / DD / YYYY 06 / 30 / 2006
Mailing Address PO BOX 2198		Transaction ID: SA11C.5197
City	State	Zip Code
LOS BANOS	CA	93635
FEC ID number of contributing federal political committee. C C00349746		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. CASH AMERICA INTERNATIONAL INC. POLITICAL ACTION COMMITTEE		Date of Receipt MM / DD / YYYY 06 / 30 / 2006
Mailing Address 1600 W. 7th Street		Transaction ID: SA11C.5242
City	State	Zip Code
Fort Worth	TX	76102
FEC ID number of contributing federal political committee. C C00275529		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	Contribution (see \$2500 refund 7/18/06)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7500.00	

Full Name (Last, First, Middle Initial) C. CITIGROUP INC. POLITICAL ACTION COMMITTEE-FEDERAL (CITIGROUP PAC-FEDERAL)		Date of Receipt MM / DD / YYYY 06 / 30 / 2006
Mailing Address 1101 Pennsylvania Ave. NW #1000		Transaction ID: SA11C.5184
City	State	Zip Code
Washington	DC	20004
FEC ID number of contributing federal political committee. C C00008474		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	▶	12500.00
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 22 / 50
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial)
COMCAST CORP. POLITICAL ACTION COMMITTEE

Mailing Address 1500 Market Street
35th Floor

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 30 / 2006

Transaction ID: SA11C.5195

Amount of Each Receipt this Period
5000.00

Contribution

B. Full Name (Last, First, Middle Initial)
DEALERS ELECTION ACTION COMMITTEE OF THE NATIONAL AUTOMOTIVE DEALERS ASSOCIATION

Mailing Address 8400 Westpark Drive

City McLean State VA Zip Code 22102

FEC ID number of contributing federal political committee. **C** C00040998

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 30 / 2006

Transaction ID: SA11C.5186

Amount of Each Receipt this Period
5000.00

Contribution

C. Full Name (Last, First, Middle Initial)
DIAGEO NORTH AMERICA INC. EMPLOYEES' POLITICAL PARTICIPATION COMMITTEE

Mailing Address 750 EAST MAIN STREET
PO BOX 778

City STAMFORD State CT Zip Code 06902

FEC ID number of contributing federal political committee. **C** C00034470

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4000.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 14 / 2006

Transaction ID: SA11C.5270

Amount of Each Receipt this Period
2000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	12000.00
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 23 / 50
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial) DUNN PAC		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address PO Box 40110		Transaction ID: SA11C.5190
City State Zip Code Bellevue WA 98015	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00256131	Contribution	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) FLUOR CORPORATION POLITICAL ACTION COMMITTEE (FLUOR PAC)		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 6
Mailing Address 6700 Las Colinas Boulevard		Transaction ID: SA11C.5274
City State Zip Code Irving TX 75039	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00034132	Contribution	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) FMR CORP. POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 6
Mailing Address 82 Devonshire Street		Transaction ID: SA11C.5278
City State Zip Code Boston MA 02109	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00215046	Contribution	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	11000.00
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 24 / 50
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

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

Mailing Address 333 NORTH SUMMIT STREET 16TH FLOOR

City Toledo State OH Zip Code 43699

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 1 9 / 2 0 0 6

Transaction ID: SA11C.5254

Amount of Each Receipt this Period
 5000.00

Contribution

B. Full Name (Last, First, Middle Initial)
KINDRED HEALTHCARE INC. POLITICAL ACTION COMMITTEE

Mailing Address 680 South Fourth Avenue ONE VENCOR PLACE

City Louisville State KY Zip Code 40202

FEC ID number of contributing federal political committee. **C** C00242271

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 1 9 / 2 0 0 6

Transaction ID: SA11C.5256

Amount of Each Receipt this Period
 2500.00

Contribution

C. Full Name (Last, First, Middle Initial)
KING & SPALDING NONPARTISAN COMMITTEE FOR GOOD GOVERNMENT

Mailing Address 1180 Peachtree Street

City Atlanta State GA Zip Code 30309

FEC ID number of contributing federal political committee. **C** C00204453

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

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

Transaction ID: SA11C.5258

Amount of Each Receipt this Period
 5000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	12500.00
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 25 / 50
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial)
LORILLARD TOBACCO COMPANY PUBLIC AFFAIRS COMMITTEE

Mailing Address 714 Green Valley Rd.

City Greensboro State NC Zip Code 27408

FEC ID number of contributing federal political committee. **C** C00112888

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

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

Transaction ID: SA11C.5266

Amount of Each Receipt this Period
5000.00

Contribution

B. Full Name (Last, First, Middle Initial)
MAGAZINE PUBLISHERS OF AMERICA PAC FKA MAGAZINE PUBLISHES ASSOCIATION PAC

Mailing Address 1211 CONNECTICUT AVENUE NW STE 610

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00035774

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

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

Transaction ID: SA11C.5262

Amount of Each Receipt this Period
2500.00

Contribution

C. Full Name (Last, First, Middle Initial)
NACS POLITICAL ACTION COMMITTEE

Mailing Address 1600 Duke Street

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00126763

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

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

Transaction ID: SA11C.5294

Amount of Each Receipt this Period
5000.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **12500.00**

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 26 / 50		
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 1101 King Street Suite 600		Transaction ID: SA11C.5175
City State Zip Code Alexandria VA 22314	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00144766		Contribution
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. NORTHWESTERN MUTUAL LIFE INSURANCE COMPANY FEDERAL POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 720 E Wisconsin Ave		Transaction ID: SA11C.5183
City State Zip Code Milwaukee WI 53202	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00197095		Contribution (see \$2500 refund 7/18/06)
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7500.00	

Full Name (Last, First, Middle Initial) C. PFIZER INC. PAC		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 6
Mailing Address 235 East 42nd Street		Transaction ID: SA11C.5298
City State Zip Code New York NY 10017	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00016683		Contribution
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional) ▶	15000.00
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 27 / 50
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial)
POWERPAC OF THE EDISON ELECTRIC INSTITUTE

Mailing Address 701 Pennsylvania Avenue NW

City State Zip Code
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00095869

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 14 / 2006

Transaction ID: SA11C.5271

Amount of Each Receipt this Period
1000.00

Contribution

B. Full Name (Last, First, Middle Initial)
SMITHKLINE BEECHAM CORPORATION POLITICAL ACTION COMMITTEE (GLAXOSMITHKLINE PAC)

Mailing Address Five Moore Drive
P.O. Box 13358

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C** C00199703

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2006

Transaction ID: SA11C.5171

Amount of Each Receipt this Period
5000.00

Contribution

C. Full Name (Last, First, Middle Initial)
ST. PAUL TRAVELERS COMPANIES INC. POLITICAL ACTION COMMITTEE (STA PAC), THE

Mailing Address One Tower Square

City State Zip Code
Hartford CT 06183

FEC ID number of contributing federal political committee. **C** C00376376

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 14 / 2006

Transaction ID: SA11C.5292

Amount of Each Receipt this Period
5000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	11000.00
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 28 / 50
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. UNITED STATES STEEL CORPORATION PAC		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 6
Mailing Address 600 Grant Street Room 675		Transaction ID: SA11C.5276
City State Zip Code Pittsburgh PA 15219	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00030676		Contribution
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. UNITED SURGICAL PARTNERS INTERNATIONAL INC POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 15305 Dallas Parkway Suite 1600		Transaction ID: SA11C.5243
City State Zip Code Addison TX 75001	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00402073		Contribution
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) C. VERIZON COMMUNICATION INC GOOD GOVT CLUB		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 1717 Arch Street 47S		Transaction ID: SA11C.5179
City State Zip Code Philadelphia PA 19103	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00186288		Contribution
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional) ▶	10000.00
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 29 / 50	
	(check only one)			
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial)
A. WHOLESALER-DISTRIBUTOR PAC OF THE NATIONAL ASSOCIATION OF WHOLESALER-DISTRIBUTORS

Date of Receipt

Mailing Address 1725 K STREET NW #300

M M / D D / Y Y Y Y
06 / 14 / 2006

City State Zip Code
WASHINGTON DC 20006

Transaction ID: SA11C.5296

FEC ID number of contributing federal political committee. **C** C00109306

Amount of Each Receipt this Period
5000.00

Name of Employer

Occupation

Contribution

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

SUBTOTAL of Receipts This Page (optional)	▶	5000.00
TOTAL This Period (last page this line number only)	▶	154000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Mr. Whitaker Askew		Transaction ID: SB21B.5082 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 6
Mailing Address 3044 R Street, NW		Amount of Each Disbursement this Period 172.93
City Washington State DC Zip Code 20007	Purpose of Disbursement Travel reimbursement Candidate Name Category/Type 001	
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) ▼

Full Name (Last, First, Middle Initial) B. Mr. Whitaker Askew		Transaction ID: SB21B.5096 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6
Mailing Address 3044 R Street, NW		Amount of Each Disbursement this Period 1381.18
City Washington State DC Zip Code 20007	Purpose of Disbursement Salary Candidate Name Category/Type 001	
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) ▼

Full Name (Last, First, Middle Initial) C. Mr. Whitaker Askew		Transaction ID: SB21B.5143 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 3044 R Street, NW		Amount of Each Disbursement this Period 1381.18
City Washington State DC Zip Code 20007	Purpose of Disbursement Salary Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	2935.29
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Capitol Hill Club		Transaction ID: SB21B.5084 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 6
Mailing Address 300 First Street, SE		Amount of Each Disbursement this Period 607.20
City Washington State DC Zip Code 20003	Purpose of Disbursement Mtg Exp - Food & Bev. 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) ▼
Purpose of Disbursement Accounting service Candidate Name		

Full Name (Last, First, Middle Initial) B. Clark, Schaefer, Hackett & Co.		Transaction ID: SB21B.5086 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 6
Mailing Address 160 North Breiel Blvd.		Amount of Each Disbursement this Period 195.00
City Middletown State OH Zip Code 45042	Purpose of Disbursement Accounting service 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) ▼
Purpose of Disbursement Payroll processing Candidate Name		

Full Name (Last, First, Middle Initial) C. Clark, Schaefer, Hackett & Co.		Transaction ID: SB21B.5100 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6
Mailing Address 160 North Breiel Blvd.		Amount of Each Disbursement this Period 45.00
City Middletown State OH Zip Code 45042	Purpose of Disbursement Payroll processing 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) ▼
Purpose of Disbursement Payroll processing Candidate Name		

SUBTOTAL of Disbursements This Page (optional) ▶	847.20
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)

PAGE 32 / 50

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Clark, Schaefer, Hackett & Co.		Transaction ID: SB21B.5149 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 160 North Breiel Blvd.		Amount of Each Disbursement this Period 45.00
City Middletown State OH Zip Code 45042	Purpose of Disbursement Payroll processing 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 001

Full Name (Last, First, Middle Initial) B. DotterLydon, Inc.		Transaction ID: SB21B.5119 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6
Mailing Address 1251 Dartmouth Court		Amount of Each Disbursement this Period 2850.00
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Compliance & bookkeeping 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 001

Full Name (Last, First, Middle Initial) C. First Financial Bank		Transaction ID: SB21B.5147 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 7795 Tylersville Road		Amount of Each Disbursement this Period 1421.55
City West Chester State OH Zip Code 45069	Purpose of Disbursement Payroll taxes 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 001

SUBTOTAL of Disbursements This Page (optional) ▶	4316.55
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 33 / 50

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Mrs. Amy Hobart		Transaction ID: SB21B.5098 Date of Disbursement 06 / 15 / 2006	
Mailing Address 402 Ashford Lane		Amount of Each Disbursement this Period 785.29	
City Alexandria State VA Zip Code 22304	Purpose of Disbursement Salary Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mrs. Amy Hobart		Transaction ID: SB21B.5145 Date of Disbursement 06 / 29 / 2006	
Mailing Address 402 Ashford Lane		Amount of Each Disbursement this Period 785.28	
City Alexandria State VA Zip Code 22304	Purpose of Disbursement Salary Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Interpark		Transaction ID: SB21B.5121 Date of Disbursement 06 / 29 / 2006	
Mailing Address 5883 Collection Center Drive		Amount of Each Disbursement this Period 235.00	
City Chicago State IL Zip Code 60693	Purpose of Disbursement Parking Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	1805.57
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial)		Transaction ID: SB21B.5302																					
A. Mastercard		Date of Disbursement																					
Mailing Address PO Box 70		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	9		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		2	9		2	0	0	6														
City Middletown	State OH	Zip Code 45042	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card (See below)			14231.93																				
Candidate Name			001 Category/ Type																				
Office Sought:	Disbursement For:																						
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General																						
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼																						
<input type="checkbox"/> President																							
State:	District:																						

Full Name (Last, First, Middle Initial)		Transaction ID: SB21B.5302.3																					
B. Sprint PCS		Date of Disbursement																					
Mailing Address 2001 Edmund Halley Drive		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	9		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		2	9		2	0	0	6														
City Reston	State VA	Zip Code 20191	Amount of Each Disbursement this Period																				
Purpose of Disbursement Telephone			41.35																				
Candidate Name			001 Category/ Type																				
Office Sought:	Disbursement For:																						
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General																						
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼																						
<input type="checkbox"/> President																							
State:	District:																						

[MEMO ITEM]

Full Name (Last, First, Middle Initial)		Transaction ID: SB21B.5302.4																					
C. Federal Express		Date of Disbursement																					
Mailing Address P.O. Box 1140		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	9		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		2	9		2	0	0	6														
City Memphis	State TN	Zip Code 38101	Amount of Each Disbursement this Period																				
Purpose of Disbursement Shipping expense			18.04																				
Candidate Name			001 Category/ Type																				
Office Sought:	Disbursement For:																						
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General																						
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼																						
<input type="checkbox"/> President																							
State:	District:																						

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	▶	14231.93
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 35 / 50

<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)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Embassy Suites		Transaction ID: SB21B.5302.6 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6
Mailing Address 3825 Peachtree Road		Amount of Each Disbursement this Period 632.55
City Atlanta State GA Zip Code 30305	[MEMO ITEM]	
Purpose of Disbursement Gen. Fund. - Travel, Lodging		002 Category/Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. Embassy Suites		Transaction ID: SB21B.5302.7 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6
Mailing Address 3825 Peachtree Road		Amount of Each Disbursement this Period 777.27
City Atlanta State GA Zip Code 30305	[MEMO ITEM]	
Purpose of Disbursement Gen. Fund. - Travel, Lodging		002 Category/Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C. Congressional Liquors		Transaction ID: SB21B.5302.8 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6
Mailing Address 404 E Street, SE		Amount of Each Disbursement this Period 396.84
City Washington State DC Zip Code 20003	[MEMO ITEM]	
Purpose of Disbursement Meeting Exp.-Food & Beverage		001 Category/Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 36 / 50

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Sam & Harrys		Transaction ID: SB21B.5302.10 Date of Disbursement 06 / 29 / 2006	
Mailing Address 1200 19th Street, NW		Amount of Each Disbursement this Period 7315.67	
City Washington State DC Zip Code 20036	Purpose of Disbursement Gen. Fund. - Food & Beverage	003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Sullivans Steakhouse		Transaction ID: SB21B.5302.11 Date of Disbursement 06 / 29 / 2006	
Mailing Address 1745 Wazee Street		Amount of Each Disbursement this Period 251.10	
City Denver State CO Zip Code 80202	Purpose of Disbursement Gen. Fund. - Travel Meals	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Inverness Hotel & Golf		Transaction ID: SB21B.5302.13 Date of Disbursement 06 / 29 / 2006	
Mailing Address 200 Inverness Drive West		Amount of Each Disbursement this Period 687.79	
City Englewood State CO Zip Code 80112	Purpose of Disbursement Gen. Fund. - Food, Bev & Greens Fees	003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 37 / 50

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. The Caucus Room		Transaction ID: SB21B.5302.14 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6
Mailing Address 401 9th Street, NW		Amount of Each Disbursement this Period 3244.16
City Washington State DC Zip Code 20001	[MEMO ITEM]	
Purpose of Disbursement Gen. Fund. - Food & Beverage Candidate Name		003 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Verizon Online		Transaction ID: SB21B.5302.15 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6
Mailing Address PO Box 17577		Amount of Each Disbursement this Period 51.25
City Baltimore State MD Zip Code 21297	[MEMO ITEM]	
Purpose of Disbursement Internet Candidate Name		001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Delta Airlines		Transaction ID: SB21B.5302.16 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 444.60
City Atlanta State GA Zip Code 30320	[MEMO ITEM]	
Purpose of Disbursement Gen. Fund. - Air Travel Candidate Name		002 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 38 / 50

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Mr. John R. Muse		Transaction ID: SB21B.5324 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 4800 Preston Road		Amount of Each Disbursement this Period 2833.24
City Dallas State TX Zip Code 75205	Purpose of Disbursement In-kind - Fundraising Food & Beverage 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) ▼
Purpose of Disbursement Gen. Fund. - Air Travel Candidate Name		

Full Name (Last, First, Middle Initial) B. Norfolk Southern		Transaction ID: SB21B.5112 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 6
Mailing Address 1500 K Street, NW Ste. 375		Amount of Each Disbursement this Period 2742.00
City Washington State DC Zip Code 20005	Purpose of Disbursement Gen. Fund. - Air Travel 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) ▼
Purpose of Disbursement Gen. Fund. - Air Travel Candidate Name		

Full Name (Last, First, Middle Initial) C. Sir Speedy		Transaction ID: SB21B.5126 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6
Mailing Address 614 Superior Avenue Suite 100		Amount of Each Disbursement this Period 800.87
City Cleveland State OH Zip Code 44113	Purpose of Disbursement The Freedom Project Printing 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) ▼
Purpose of Disbursement The Freedom Project Printing Candidate Name		

SUBTOTAL of Disbursements This Page (optional) ▶	6376.11
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)

PAGE 39 / 50

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Stanford Aviation Full Name (Last, First, Middle Initial) Mailing Address 100 Jim Davidson Drive City Sugar Land State TX Zip Code 77478 Purpose of Disbursement Gen. Fund. - Air Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B.5129 Date of Disbursement 06 / 29 / 2006 Amount of Each Disbursement this Period 1410.00 002 Category/Type
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B. Swisher International Full Name (Last, First, Middle Initial) Mailing Address 459 E 16th Street City Jacksonville State FL Zip Code 32206 Purpose of Disbursement Gen. Fund. - Air Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B.5093 Date of Disbursement 06 / 14 / 2006 Amount of Each Disbursement this Period 2996.00 002 Category/Type
--	--	---

C. Vectren Corporation Full Name (Last, First, Middle Initial) Mailing Address One Vectren Square City Evansville State IN Zip Code 47708 Purpose of Disbursement Gen. Fund. - Air Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B.5136 Date of Disbursement 06 / 29 / 2006 Amount of Each Disbursement this Period 1759.00 002 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	6165.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 40 / 50

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. Venturehouse Group		Transaction ID: SB21B.5088 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 6
Mailing Address 509 7th Street, NW		Amount of Each Disbursement this Period 1250.00
City Washington State DC Zip Code 20004	Purpose of Disbursement Office rent Candidate Name Category/Type 001	
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) ▼	

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Transaction ID: SB21B.5139 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6
Mailing Address PO Box 17464		Amount of Each Disbursement this Period 609.63
City Baltimore State MD Zip Code 21297-1464	Purpose of Disbursement Telephone Candidate Name Category/Type 001	
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) ▼	

Full Name (Last, First, Middle Initial) C. Wiley Rein & Fielding, LLP		Transaction ID: SB21B.5141 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6
Mailing Address 1776 K Street, NW		Amount of Each Disbursement this Period 1501.87
City Washington State DC Zip Code 20006	Purpose of Disbursement Legal services Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3361.50
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 41 / 50

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial)

A. Mr. Andrew Wood

Mailing Address 12 Brierleigh Court

City Lutherville State MD Zip Code 21093

Purpose of Disbursement
Gen. Fund. - Food, Bev. & Greens Fees

Candidate Name

003
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.5116

Date of Disbursement

06 / 21 / 2006

Amount of Each Disbursement this Period

5999.29

SUBTOTAL of Disbursements This Page (optional) ►

5999.29

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

46038.44

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial)
BACHMANN FOR CONGRESS

Mailing Address BOX 49756

City State Zip Code
BLAINE MN 55449

Purpose of Disbursement
Contribution

Category/
Type

Candidate Name
MICHELE M BACHMANN

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: MN District: 06

Transaction ID: SB23.5045

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
BILIRAKIS FOR CONGRESS

Mailing Address 610 S. Boulevard

City State Zip Code
Tampa FL 33606

Purpose of Disbursement
Contribution

Category/
Type

Candidate Name
GUS MICHAEL BILIRAKIS

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: FL District: 09

Transaction ID: SB23.5067

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
CHRISTOPHER SHAYS FOR CONGRESS COMMITTEE

Mailing Address 98 East Avenue Rear Building

City State Zip Code
Norwalk CT 06851

Purpose of Disbursement
Contribution

Category/
Type

Candidate Name
CHRISTOPHER SHAYS

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: CT District: 04

Transaction ID: SB23.5027

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. CHRIS WAKIM FOR CONGRESS		Transaction ID: SB23.5051 Date of Disbursement 06 / 21 / 2006	
Mailing Address PO Box 2176		Amount of Each Disbursement this Period 4500.00	
City Wheeling	State WV Zip Code 26003		
Purpose of Disbursement Contribution Candidate Name CHRIS WAKIM			011 Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 01	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. DAVID MCSWEENEY FOR CONGRESS 2006 INC		Transaction ID: SB23.5049 Date of Disbursement 06 / 21 / 2006	
Mailing Address 8 Hubbell Court		Amount of Each Disbursement this Period 4500.00	
City Barrington	State IL Zip Code 60010		
Purpose of Disbursement Contribution Candidate Name S. DAVID MCSWEENEY			011 Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 8	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. FITZPATRICK FOR CONGRESS		Transaction ID: SB23.5032 Date of Disbursement 06 / 21 / 2006	
Mailing Address 115 N Broad Street		Amount of Each Disbursement this Period 4500.00	
City Doylestown	State PA Zip Code 18901		
Purpose of Disbursement Contribution Candidate Name MICHAEL G FITZPATRICK			011 Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 08	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	13500.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. FRIENDS OF DON SHERWOOD		Transaction ID: SB23.5056 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 6
Mailing Address 81 WARREN STREET		Amount of Each Disbursement this Period 4500.00
City TUNKHANNOCK State PA Zip Code 18675	011 Category/ Type	
Purpose of Disbursement Contribution Candidate Name DONALD L. SHERWOOD		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 10	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. HAYES FOR CONGRESS		Transaction ID: SB23.5054 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 6
Mailing Address Post Office Box 2000		Amount of Each Disbursement this Period 5000.00
City Concord State NC Zip Code 28026	011 Category/ Type	
Purpose of Disbursement Contribution Candidate Name ROBERT CANNON HAYES		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 08	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. HEATHER WILSON FOR CONGRESS		Transaction ID: SB23.5034 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 6
Mailing Address P.O. BOX 14070 P.O. BOX 14070		Amount of Each Disbursement this Period 5000.00
City ALBUQUERQUE State NM Zip Code 87191	011 Category/ Type	
Purpose of Disbursement Contribution Candidate Name HEATHER A. WILSON		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 01	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	14500.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. JEFF FORTENBERRY FOR UNITED STATES CONGRESS		Transaction ID: SB23.5029 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 6
Mailing Address 1610 N Street		Amount of Each Disbursement this Period 4500.00
City Lincoln State NE Zip Code 68508	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name JEFF FORTENBERRY		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 1	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. JIM GERLACH FOR CONGRESS COMMITTEE		Transaction ID: SB23.5036 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 6
Mailing Address PO Box 87		Amount of Each Disbursement this Period 5000.00
City Uwchland State PA Zip Code 19480	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name JIM GERLACH		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 06	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. KELLER FOR CONGRESS		Transaction ID: SB23.5038 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 6
Mailing Address P.O. Box 1453		Amount of Each Disbursement this Period 5000.00
City Orlando State FL Zip Code 32802	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name RICHARD ANTHONY KELLER		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 08	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	14500.00
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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. MARTHA RAINVILLE FOR CONGRESS		Transaction ID: SB23.5066 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 6
Mailing Address PO BOX 505		Amount of Each Disbursement this Period 5000.00
City WILLISTON State VT Zip Code 05495	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name MARTHA T RAINVILLE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. MIKE SODREL FOR US		Transaction ID: SB23.5023 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 6
Mailing Address 702 NORTH SHORE DRIVE SUITE 500		Amount of Each Disbursement this Period 5000.00
City JEFFERSONVILLE State IN Zip Code 47130	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name MICHAEL E. SODREL		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 9	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. NORTHUP FOR CONGRESS		Transaction ID: SB23.5052 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 6
Mailing Address PO Box 7313		Amount of Each Disbursement this Period 5000.00
City Louisville State KY Zip Code 40257	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name ANNE M. NORTHUP		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	15000.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. PEOPLE WITH HART INC		Transaction ID: SB23.5059 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 6	
Mailing Address P.O. Box 435		Amount of Each Disbursement this Period 4500.00	
City Wexford	State PA Zip Code 15090		
Purpose of Disbursement Contribution Candidate Name MELISSA A. HART			011 Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. PRYCE FOR CONGRESS		Transaction ID: SB23.5042 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 6	
Mailing Address 145 E. Rich Street		Amount of Each Disbursement this Period 5000.00	
City Columbus	State OH Zip Code 43215		
Purpose of Disbursement Contribution Candidate Name DEBORAH D. PRYCE			011 Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 15	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. RAY MEIER FOR CONGRESS COMMITTEE		Transaction ID: SB23.5047 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 6	
Mailing Address PO BOX 120		Amount of Each Disbursement this Period 4500.00	
City UTICA	State NY Zip Code 13503		
Purpose of Disbursement Contribution Candidate Name RAYMOND A MEIER			011 Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 24	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	14000.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

<p>A. RON LEWIS FOR CONGRESS</p> <p>Full Name (Last, First, Middle Initial) Mailing Address PO Box 307</p>		<p>Transaction ID: SB23.5063 Date of Disbursement 06 / 21 / 2006</p>
<p>City Elizabethtown State KY Zip Code 42702</p>	<p>Amount of Each Disbursement this Period 5000.00</p>	
<p>Purpose of Disbursement Contribution Candidate Name RON LEWIS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 02</p>	<p>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>011 Category/ Type</p>

<p>B. SALI FOR CONGRESS</p> <p>Full Name (Last, First, Middle Initial) Mailing Address PO Box 71</p>		<p>Transaction ID: SB23.5090 Date of Disbursement 06 / 14 / 2006</p>
<p>City KUNA State ID Zip Code 83634</p>	<p>Amount of Each Disbursement this Period 5000.00</p>	
<p>Purpose of Disbursement Primary Debt Retirement Candidate Name WILLIAM T. SALI Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ID District: 01</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>011 Category/ Type</p>

<p>C. SCHMIDT FOR CONGRESS COMMITTEE</p> <p>Full Name (Last, First, Middle Initial) Mailing Address 771 WARDS CORNER ROAD</p>		<p>Transaction ID: SB23.5064 Date of Disbursement 06 / 21 / 2006</p>
<p>City LOVELAND State OH Zip Code 45140</p>	<p>Amount of Each Disbursement this Period 5000.00</p>	
<p>Purpose of Disbursement Contribution Candidate Name JEANNETTE H SCHMIDT Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 02</p>	<p>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>011 Category/ Type</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>15000.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. SCHWARZ FOR CONGRESS		Transaction ID: SB23.5040 Date of Disbursement
Mailing Address POST OFFICE BOX 2063		<input type="text" value="06"/> / <input type="text" value="21"/> / <input type="text" value="2006"/>
City BATTLE CREEK	State MI	Zip Code 49016
Purpose of Disbursement Contribution		<input type="text" value="011"/> Category/ Type
Candidate Name JOHN SCHWARZ		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MI	District: 07	
		Amount of Each Disbursement this Period <input type="text" value="5000.00"/>

Full Name (Last, First, Middle Initial) B. SHELLEY MOORE CAPITO FOR CONGRESS		Transaction ID: SB23.5025 Date of Disbursement
Mailing Address P.O. Box 11519		<input type="text" value="06"/> / <input type="text" value="21"/> / <input type="text" value="2006"/>
City Charleston	State WV	Zip Code 25339
Purpose of Disbursement Contribution		<input type="text" value="011"/> Category/ Type
Candidate Name SHELLEY MOORE CAPITO		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WV	District: 02	
		Amount of Each Disbursement this Period <input type="text" value="5000.00"/>

Full Name (Last, First, Middle Initial) C. SWEENEY FOR CONGRESS INC		Transaction ID: SB23.5031 Date of Disbursement
Mailing Address Post Office Box 1465		<input type="text" value="06"/> / <input type="text" value="21"/> / <input type="text" value="2006"/>
City Clifton Park	State NY	Zip Code 12065
Purpose of Disbursement Contribution		<input type="text" value="011"/> Category/ Type
Candidate Name JOHN E. SWEENEY		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY	District: 20	
		Amount of Each Disbursement this Period <input type="text" value="4500.00"/>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="14500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

Full Name (Last, First, Middle Initial) A. TIM MURPHY FOR CONGRESS		Transaction ID: SB23.5061 Date of Disbursement
Mailing Address PO Box 24551		<input type="text" value="06"/> / <input type="text" value="21"/> / <input type="text" value="2006"/>
City Pittsburgh	State PA	Zip Code 15234
Purpose of Disbursement	<input type="text" value="011"/> Category/ Type	
Candidate Name TIM MURPHY		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA District: 18		
		Amount of Each Disbursement this Period <input type="text" value="4500.00"/>

Full Name (Last, First, Middle Initial) B. UST Public Affairs, Inc.		Transaction ID: SB23.5358 Date of Disbursement
Mailing Address 655 15th Street, NW Suite 410		<input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2006"/>
City Washington	State DC	Zip Code 20005
Purpose of Disbursement In-kind, Air Travel	<input type="text" value="011"/> Category/ Type	
Candidate Name JOHN A BOEHNER		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH District: 08		
		Amount of Each Disbursement this Period <input type="text" value="1506.20"/>

Full Name (Last, First, Middle Initial) C. WELDON VICTORY COMMITTEE		Transaction ID: SB23.5044 Date of Disbursement
Mailing Address P. O. Box 1992		<input type="text" value="06"/> / <input type="text" value="21"/> / <input type="text" value="2006"/>
City Media	State PA	Zip Code 19063
Purpose of Disbursement Contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name W CURTIS WELDON		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA District: 07		
		Amount of Each Disbursement this Period <input type="text" value="5000.00"/>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="11006.20"/>
TOTAL This Period (last page this line number only)	<input type="text" value="126506.20"/>