

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines Legacy Political Fund

ADDRESS (number and street) PO Box 77076 Check if different than previously reported. (ACC) Fort Worth TX 76177

2. FEC IDENTIFICATION NUMBER C00437376 3. IS THIS REPORT X 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 Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post-Election Report for the: General, Runoff, Special

5. Covering Period 01 01 2011 through 06 30 2011

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 Steve Taylor

Signature of Treasurer Electronically Filed by Steve Taylor Date 07 22 2011

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

Office Use Only FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Legacy Political Fund

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	X	Y	Y	Y	2	0	1	1		6671.95
X	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period .....	6671.95									
(c) Total Receipts (from Line 19) .....	84939.08	84939.08								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	91611.03	91611.03								
7. Total Disbursements (from Line 31) .....	87580.34	87580.34								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	4030.69	4030.69								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	1500.00									

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  
Legacy Political Fund

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	82600.00	82600.00
(ii) Unitemized .....	2240.00	2240.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	84840.00	84840.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	84840.00	84840.00
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) .....	23.85	23.85
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	75.23	75.23
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)) .....	84939.08	84939.08
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	84939.08	84939.08

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.....	84932.34	84932.34
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	84932.34	84932.34
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	1148.00	1148.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	1500.00	1500.00
(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)) .....	1500.00	1500.00
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))..	87580.34	87580.34
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	87580.34	87580.34

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) .....	84840.00	84840.00
34. Total Contribution Refunds (from Line 28(d)) .....	1500.00	1500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	83340.00	83340.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	84932.34	84932.34
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	23.85	23.85
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	84908.49	84908.49

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 61
	<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)  
Legacy Political Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) Pierce M. Allman	Date of Receipt MM / DD / YYYY 02 / 01 / 2011
	Mailing Address 4242 Lomo Alto Dr N102	<b>Transaction ID:</b> SA11AI.5434
	City State Zip Code Dallas TX 75219	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. <b>C</b>	Contribution
	Name of Employer Self Occupation Real Estate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Michael James Barton	Date of Receipt MM / DD / YYYY 01 / 24 / 2011
	Mailing Address 2218 Steamboat Run	<b>Transaction ID:</b> SA11AI.5486
	City State Zip Code Sugarland TX 77478	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	Contribution
	Name of Employer SunPower Occupation Senior Policy Advisor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Chad Biddinger	Date of Receipt MM / DD / YYYY 02 / 25 / 2011
	Mailing Address 6026 Meadow Rd	<b>Transaction ID:</b> SA11AI.5465
	City State Zip Code Dallas TX 75230	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	Contribution
	Name of Employer Self Employed Occupation Shrink The World Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1400.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 (check only one)	PAGE 7 / 61
	<input checked="" 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)  
Legacy Political Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) Steven R. Birdwell	Date of Receipt MM / DD / YYYY 01 / 05 / 2011
	Mailing Address 9977 W Sam Houston Pkwy N, Suite 100	<b>Transaction ID:</b> SA11AI.5388
	City State Zip Code Houston TX 77024	Amount of Each Receipt this Period 800.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Remedial Construction Services Occupation President/CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Daniel Cage	Date of Receipt MM / DD / YYYY 03 / 04 / 2011
	Mailing Address 181 E 90th St 12C	<b>Transaction ID:</b> SA11AI.5467
	City State Zip Code New York NY 10128	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Linq3 Occupation CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Barry Clark	Date of Receipt MM / DD / YYYY 01 / 27 / 2011
	Mailing Address 5690 DTC Blvd, Suite 670	<b>Transaction ID:</b> SA11AI.5429
	City State Zip Code Greenwood Village CO 80111	Amount of Each Receipt this Period 800.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer WestFax, Inc. Occupation President/Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2100.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 61
	<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)  
Legacy Political Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) Barry Clark	Date of Receipt MM / DD / YYYY 06 / 09 / 2011
	Mailing Address 5690 DTC Blvd, Suite 670	<b>Transaction ID:</b> SA11AI.5583
	City State Zip Code Greenwood Village CO 80111	Amount of Each Receipt this Period 4200.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation WestFax, Inc. President/Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) George Clark	Date of Receipt MM / DD / YYYY 01 / 25 / 2011
	Mailing Address 446 Green Point Court	<b>Transaction ID:</b> SA11AI.5424
	City State Zip Code Houston TX 77024	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Freestone Partners Investments	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Melissa Clark	Date of Receipt MM / DD / YYYY 06 / 09 / 2011
	Mailing Address 9542 E Silent Hills PI	<b>Transaction ID:</b> SA11AI.5584
	City State Zip Code Lone Tree CO 80124	Amount of Each Receipt this Period 800.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Homemaker Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5400.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 61  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Legacy Political Fund

**A.**

Full Name (Last, First, Middle Initial) Robert N. Crow		Date of Receipt MM / DD / YYYY 01 / 03 / 2011
Mailing Address 2726 Connecticut Ave. NW #501		Transaction ID: SA11AI.5275
City Washington	State DC	Zip Code 20008
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Committee on Energy & Commerce	Occupation Congressional Aide	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

**B.**

Full Name (Last, First, Middle Initial) Kevin P. Cusack		Date of Receipt MM / DD / YYYY 01 / 25 / 2011
Mailing Address 4711 Bradford NE		Transaction ID: SA11AI.5411
City Grand Rapids	State MI	Zip Code 49525
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer Oppenheimer & Company	Occupation Investment Advisor	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

**C.**

Full Name (Last, First, Middle Initial) Kevin P. Cusack		Date of Receipt MM / DD / YYYY 01 / 25 / 2011
Mailing Address 4711 Bradford NE		Transaction ID: SA11AI.5487
City Grand Rapids	State MI	Zip Code 49525
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Oppenheimer & Company	Occupation Investment Advisor	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2900.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 61  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
Legacy Political Fund

**A.**

Full Name (Last, First, Middle Initial)  
Kevin P. Cusack

Mailing Address 4711 Bradford NE

City State Zip Code  
Grand Rapids MI 49525

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

Name of Employer  
Oppenheimer & Company

Occupation  
Investment Advisor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2550.00

Date of Receipt  
MM / DD / YYYY  
02 / 03 / 2011

**Transaction ID:** SA11AI.5436

Amount of Each Receipt this Period  
150.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
Ellen Davis

Mailing Address 1861 Runnymede Rd

City State Zip Code  
Winston Salem NC 27104

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

Name of Employer  
Homemaker

Occupation  
Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  
MM / DD / YYYY  
01 / 24 / 2011

**Transaction ID:** SA11AI.5406

Amount of Each Receipt this Period  
800.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
Ellen Davis

Mailing Address 1861 Runnymede Rd

City State Zip Code  
Winston Salem NC 27104

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

Name of Employer  
Homemaker

Occupation  
Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
850.00

Date of Receipt  
MM / DD / YYYY  
03 / 04 / 2011

**Transaction ID:** SA11AI.5363

Amount of Each Receipt this Period  
50.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1000.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 61  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Legacy Political Fund

**A.**

Full Name (Last, First, Middle Initial)  
Ted M. Eades

Mailing Address 4066 South Better Drive

City State Zip Code  
Dallas TX 75229

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

Name of Employer ACE Cash Express. Inc. Occupation General Counsel

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
02 / 16 / 2011

Transaction ID: SA11AI.5448

Amount of Each Receipt this Period  
400.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
Leshia Elsenbrook

Mailing Address 3 Pine Crescent Ct

City State Zip Code  
Houston TX 77024

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

Name of Employer Homemaker Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
01 / 03 / 2011

Transaction ID: SA11AI.5276

Amount of Each Receipt this Period  
2000.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
Leshia Elsenbrook

Mailing Address 3 Pine Crescent Ct

City State Zip Code  
Houston TX 77024

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

Name of Employer Homemaker Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2800.00

Date of Receipt  
MM / DD / YYYY  
01 / 24 / 2011

Transaction ID: SA11AI.5405

Amount of Each Receipt this Period  
800.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3200.00**

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

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

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

FOR LINE NUMBER: PAGE 12 / 61  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Legacy Political Fund

**A.** Full Name (Last, First, Middle Initial)  
Nathan Estruth  
Mailing Address 1623 Beechshire Drive  
City Cincinnati State OH Zip Code 45255  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Procter & Gamble Occupation Vice President/General Manager  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00  
Date of Receipt 01 / 28 / 2011  
Transaction ID: SA11AI.5430  
Amount of Each Receipt this Period 400.00  
Contribution

**B.** Full Name (Last, First, Middle Initial)  
William H. Flaherty  
Mailing Address 1112 Sandcastle Dr  
City Corona Del Mar State CA Zip Code 92625  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Irvine Co. Office Properties Occupation Real Estate  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2000.00  
Date of Receipt 01 / 06 / 2011  
Transaction ID: SA11AI.5490  
Amount of Each Receipt this Period 2000.00  
Contribution

**C.** Full Name (Last, First, Middle Initial)  
Randy Ford  
Mailing Address PO Box 830308  
City Richardson State TX Zip Code 75083  
FEC ID number of contributing federal political committee. **C**  
Name of Employer National Write Your Congressm. Occupation President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00  
Date of Receipt 02 / 25 / 2011  
Transaction ID: SA11AI.5463  
Amount of Each Receipt this Period 500.00  
Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2900.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 61
	<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)  
Legacy Political Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) Steve Friess	Date of Receipt MM / DD / YYYY 01 / 07 / 2011
	Mailing Address PO Box 11655	<b>Transaction ID:</b> SA11AI.5394
	City State Zip Code Jackson WY 83002	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Lynn & Foster Friess Found. Occupation Trustee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Joshua R. Good	Date of Receipt MM / DD / YYYY 06 / 13 / 2011
	Mailing Address 1516 D Street, NE	<b>Transaction ID:</b> SA11AI.5586
	City State Zip Code Washington DC 20002	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer ICF International Occupation Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Joshua R. Good	Date of Receipt MM / DD / YYYY 06 / 20 / 2011
	Mailing Address 1516 D Street, NE	<b>Transaction ID:</b> SA11AI.5587
	City State Zip Code Washington DC 20002	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer ICF International Occupation Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 950.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 61
	<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)  
Legacy Political Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) William L. Hanley		Date of Receipt
	Mailing Address 250 Jungle Rd		<input type="text" value="01"/> / <input type="text" value="11"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Palm Beach	FL	33480
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	<b>Transaction ID:</b> SA11AI.5313
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="2000.00"/>
		<input type="text" value="2000.00"/>	Contribution

<b>B.</b>	Full Name (Last, First, Middle Initial) Billy Hibbs		Date of Receipt
	Mailing Address 6708 Hollytree Cir		<input type="text" value="01"/> / <input type="text" value="03"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Tyler	TX	75703
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	<b>Transaction ID:</b> SA11AI.5492
Name of Employer Heartland Security Insurance		Occupation Chairman & CEO	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="2000.00"/>
		<input type="text" value="2000.00"/>	Contribution

<b>C.</b>	Full Name (Last, First, Middle Initial) J.C. Huizenga		Date of Receipt
	Mailing Address 3755 36th St, Suite 100		<input type="text" value="01"/> / <input type="text" value="26"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Grand Rapids	MI	49512
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	<b>Transaction ID:</b> SA11AI.5279
Name of Employer Huizenga Group		Occupation Executive	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="2000.00"/>
		<input type="text" value="2000.00"/>	Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="6000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 61  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Legacy Political Fund

**A.**

Full Name (Last, First, Middle Initial)  
Jackie Jackson

Mailing Address 2015 Wakefield Farm Rd

City State Zip Code  
Wildwood MO 63038

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

Name of Employer Occupation  
Self Employed Aviation/Public Speaking

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

Transaction ID: SA11AI.5426

Amount of Each Receipt this Period  
500.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
Jeffrey R. Jackson

Mailing Address 4212 Windsor Parkway

City State Zip Code  
Dallas TX 75205

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

Name of Employer Occupation  
Stream Realty Partners Real Estate

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

Transaction ID: SA11AI.5421

Amount of Each Receipt this Period  
500.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
Peb Jackson

Mailing Address 512 South Tejon, Suite 200

City State Zip Code  
Colorado Springs CO 80903

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

Name of Employer Occupation  
Jackson Consulting Group Principal

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

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

Transaction ID: SA11AI.5489

Amount of Each Receipt this Period  
2000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3000.00**

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

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

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

FOR LINE NUMBER: PAGE 16 / 61  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Legacy Political Fund

**A.** Full Name (Last, First, Middle Initial)  
Peb Jackson

Mailing Address 512 South Tejon, Suite 200

City State Zip Code  
Colorado Springs CO 80903

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

Name of Employer Occupation  
Jackson Consulting Group Principal

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2800.00

Date of Receipt  
MM / DD / YYYY  
01 / 24 / 2011

**Transaction ID:** SA11AI.5410

Amount of Each Receipt this Period  
800.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Bill B. Jones

Mailing Address 100 Congress Ave Suite 2000

City State Zip Code  
Austin TX 78701

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

Name of Employer Occupation  
The Jones Firm Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
02 / 08 / 2011

**Transaction ID:** SA11AI.5484

Amount of Each Receipt this Period  
2000.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Bill B. Jones

Mailing Address 100 Congress Ave Suite 2000

City State Zip Code  
Austin TX 78701

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

Name of Employer Occupation  
The Jones Firm Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt  
MM / DD / YYYY  
02 / 10 / 2011

**Transaction ID:** SA11AI.5437

Amount of Each Receipt this Period  
400.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3200.00

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



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

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

FOR LINE NUMBER: PAGE 17 / 61  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Legacy Political Fund

**A.** Full Name (Last, First, Middle Initial)  
Lendy Jones

Mailing Address 3418 Harvard Ave

City State Zip Code  
Dallas TX 75205

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

Name of Employer Self Employed      Occupation Attorney

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

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

**Transaction ID:** SA11AI.5418

Amount of Each Receipt this Period  
400.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Wilson G. Jones

Mailing Address 3418 Harvard Ave

City State Zip Code  
Dallas TX 75205

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

Name of Employer Thompson Knight      Occupation Lawyer

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

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

**Transaction ID:** SA11AI.5420

Amount of Each Receipt this Period  
400.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Stephen Jordan

Mailing Address 913 Enderby Drive

City State Zip Code  
Alexandria VA 22302

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

Name of Employer US Chamber/BCLC      Occupation Executive Director

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      2100.00

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

**Transaction ID:** SA11AI.5362

Amount of Each Receipt this Period  
2100.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2900.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 61
	<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)  
Legacy Political Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) Bret Kidd	Date of Receipt MM / DD / YYYY 01 / 07 / 2011
	Mailing Address 116 Welford Ln	<b>Transaction ID:</b> SA11AI.5395
	City State Zip Code Southlake TX 76092	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Hewlett Packard General Manager, Global Public Sector	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Steve T. Kirby	Date of Receipt MM / DD / YYYY 06 / 23 / 2011
	Mailing Address 24 Riverview Heights	<b>Transaction ID:</b> SA11AI.5608
	City State Zip Code Sioux Falls SD 57104	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Bluestem Capital Venture Capitalist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Hal Lambert	Date of Receipt MM / DD / YYYY 01 / 25 / 2011
	Mailing Address 1420 Thomas Place	<b>Transaction ID:</b> SA11AI.5423
	City State Zip Code Fort Worth TX 76107	Amount of Each Receipt this Period 800.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Credit Suisse Banking	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1700.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 61
	<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)  
Legacy Political Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) Kurt Leander	Date of Receipt MM / DD / YYYY 02 / 22 / 2011
	Mailing Address 8305 Explorer Dr	<b>Transaction ID:</b> SA11AI.5456
	City State Zip Code Colorado Springs CO 80920	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Focus On the Family Occupation Sr Assistant to the President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Michael Lunceford	Date of Receipt MM / DD / YYYY 01 / 03 / 2011
	Mailing Address 4440 Shady Hills Dr	<b>Transaction ID:</b> SA11AI.5274
	City State Zip Code Dallas TX 75229	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Mary Kay Inc Occupation SVP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Bob McNutt	Date of Receipt MM / DD / YYYY 03 / 08 / 2011
	Mailing Address PO Box 79	<b>Transaction ID:</b> SA11AI.5481
	City State Zip Code Corsicana TX 75151	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Collin Street Bakery Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2800.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 61  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Legacy Political Fund

**A.**

Full Name (Last, First, Middle Initial)  
Keith Mitchell

Mailing Address 4611 Travis St. #7

City State Zip Code  
Dallas TX 75205

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

Name of Employer Self Employed Occupation Investor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

**Transaction ID:** SA11AI.5415

Amount of Each Receipt this Period  
500.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
Theodore Mitchell

Mailing Address 4611 Travis St #7

City State Zip Code  
Dallas TX 75202

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

Name of Employer Ash Point Capital Occupation Principal

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

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

**Transaction ID:** SA11AI.5488

Amount of Each Receipt this Period  
500.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
John Scott Mooring

Mailing Address 11107 Wickway Dr

City State Zip Code  
Houston TX 77024

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

Name of Employer Mooring Recovery Services Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

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

**Transaction ID:** SA11AI.5480

Amount of Each Receipt this Period  
2000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3000.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 61  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Legacy Political Fund

**A.**

Full Name (Last, First, Middle Initial) Joseph V. Popolo		Date of Receipt MM / DD / YYYY 02 / 10 / 2011
Mailing Address 4208 Bryn Mawr Dr		<b>Transaction ID:</b> SA11AI.5482
City Dallas	State TX	Zip Code 75225
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00
Name of Employer Freeman	Occupation CEO	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

**B.**

Full Name (Last, First, Middle Initial) S. Mark Powell		Date of Receipt MM / DD / YYYY 02 / 10 / 2011
Mailing Address 2900 Tarry Trail		<b>Transaction ID:</b> SA11AI.5438
City Austin	State TX	Zip Code 78703
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 800.00
Name of Employer Atlantic Trust	Occupation Investment Management	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

**C.**

Full Name (Last, First, Middle Initial) S. Mark Powell		Date of Receipt MM / DD / YYYY 02 / 10 / 2011
Mailing Address 2900 Tarry Trail		<b>Transaction ID:</b> SA11AI.5483
City Austin	State TX	Zip Code 78703
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00
Name of Employer Atlantic Trust	Occupation Investment Management	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2800.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>4800.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 61  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Legacy Political Fund

**A.**

Full Name (Last, First, Middle Initial) Rocky Reese		Date of Receipt <table border="1" style="font-size: small;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>1</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	6		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y													
0	1		2	6		2	0	1	1													
Mailing Address 412 Haney Trace		<b>Transaction ID:</b> SA11AI.5280																				
City Horseshoe Bay	State TX	Zip Code 78657																				
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>2000.00</td></tr> </table>	2000.00																			
2000.00																						
Name of Employer Live Oak Lodging	Occupation Owner	Contribution																				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>2000.00</td></tr> </table>		2000.00																			
2000.00																						

**B.**

Full Name (Last, First, Middle Initial) Kim A. Richards		Date of Receipt <table border="1" style="font-size: small;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>1</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		3	1		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y													
0	1		3	1		2	0	1	1													
Mailing Address 260 Penny Lane		<b>Transaction ID:</b> SA11AI.5433																				
City Santa Barbara	State CA	Zip Code 93108																				
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>400.00</td></tr> </table>	400.00																			
400.00																						
Name of Employer The Athens Group	Occupation President	Contribution																				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>400.00</td></tr> </table>		400.00																			
400.00																						

**C.**

Full Name (Last, First, Middle Initial) Kim A. Richards		Date of Receipt <table border="1" style="font-size: small;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>2</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	7		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		0	7		2	0	1	1													
Mailing Address 260 Penny Lane		<b>Transaction ID:</b> SA11AI.5309																				
City Santa Barbara	State CA	Zip Code 93108																				
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>2000.00</td></tr> </table>	2000.00																			
2000.00																						
Name of Employer The Athens Group	Occupation President	Contribution																				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>2400.00</td></tr> </table>		2400.00																			
2400.00																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<table border="1" style="width: 100%;"><tr><td>4400.00</td></tr></table>	4400.00
4400.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>	

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

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

FOR LINE NUMBER: PAGE 23 / 61  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Legacy Political Fund

**A.** Full Name (Last, First, Middle Initial)  
Gigi Potter Salley  
Mailing Address 7037 Turtle Creek Blvd  
City Dallas State TX Zip Code 75205  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Briggs Freeman Sotheby's RE  
Occupation: Realtor  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00  
Date of Receipt: 02 / 21 / 2011  
Transaction ID: SA11AI.5452  
Amount of Each Receipt this Period: 500.00  
Contribution

**B.** Full Name (Last, First, Middle Initial)  
Roy Salley  
Mailing Address 7037 Turtle Creek Blvd  
City Dallas State TX Zip Code 75205  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Commerce Street Capital  
Occupation: Managing Director  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00  
Date of Receipt: 02 / 21 / 2011  
Transaction ID: SA11AI.5450  
Amount of Each Receipt this Period: 500.00  
Contribution

**C.** Full Name (Last, First, Middle Initial)  
Gail Schoelkopf  
Mailing Address 4006 Shenandoah Dr  
City Dallas State TX Zip Code 75205  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Homemaker  
Occupation: Homemaker  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2000.00  
Date of Receipt: 01 / 11 / 2011  
Transaction ID: SA11AI.5312  
Amount of Each Receipt this Period: 2000.00  
Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3000.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 24 / 61  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Legacy Political Fund

**A.** Full Name (Last, First, Middle Initial)  
Nancy C. Seay  
 Mailing Address 4448 Rheims Place  
 City State Zip Code  
 Dallas TX 75205  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 0 1 / 0 5 / 2 0 1 1  
**Transaction ID:** SA11AI.5387  
 Amount of Each Receipt this Period  
 500.00  
 Contribution  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Homemaker Homemaker  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

**B.** Full Name (Last, First, Middle Initial)  
Sarah Seay  
 Mailing Address 325 North Saint Paul Suite 3500  
 City State Zip Code  
 Dallas TX 75201  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 0 3 / 1 5 / 2 0 1 1  
**Transaction ID:** SA11AI.5497  
 Amount of Each Receipt this Period  
 5000.00  
 Contribution  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Homemaker Homemaker  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 5000.00

**C.** Full Name (Last, First, Middle Initial)  
George Seay III  
 Mailing Address 325 North Saint Paul St Suite 3500  
 City State Zip Code  
 Dallas TX 75201  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 0 1 / 0 6 / 2 0 1 1  
**Transaction ID:** SA11AI.5390  
 Amount of Each Receipt this Period  
 400.00  
 Contribution  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Annandale Capital LLC CEO  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 5900.00  
**TOTAL** This Period (last page this line number only) ..... ►



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 61  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Legacy Political Fund

**A.**

Full Name (Last, First, Middle Initial)  
George Seay III

Mailing Address 325 North Saint Paul St  
Suite 3500

City State Zip Code  
Dallas TX 75201

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

Name of Employer Annandale Capital LLC Occupation CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt  
MM / DD / YYYY  
01 / 06 / 2011

**Transaction ID:** SA11AI.5391

Amount of Each Receipt this Period  
400.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
George Seay III

Mailing Address 325 North Saint Paul St  
Suite 3500

City State Zip Code  
Dallas TX 75201

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

Name of Employer Annandale Capital LLC Occupation CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt  
MM / DD / YYYY  
03 / 15 / 2011

**Transaction ID:** SA11AI.5498

Amount of Each Receipt this Period  
3200.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
George Seay III

Mailing Address 325 North Saint Paul St  
Suite 3500

City State Zip Code  
Dallas TX 75201

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

Name of Employer Annandale Capital LLC Occupation CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
03 / 15 / 2011

**Transaction ID:** SA11AI.5501

Amount of Each Receipt this Period  
1000.00

Earmarked For R.Wicker,  
S-MS

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4600.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 61  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Legacy Political Fund

**A.**

Full Name (Last, First, Middle Initial)  
Brandon Simmons

Mailing Address 4440 Willard Ave, #1518

City State Zip Code  
Chevy Chase MD 20815

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

Name of Employer Occupation  
Hogan Lovells LLP Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
01 / 12 / 2011

Transaction ID: SA11AI.5494

Amount of Each Receipt this Period  
500.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
Gregory Slayton

Mailing Address 8 Lewin Rd

City State Zip Code  
Hanover NH 03755

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

Name of Employer Occupation  
Tuck Professor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
02 / 14 / 2011

Transaction ID: SA11AI.5443

Amount of Each Receipt this Period  
500.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
Julie Stagner

Mailing Address 5303 Longmont Dr

City State Zip Code  
Houston TX 77056

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

Name of Employer Occupation  
They Creative Chief Financial Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
01 / 06 / 2011

Transaction ID: SA11AI.5491

Amount of Each Receipt this Period  
2000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3000.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 61  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
Legacy Political Fund

**A.**

Full Name (Last, First, Middle Initial)  
Chuck Stetson

Mailing Address 505 Park Ave

City State Zip Code  
New York NY 10022

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

Name of Employer Occupation  
PEI Funds Fund Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
01 / 06 / 2011

**Transaction ID:** SA11AI.5392

Amount of Each Receipt this Period  
400.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
Ryan Streeter

Mailing Address 577 Century Oaks

City State Zip Code  
Zionsville IN 46077

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

Name of Employer Occupation  
ConservativeHome Editor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
02 / 23 / 2011

**Transaction ID:** SA11AI.5458

Amount of Each Receipt this Period  
500.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
Chuck J. Strehli

Mailing Address 6111 Mountainclimb Dr

City State Zip Code  
Austin TX 78731

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

Name of Employer Occupation  
Self Employed Consulting

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
01 / 25 / 2011

**Transaction ID:** SA11AI.5412

Amount of Each Receipt this Period  
400.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1300.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 61  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Legacy Political Fund

**A.**

Full Name (Last, First, Middle Initial)  
Jean Strehli

Mailing Address 6111 Mountainclimb Dr

City State Zip Code  
Austin TX 78731

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

Name of Employer Self Employed Occupation Consulting

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
01 / 25 / 2011

**Transaction ID:** SA11AI.5413

Amount of Each Receipt this Period  
400.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
Jean Strehli

Mailing Address 6111 Mountainclimb Dr

City State Zip Code  
Austin TX 78731

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

Name of Employer Self Employed Occupation Consulting

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt  
MM / DD / YYYY  
02 / 07 / 2011

**Transaction ID:** SA11AI.5310

Amount of Each Receipt this Period  
2000.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
Kyle Taylor

Mailing Address 515 Santa Paula Dr

City State Zip Code  
Salinas CA 93901

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

Name of Employer Covenant College Occupation Basketball Coach

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
04 / 14 / 2011

**Transaction ID:** SA11AI.5535

Amount of Each Receipt this Period  
500.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2900.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 61
	<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)  
Legacy Political Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) Meghan Taylor	Date of Receipt MM / DD / YYYY 04 / 14 / 2011
	Mailing Address 515 Santa Paula Dr	<b>Transaction ID:</b> SA11AI.5536
	City State Zip Code Salinas CA 93901	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Univ. of Chicago MBA Student	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Steve Taylor	Date of Receipt MM / DD / YYYY 06 / 09 / 2011
	Mailing Address 515 Santa Paula Dr	<b>Transaction ID:</b> SA11AI.5565
	City State Zip Code Salinas CA 93901	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Veritas V Retired CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Addelle Toussaint	Date of Receipt MM / DD / YYYY 02 / 14 / 2011
	Mailing Address 3712 Euclid	<b>Transaction ID:</b> SA11AI.5441
	City State Zip Code Dallas TX 75205	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Information Requested Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1400.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 30 / 61  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Legacy Political Fund

**A.** Full Name (Last, First, Middle Initial)  
Richard Toussaint

Mailing Address 3712 Euclid

City State Zip Code  
Dallas TX 75205

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

Name of Employer Occupation  
Self Employed Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
02 / 14 / 2011

**Transaction ID:** SA11AI.5439

Amount of Each Receipt this Period  
500.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Peter S. Wahby

Mailing Address 2200 Ross Ave, Suite 5200

City State Zip Code  
Dallas TX 75201

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

Name of Employer Occupation  
Greenberg Traurig, LLP Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2011

**Transaction ID:** SA11AI.5447

Amount of Each Receipt this Period  
400.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Peter S. Wahby

Mailing Address 2200 Ross Ave, Suite 5200

City State Zip Code  
Dallas TX 75201

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

Name of Employer Occupation  
Greenberg Traurig, LLP Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1550.00

Date of Receipt  
MM / DD / YYYY  
03 / 25 / 2011

**Transaction ID:** SA11AI.5538

Amount of Each Receipt this Period  
1150.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2050.00

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

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

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

FOR LINE NUMBER: PAGE 31 / 61  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Legacy Political Fund

**A.** Full Name (Last, First, Middle Initial)  
Heather Washburne  
 Mailing Address 1845 Woodall Rodgers Suite 1700  
 City State Zip Code  
 Dallas TX 75201  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 1 / 1 7 / 2 0 1 1  
**Transaction ID:** SA11AI.5399  
 Amount of Each Receipt this Period  
 400.00  
 Contribution  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Homemaker Homemaker  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 400.00

**B.** Full Name (Last, First, Middle Initial)  
Ray Washburne  
 Mailing Address 1845 Woodall Rodgers Freeway Suite 1700  
 City State Zip Code  
 Dallas TX 75201  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 1 / 1 7 / 2 0 1 1  
**Transaction ID:** SA11AI.5398  
 Amount of Each Receipt this Period  
 400.00  
 Contribution  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Charter Holdings President/CEO  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 400.00

**C.** Full Name (Last, First, Middle Initial)  
Robert Watson  
 Mailing Address 2601 E Garden Ln  
 City State Zip Code  
 Greenwood Village CO 80121  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 2 7 / 2 0 1 1  
**Transaction ID:** SA11AI.5602  
 Amount of Each Receipt this Period  
 750.00  
 Contribution  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Northstar Commercial Partners Real Estate Investor  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 750.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1550.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 61  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Legacy Political Fund

**A.**

Full Name (Last, First, Middle Initial) Don H. Wills		Date of Receipt MM / DD / YYYY 01 / 31 / 2011
Mailing Address 5949 Sherry Lane Ste 1225		<b>Transaction ID:</b> SA11AI.5432
City Dallas	State TX	Zip Code 75225
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1200.00
Name of Employer Self	Occupation Investments	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

**B.**

Full Name (Last, First, Middle Initial) Ron A. Wilson		Date of Receipt MM / DD / YYYY 01 / 30 / 2011
Mailing Address 10831 Everwood Ln		<b>Transaction ID:</b> SA11AI.5485
City Houston	State TX	Zip Code 77024
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00
Name of Employer Walter Oil & Gas Corp.	Occupation Oil & Gas Exploration	Contribution
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) Diego Winegarten		Date of Receipt MM / DD / YYYY 01 / 18 / 2011
Mailing Address 448 North St		<b>Transaction ID:</b> SA11AI.5401
City Greenwich	State CT	Zip Code 06830
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Guggenheim Partners	Occupation Managing Director	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3700.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 33 / 61</span>
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Legacy Political Fund

**A.**

Full Name (Last, First, Middle Initial) Christopher Zook		Date of Receipt
Mailing Address One Riverway Suite 2000		<input type="text" value="01"/> / <input type="text" value="12"/> / <input type="text" value="2011"/>
City	State	Zip Code
Houston	TX	77056
FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.5397
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="800.00"/>
Name of Employer CAZ Investments	Occupation Chairman	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="800.00"/>	

**B.**

Full Name (Last, First, Middle Initial) Christine Joy Zorn		Date of Receipt
Mailing Address 9696 Mill Ridge Lane		<input type="text" value="02"/> / <input type="text" value="21"/> / <input type="text" value="2011"/>
City	State	Zip Code
Great Falls	VA	22066
FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.5454
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="500.00"/>
Name of Employer Homemaker	Occupation Homemaker	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="500.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="1300.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="82600.00"/>

**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)  
Legacy Political Fund

A.	Full Name (Last, First, Middle Initial) American Airlines	Transaction ID: SB21B.5285 Date of Disbursement
	Mailing Address PO Box 619612	<input type="text" value="01"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Dallas State TX Zip Code 75261-9612	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC Airfare	<input type="text" value="330.40"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) American Airlines	Transaction ID: SB21B.5351 Date of Disbursement
	Mailing Address PO Box 619612	<input type="text" value="02"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Dallas State TX Zip Code 75261-9612	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC Travel Expense	<input type="text" value="60.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) American Airlines	Transaction ID: SB21B.5366 Date of Disbursement
	Mailing Address PO Box 619612	<input type="text" value="03"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Dallas State TX Zip Code 75261-9612	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC Travel Expense	<input type="text" value="60.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="450.40"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 35 / 61

<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)  
Legacy Political Fund

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) A Shred 2 Pieces LLC</p> <p>Mailing Address 2320 Hinton Dr</p> <p>City Irving State TX Zip Code 75061</p> <p>Purpose of Disbursement PAC Document Disposal</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.5590</p> <p>Date of Disbursement 06 / 14 / 2011</p> <p>Amount of Each Disbursement this Period 69.99</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Christian Geeks</p> <p>Mailing Address PO Box 93747</p> <p>City Southlake State TX Zip Code 76092</p> <p>Purpose of Disbursement PAC IT Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.5560</p> <p>Date of Disbursement 05 / 17 / 2011</p> <p>Amount of Each Disbursement this Period 291.67</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Corporate Couriers</p> <p>Mailing Address 1101 West Tenth Street</p> <p>City Fort Worth State TX Zip Code 76012</p> <p>Purpose of Disbursement PAC Courier</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.5578</p> <p>Date of Disbursement 06 / 01 / 2011</p> <p>Amount of Each Disbursement this Period 52.48</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>414.14</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input 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)  
Legacy Political Fund

<p><b>A.</b> Full Name (Last, First, Middle Initial) FedEx</p> <p>Mailing Address 942 S Shady Grove Rd</p> <p>City Memphis State TN Zip Code 38120-4117</p> <p>Purpose of Disbursement PAC Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.5534</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="28.02"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) FedEx</p> <p>Mailing Address 942 S Shady Grove Rd</p> <p>City Memphis State TN Zip Code 38120-4117</p> <p>Purpose of Disbursement PAC Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.5553</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="28.64"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) FedEx</p> <p>Mailing Address 942 S Shady Grove Rd</p> <p>City Memphis State TN Zip Code 38120-4117</p> <p>Purpose of Disbursement PAC Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.5571</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="28.64"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="85.30"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></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 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)  
Legacy Political Fund

A.	Full Name (Last, First, Middle Initial) FedEx	Transaction ID: SB21B.5594 Date of Disbursement 06 / 17 / 2011
	Mailing Address 942 S Shady Grove Rd	Amount of Each Disbursement this Period 16.31
	City Memphis State TN Zip Code 38120-4117	
	Purpose of Disbursement PAC Shipping Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FedEx	Transaction ID: SB21B.5599 Date of Disbursement 06 / 30 / 2011
	Mailing Address 942 S Shady Grove Rd	Amount of Each Disbursement this Period 28.89
	City Memphis State TN Zip Code 38120-4117	
	Purpose of Disbursement PAC Shipping Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FedEx Office	Transaction ID: SB21B.5573 Date of Disbursement 06 / 01 / 2011
	Mailing Address 415 E Hwy 114	Amount of Each Disbursement this Period 251.33
	City Grapevine State TX Zip Code 76051	
	Purpose of Disbursement PAC Printing/Invitations Candidate Name	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) ..... ▶

296.53

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)  
Legacy Political Fund

<p><b>A.</b> Full Name (Last, First, Middle Initial) FedEx Office</p> <p>Mailing Address 415 E Hwy 114</p> <p>City Grapevine State TX Zip Code 76051</p> <p>Purpose of Disbursement PAC Printing/Invitations</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.5577 <b>Date of Disbursement</b> 06 / 02 / 2011</p> <p>Amount of Each Disbursement this Period 251.33</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Fine Awards</p> <p>Mailing Address 250 N Dixie Hwy, Suite 10</p> <p>City Hollywood State FL Zip Code 33020</p> <p>Purpose of Disbursement PAC Event Expense/Awards</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.5335 <b>Date of Disbursement</b> 02 / 17 / 2011</p> <p>Amount of Each Disbursement this Period 325.44</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Intuit</p> <p>Mailing Address 2632 Marine Way</p> <p>City Mountain View State CA Zip Code 94043</p> <p>Purpose of Disbursement PAC Accounting Software</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.5558 <b>Date of Disbursement</b> 05 / 13 / 2011</p> <p>Amount of Each Disbursement this Period 42.22</p>

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

618.99

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Legacy Political Fund

A.	Full Name (Last, First, Middle Initial) Intuit	Transaction ID: SB21B.5570 Date of Disbursement 05 / 27 / 2011
	Mailing Address 2632 Marine Way	
	City Mountain View State CA Zip Code 94043	Amount of Each Disbursement this Period 42.59
	Purpose of Disbursement PAC Accounting Software Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Intuit	Transaction ID: SB21B.5591 Date of Disbursement 06 / 14 / 2011
	Mailing Address 2632 Marine Way	
	City Mountain View State CA Zip Code 94043	Amount of Each Disbursement this Period 42.22
	Purpose of Disbursement PAC Accounting Software Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Intuit	Transaction ID: SB21B.5598 Date of Disbursement 06 / 26 / 2011
	Mailing Address 2632 Marine Way	
	City Mountain View State CA Zip Code 94043	Amount of Each Disbursement this Period 42.59
	Purpose of Disbursement PAC Accounting Software Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	127.40
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Legacy Political Fund

<p><b>A.</b> Full Name (Last, First, Middle Initial) Jamie King</p> <p>Mailing Address 106 Panorama Ct</p> <p>City Trophy Club State TX Zip Code 76262</p> <p>Purpose of Disbursement PAC Fundraising Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.5277</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3420.00"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Jamie King</p> <p>Mailing Address 106 Panorama Ct</p> <p>City Trophy Club State TX Zip Code 76262</p> <p>Purpose of Disbursement PAC Fundraising Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.5281</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1987.50"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Jamie King</p> <p>Mailing Address 106 Panorama Ct</p> <p>City Trophy Club State TX Zip Code 76262</p> <p>Purpose of Disbursement PAC Fundraising Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.5329</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3270.00"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="8677.50"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Legacy Political Fund

A.	Full Name (Last, First, Middle Initial) Jamie King	Transaction ID: SB21B.5377 Date of Disbursement 03 / 17 / 2011
	Mailing Address 106 Panorama Ct	Amount of Each Disbursement this Period 3450.00
	City Trophy Club State TX Zip Code 76262	
	Purpose of Disbursement PAC Fundraising Consulting	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Jamie King	Transaction ID: SB21B.5378 Date of Disbursement 03 / 17 / 2011
	Mailing Address 106 Panorama Ct	Amount of Each Disbursement this Period 77.12
	City Trophy Club State TX Zip Code 76262	
	Purpose of Disbursement Reimbursement: PAC Travel Expenses	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Jamie King	Transaction ID: SB21B.5511 Date of Disbursement 04 / 19 / 2011
	Mailing Address 106 Panorama Ct	Amount of Each Disbursement this Period 2235.00
	City Trophy Club State TX Zip Code 76262	
	Purpose of Disbursement PAC Fundraising Consulting	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	5762.12
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Legacy Political Fund

A.

Full Name (Last, First, Middle Initial)  
Jamie King

Transaction ID: SB21B.5512  
Date of Disbursement

Mailing Address 106 Panorama Ct

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

City Trophy Club State TX Zip Code 76262

Amount of Each Disbursement this Period

Purpose of Disbursement  
Reimbursement: PAC Off.Supplies/PO Box

199.26
--------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Staples

Transaction ID: SB21B.5512.0  
Date of Disbursement

Mailing Address 200 N Kimball Ave, Suite 221

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

City Southlake State TX Zip Code 76092

Amount of Each Disbursement this Period

Purpose of Disbursement  
PAC Office Supplies

56.26
-------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
Jamie King

Transaction ID: SB21B.5540  
Date of Disbursement

Mailing Address 106 Panorama Ct

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	9		2	0	1	1

City Trophy Club State TX Zip Code 76262

Amount of Each Disbursement this Period

Purpose of Disbursement  
PAC Fundraising Consulting

1537.50
---------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

1736.76
---------

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

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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 43 / 61

<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)  
Legacy Political Fund

A.

Full Name (Last, First, Middle Initial)  
Jamie King

Transaction ID: SB21B.5541  
Date of Disbursement

Mailing Address 106 Panorama Ct

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	9		2	0	1	1

City Trophy Club State TX Zip Code 76262

Amount of Each Disbursement this Period

103.04
--------

Purpose of Disbursement  
Reimbursement: See Below

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
FedEx

Transaction ID: SB21B.5541.0  
Date of Disbursement

Mailing Address 942 S Shady Grove Rd

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

City Memphis State TN Zip Code 38120-4117

Amount of Each Disbursement this Period

32.54
-------

Purpose of Disbursement  
PAC Shipping

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
Jamie King

Transaction ID: SB21B.5564  
Date of Disbursement

Mailing Address 106 Panorama Ct

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	6		2	0	1	1

City Trophy Club State TX Zip Code 76262

Amount of Each Disbursement this Period

1327.50
---------

Purpose of Disbursement  
PAC Fundraising Consulting

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

1430.54
---------

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Legacy Political Fund

A.	Full Name (Last, First, Middle Initial) Jamie King	Transaction ID: SB21B.5567 Date of Disbursement 06 / 13 / 2011
	Mailing Address 106 Panorama Ct	
	City Trophy Club State TX Zip Code 76262	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement PAC Fundraising Consulting Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Jamie King	Transaction ID: SB21B.5588 Date of Disbursement 06 / 27 / 2011
	Mailing Address 106 Panorama Ct	
	City Trophy Club State TX Zip Code 76262	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement PAC Fundraising Consulting Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Koch & Hoos, LLC	Transaction ID: SB21B.5295 Date of Disbursement 01 / 19 / 2011
	Mailing Address 901 N Washington Street Suite 102	
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period 1500.00
	Purpose of Disbursement PAC Accounting/Compliance Services Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	5500.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Legacy Political Fund

A.	Full Name (Last, First, Middle Initial) Koch & Hoos, LLC	Transaction ID: SB21B.5364 Date of Disbursement 03 / 02 / 2011
	Mailing Address 901 N Washington Street Suite 102	Amount of Each Disbursement this Period 750.00
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement PAC Accounting/Compliance Services	Category/ Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Koch & Hoos, LLC	Transaction ID: SB21B.5370 Date of Disbursement 03 / 08 / 2011
	Mailing Address 901 N Washington Street Suite 102	Amount of Each Disbursement this Period 750.00
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement PAC Accounting/Compliance Services	Category/ Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Koch & Hoos, LLC	Transaction ID: SB21B.5559 Date of Disbursement 05 / 13 / 2011
	Mailing Address 901 N Washington Street Suite 102	Amount of Each Disbursement this Period 750.00
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement PAC Accounting/Compliance Services	Category/ Type
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2250.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Legacy Political Fund

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Koch &amp; Hoos, LLC</p> <p>Mailing Address 901 N Washington Street Suite 102</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement PAC Accounting/Compliance Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.5593</p> <p>Date of Disbursement MM / DD / YYYY 06 / 16 / 2011</p> <p>Amount of Each Disbursement this Period 750.00</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Luntz Global LLC</p> <p>Mailing Address 9165 Key Commons Ct</p> <p>City Manassas State VA Zip Code 20110</p> <p>Purpose of Disbursement PAC Travel Expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.5508</p> <p>Date of Disbursement MM / DD / YYYY 03 / 30 / 2011</p> <p>Amount of Each Disbursement this Period 250.00</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Maelstrom Technology Solutions LLC</p> <p>Mailing Address 200 S Executive Dr Suite 101</p> <p>City Brookfield State WI Zip Code 53005</p> <p>Purpose of Disbursement PAC Credit Card Processing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.5318</p> <p>Date of Disbursement MM / DD / YYYY 01 / 14 / 2011</p> <p>Amount of Each Disbursement this Period 384.50</p>

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

1384.50

**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)

<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)  
Legacy Political Fund

**A.** Full Name (Last, First, Middle Initial)  
Maelstrom Technology Solutions LLC

Mailing Address 200 S Executive Dr  
Suite 101

City Brookfield State WI Zip Code 53005

Purpose of Disbursement  
PAC Credit Card Processing

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.5321  
Date of Disbursement

01 / 19 / 2011

Amount of Each Disbursement this Period

167.10

**B.** Full Name (Last, First, Middle Initial)  
Maelstrom Technology Solutions LLC

Mailing Address 200 S Executive Dr  
Suite 101

City Brookfield State WI Zip Code 53005

Purpose of Disbursement  
PAC Credit Card Processing

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.5322  
Date of Disbursement

01 / 25 / 2011

Amount of Each Disbursement this Period

67.10

**C.** Full Name (Last, First, Middle Initial)  
Maelstrom Technology Solutions LLC

Mailing Address 200 S Executive Dr  
Suite 101

City Brookfield State WI Zip Code 53005

Purpose of Disbursement  
PAC Credit Card Processing

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.5323  
Date of Disbursement

01 / 28 / 2011

Amount of Each Disbursement this Period

8.20

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

242.40

**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)  
Legacy Political Fund

**A.** Full Name (Last, First, Middle Initial)  
Maelstrom Technology Solutions LLC

Mailing Address 200 S Executive Dr  
Suite 101

City Brookfield State WI Zip Code 53005

Purpose of Disbursement  
PAC Credit Card Processing

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.5324  
Date of Disbursement

MM / DD / YYYY  
02 / 01 / 2011

Amount of Each Disbursement this Period

557.20

**B.** Full Name (Last, First, Middle Initial)  
Maelstrom Technology Solutions LLC

Mailing Address 200 S Executive Dr  
Suite 101

City Brookfield State WI Zip Code 53005

Purpose of Disbursement  
PAC Credit Card Processing

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.5325  
Date of Disbursement

MM / DD / YYYY  
02 / 04 / 2011

Amount of Each Disbursement this Period

69.60

**C.** Full Name (Last, First, Middle Initial)  
Maelstrom Technology Solutions LLC

Mailing Address 200 S Executive Dr  
Suite 101

City Brookfield State WI Zip Code 53005

Purpose of Disbursement  
PAC Credit Card Processing

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.5326  
Date of Disbursement

MM / DD / YYYY  
02 / 08 / 2011

Amount of Each Disbursement this Period

202.80

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

829.60

**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)  
Legacy Political Fund

A.	Full Name (Last, First, Middle Initial) Maelstrom Technology Solutions LLC	Transaction ID: SB21B.5307 Date of Disbursement MM / DD / YYYY 02 / 10 / 2011
	Mailing Address 200 S Executive Dr Suite 101 City Brookfield State WI Zip Code 53005 Purpose of Disbursement PAC Web Hosting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Amount of Each Disbursement this Period 50.00

B.	Full Name (Last, First, Middle Initial) Maelstrom Technology Solutions LLC	Transaction ID: SB21B.5327 Date of Disbursement MM / DD / YYYY 02 / 14 / 2011
	Mailing Address 200 S Executive Dr Suite 101 City Brookfield State WI Zip Code 53005 Purpose of Disbursement PAC Credit Card Processing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Amount of Each Disbursement this Period 8.20

C.	Full Name (Last, First, Middle Initial) Maelstrom Technology Solutions LLC	Transaction ID: SB21B.5328 Date of Disbursement MM / DD / YYYY 02 / 15 / 2011
	Mailing Address 200 S Executive Dr Suite 101 City Brookfield State WI Zip Code 53005 Purpose of Disbursement PAC Credit Card Processing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Amount of Each Disbursement this Period 100.70

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>158.90</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

<input 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)  
Legacy Political Fund

A.	Full Name (Last, First, Middle Initial) Maelstrom Technology Solutions LLC	Transaction ID: SB21B.5469 Date of Disbursement MM / DD / YYYY 02 / 18 / 2011
	Mailing Address 200 S Executive Dr Suite 101 City Brookfield State WI Zip Code 53005 Purpose of Disbursement PAC Credit Card 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) ▼	Amount of Each Disbursement this Period 262.80 Category/Type

B.	Full Name (Last, First, Middle Initial) Maelstrom Technology Solutions LLC	Transaction ID: SB21B.5470 Date of Disbursement MM / DD / YYYY 02 / 23 / 2011
	Mailing Address 200 S Executive Dr Suite 101 City Brookfield State WI Zip Code 53005 Purpose of Disbursement PAC Credit Card 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) ▼	Amount of Each Disbursement this Period 106.00 Category/Type

C.	Full Name (Last, First, Middle Initial) Maelstrom Technology Solutions LLC	Transaction ID: SB21B.5471 Date of Disbursement MM / DD / YYYY 02 / 28 / 2011
	Mailing Address 200 S Executive Dr Suite 101 City Brookfield State WI Zip Code 53005 Purpose of Disbursement PAC Credit Card 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) ▼	Amount of Each Disbursement this Period 20.70 Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>389.50</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

<input 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)  
Legacy Political Fund

A.	Full Name (Last, First, Middle Initial) Maelstrom Technology Solutions LLC	Transaction ID: SB21B.5473 Date of Disbursement 03 / 02 / 2011
	Mailing Address 200 S Executive Dr Suite 101 City Brookfield State WI Zip Code 53005 Purpose of Disbursement PAC Credit Card 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) ▼	Amount of Each Disbursement this Period 132.75

B.	Full Name (Last, First, Middle Initial) Maelstrom Technology Solutions LLC	Transaction ID: SB21B.5477 Date of Disbursement 03 / 04 / 2011
	Mailing Address 200 S Executive Dr Suite 101 City Brookfield State WI Zip Code 53005 Purpose of Disbursement PAC Credit Card 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) ▼	Amount of Each Disbursement this Period 67.80

C.	Full Name (Last, First, Middle Initial) Maelstrom Technology Solutions LLC	Transaction ID: SB21B.5478 Date of Disbursement 03 / 11 / 2011
	Mailing Address 200 S Executive Dr Suite 101 City Brookfield State WI Zip Code 53005 Purpose of Disbursement PAC Credit Card 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) ▼	Amount of Each Disbursement this Period 25.70

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	226.25
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Legacy Political Fund

A.	Full Name (Last, First, Middle Initial) Maelstrom Technology Solutions LLC	Transaction ID: SB21B.5371 Date of Disbursement 03 / 12 / 2011
	Mailing Address 200 S Executive Dr Suite 101 City Brookfield State WI Zip Code 53005 Purpose of Disbursement PAC Web Hosting 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) ▼	Amount of Each Disbursement this Period 50.00 Category/Type

B.	Full Name (Last, First, Middle Initial) Maelstrom Technology Solutions LLC	Transaction ID: SB21B.5479 Date of Disbursement 03 / 16 / 2011
	Mailing Address 200 S Executive Dr Suite 101 City Brookfield State WI Zip Code 53005 Purpose of Disbursement PAC Credit Card 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) ▼	Amount of Each Disbursement this Period 201.40 Category/Type

C.	Full Name (Last, First, Middle Initial) Maelstrom Technology Solutions LLC	Transaction ID: SB21B.5539 Date of Disbursement 04 / 01 / 2011
	Mailing Address 200 S Executive Dr Suite 101 City Brookfield State WI Zip Code 53005 Purpose of Disbursement PAC Credit Card 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) ▼	Amount of Each Disbursement this Period 58.20 Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	309.60
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Legacy Political Fund

A.	Full Name (Last, First, Middle Initial) Maelstrom Technology Solutions LLC	Transaction ID: SB21B.5526 Date of Disbursement 04 / 11 / 2011
	Mailing Address 200 S Executive Dr Suite 101 City Brookfield State WI Zip Code 53005 Purpose of Disbursement PAC Web Hosting 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) ▼	Amount of Each Disbursement this Period 50.00

B.	Full Name (Last, First, Middle Initial) Maelstrom Technology Solutions LLC	Transaction ID: SB21B.5551 Date of Disbursement 05 / 11 / 2011
	Mailing Address 200 S Executive Dr Suite 101 City Brookfield State WI Zip Code 53005 Purpose of Disbursement PAC Web Hosting 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) ▼	Amount of Each Disbursement this Period 50.00

C.	Full Name (Last, First, Middle Initial) Maelstrom Technology Solutions LLC	Transaction ID: SB21B.5581 Date of Disbursement 06 / 10 / 2011
	Mailing Address 200 S Executive Dr Suite 101 City Brookfield State WI Zip Code 53005 Purpose of Disbursement PAC Web Hosting 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) ▼	Amount of Each Disbursement this Period 50.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	150.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Legacy Political Fund

A.	Full Name (Last, First, Middle Initial) Laura Zandstra Murray	Transaction ID: SB21B.5278 Date of Disbursement 01 / 13 / 2011
	Mailing Address 4512 Abbott #16	Amount of Each Disbursement this Period 313.00
	City Dallas State TX Zip Code 75205	
	Purpose of Disbursement PAC Administrative Consulting Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Laura Zandstra Murray	Transaction ID: SB21B.5282 Date of Disbursement 01 / 27 / 2011
	Mailing Address 4512 Abbott #16	Amount of Each Disbursement this Period 445.00
	City Dallas State TX Zip Code 75205	
	Purpose of Disbursement PAC Fundraising Consulting Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Laura Zandstra Murray	Transaction ID: SB21B.5315 Date of Disbursement 01 / 28 / 2011
	Mailing Address 4512 Abbott #16	Amount of Each Disbursement this Period 259.40
	City Dallas State TX Zip Code 75205	
	Purpose of Disbursement Reimbursement: See Below Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1017.40
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Legacy Political Fund

**A.** Full Name (Last, First, Middle Initial)  
American Airlines

Mailing Address PO Box 619612

City Dallas State TX Zip Code 75261-9612

Purpose of Disbursement PAC Airfare

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: SB21B.5315.0  
Date of Disbursement 01 / 28 / 2011

Amount of Each Disbursement this Period 259.40

Category/Type

[MEMO ITEM]

**B.** Full Name (Last, First, Middle Initial)  
Laura Zandstra Murray

Mailing Address 4512 Abbott #16

City Dallas State TX Zip Code 75205

Purpose of Disbursement PAC Administrative Consulting

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: SB21B.5330  
Date of Disbursement 02 / 22 / 2011

Amount of Each Disbursement this Period 480.00

Category/Type

**C.** Full Name (Last, First, Middle Initial)  
Laura Zandstra Murray

Mailing Address 4512 Abbott #16

City Dallas State TX Zip Code 75205

Purpose of Disbursement Reimbursement: PAC Travel Expenses

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: SB21B.5380  
Date of Disbursement 03 / 17 / 2011

Amount of Each Disbursement this Period 117.75

Category/Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ► 597.75

**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 57 / 61

<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)  
Legacy Political Fund

<b>A.</b> Full Name (Last, First, Middle Initial) The Four Seasons Hotel Mailing Address 2800 Pennsylvania Ave, NW City Washington State DC Zip Code 20007 Purpose of Disbursement PAC Event Exp./Off.Supplies/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) ▼	<b>Transaction ID:</b> SB21B.5365 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 1 1
	Amount of Each Disbursement this Period 187.91
<b>B.</b> Full Name (Last, First, Middle Initial) The Four Seasons Hotel Mailing Address 2800 Pennsylvania Ave, NW City Washington State DC Zip Code 20007 Purpose of Disbursement PAC Event Expense/Banquet 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) ▼	<b>Transaction ID:</b> SB21B.5510 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 1 1
	Amount of Each Disbursement this Period 47138.09

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

47326.00

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

82038.52

# 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)  
Legacy Political Fund

A.

Full Name (Last, First, Middle Initial)  
Jamie King

Mailing Address 106 Panorama Ct

City Trophy Club State TX Zip Code 76262

Purpose of Disbursement  
In Kind: Direct Mail Fundraising

Candidate Name  
JON C BRUNING

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: NE District: 00

Transaction ID: SB23.5507  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)  
Tom Thumb Store

Mailing Address 101 Trophy Lake Rd

City Trophy State TX Zip Code 76262

Purpose of Disbursement  
In-Kind: Postage

Candidate Name  
JON C BRUNING

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: NE District: 00

Transaction ID: SB23.5504  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)  
WICKER FOR SENATE

Mailing Address PO BOX 64

City JACKSON State MS Zip Code 39205

Purpose of Disbursement  
Earmarked From G.Seay III

Candidate Name  
ROGER F WICKER

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: MS District: 00

Transaction ID: SB23.5332  
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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" 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)  
Legacy Political Fund

<p><b>A.</b> Full Name (Last, First, Middle Initial) Steve Friess</p> <p>Mailing Address PO Box 11655</p> <p>City Jackson State WY Zip Code 83002</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28A.5496</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="400.00"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Michael Lunceford</p> <p>Mailing Address 4440 Shady Hills Dr</p> <p>City Dallas State TX Zip Code 75229</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28A.5302</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="400.00"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Matthew Taylor</p> <p>Mailing Address Po Box 2373 115 East Snow King Ave</p> <p>City Jackson State WY Zip Code 83001</p> <p>Purpose of Disbursement VOID: Uncashed Check - Orig. Disclosed 6/21/2010</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28A.5606</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="-500.00"/></p>

**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)

PAGE 60 / 61

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" 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)  
Legacy Political Fund

A.

Full Name (Last, First, Middle Initial)  
S. Wil VanLoh

Transaction ID: SB28A.5303  
Date of Disbursement

Mailing Address 1401 McKinney St, Suite 2700

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

City Houston State TX Zip Code 77010

Amount of Each Disbursement this Period

400.00
--------

Purpose of Disbursement  
Refund

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Christopher Zook

Transaction ID: SB28A.5384  
Date of Disbursement

Mailing Address One Riverway Suite 2000

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

City Houston State TX Zip Code 77056

Amount of Each Disbursement this Period

800.00
--------

Purpose of Disbursement  
Refund

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

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

1200.00
---------

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

1500.00
---------

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 61 / 61
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Legacy Political Fund

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Koch & Hoos, LLC	Nature of Debt (Purpose): PAC Accounting/Compliance Services
Mailing Address 901 N Washington Street Suite 102	
City State ZIP Code Alexandria VA 22314	

Outstanding Balance Beginning This Period <input type="text" value="1500.00"/>	<b>Transaction ID: SD10.5272</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1500.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Koch & Hoos, LLC	Nature of Debt (Purpose): PAC Accounting/Compliance Services
Mailing Address 901 N Washington Street Suite 102	
City State ZIP Code Alexandria VA 22314	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	<b>Transaction ID: SD10.5609</b>	
Amount Incurred This Period <input type="text" value="1500.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1500.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="1500.00"/>
2) <b>TOTALS</b> This Period (last page this line number only).....	<input type="text" value="1500.00"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text" value="1500.00"/>