SCHEDULE L–A (FEC Form 3X)
ITEMIZED RECEIPTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [X] 1a [ ] 2

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NAME OF COMMITTEE (In Full)

Freedom Party State Committee

A.

Full Name (Last, First, Middle Initial) / Full Organization Name: Globo-Chem Industries

Mailing Address: 111 Conglomerate Ave.

City: City | State: ST | Zip Code: 00000

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 02 / 14 / 2004

Amount of Each Receipt this Period: 2,000.00

Aggregate Year-to-Date: 2,000.00

B.

Full Name (Last, First, Middle Initial) / Full Organization Name: Lira, Max

Mailing Address: 111 Tribute Street

City: City | State: ST | Zip Code: 00000

Name of Employer or Principal Place of Business: Globo-Chem Industries

Occupation: Director of Acquisitions

Date of Receipt: 02 / 23 / 2004

Amount of Each Receipt this Period: 3,000.00

Aggregate Year-to-Date: 3,000.00

C.

Full Name (Last, First, Middle Initial) / Full Organization Name:

Mailing Address:

City: | State: | Zip Code:

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: / /

Amount of Each Receipt this Period:

Aggregate Year-to-Date:

D.

Full Name (Last, First, Middle Initial) / Full Organization Name:

Mailing Address:

City: | State: | Zip Code:

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: / /

Amount of Each Receipt this Period:

Aggregate Year-to-Date:

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

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