



**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

Westmoreland for Congress

Report Covering the Period:

From: 

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

To: 

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	87735.00	764779.84
(b) Total Contribution Refunds (from Line 20(d)).....	3000.00	4750.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	84735.00	760029.84
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	46774.79	576196.66
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	2047.97
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	46774.79	574148.69
8. Cash on Hand at Close of Reporting Period (from Line 27).....	373769.83	
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).....	0.00	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-694-1100

**POST-ELECTION DETAILED  
SUMMARY PAGE**  
Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

Page 5

- . If the candidate participated in the general election, use this form for the 30-day Post-General report.
- . If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

Westmoreland for Congress

Report Covering the Period: From: 

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

**I. RECEIPTS**

COLUMN A Total this Period	COLUMN B Election Cycle Total as of <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>1</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>0</td><td>4</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table> (date of general election)	M	M	1	1	D	D	0	4	Y	Y	Y	Y	2	0	0	8	COLUMN C Total for <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>1</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>0</td><td>5</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table> (date after general election)  through <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>1</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>2</td><td>4</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table> (last day of reporting period)	M	M	1	1	D	D	0	5	Y	Y	Y	Y	2	0	0	8	M	M	1	1	D	D	2	4	Y	Y	Y	Y	2	0	0	8
M	M																																																	
1	1																																																	
D	D																																																	
0	4																																																	
Y	Y	Y	Y																																															
2	0	0	8																																															
M	M																																																	
1	1																																																	
D	D																																																	
0	5																																																	
Y	Y	Y	Y																																															
2	0	0	8																																															
M	M																																																	
1	1																																																	
D	D																																																	
2	4																																																	
Y	Y	Y	Y																																															
2	0	0	8																																															
11. CONTRIBUTIONS (other than loans) FROM:																																																		
(a) Individuals/Persons Other than Political Committees																																																		
(i) Itemized (Use Schedule A)																																																		
36700.00	377085.00	0.00																																																
(ii) Unitemized																																																		
1435.00	24934.00	0.00																																																
(iii) Total of contributions from individuals																																																		
38135.00	402019.00	0.00																																																
(b) Political Party Committees																																																		
0.00	0.00	0.00																																																
(c) Other Political Committees																																																		
49600.00	362760.84	0.00																																																

**POST-ELECTION DETAILED  
SUMMARY PAGE  
Report of Receipts and Disbursements**

<b>COLUMN A</b> Total this Period	<b>COLUMN B</b> Election Cycle Total as of * (date of general Election) (* See page 5 for date)	<b>COLUMN C</b> Total for * (date after general election) Through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
87735.00	764779.84	0.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b). All Other Loans		
0.00	0.00	0.00
(c). TOTAL LOANS (add Lines 13(a) and (b))		
0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (refunds, rebates, etc)		
0.00	2047.97	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc)		
0.00	0.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
87735.00	766827.81	0.00

POST ELECTION DETAILED SUMMARY PAGE

FEC Form 3 (Revised 1/01)

Report of Receipts and Disbursements

Page 7

Write or Type Committe Name

Westmoreland for Congress

Report the covering period

From:

MM 10

DD 16

YYYY 2008

To:

MM 11

DD 24

YYYY 2008

II. DISBURSEMENTS

COLUMN A Total this period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * Through * (date after general election) (last day of reporting period) (* See page 5 for date)
<b>17. OPERATING EXPENDITURES</b>		
46774.79	576196.66	7100.00
<b>18. TRANSFER TO OTHER AUTHORIZED COMMITTEES</b>		
0.00	201000.00	0.00
<b>19. LOAN PAYMENTS</b>		
(a) Of Loans Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) Of All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b) )		
0.00	0.00	0.00
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>		
(a) Individuals/Persons Other Than Political Committees		
0.00	750.00	0.00
(b) Political Party Committees		
0.00	0.00	0.00

**POST ELECTION DETAILED SUMMARY PAGE**

FEC Form 3 (Revised 1/01)

Report of Receipts and Disbursements

Page 8

COLUMN A Total this period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	Total for * Through *	COLUMN C (date after general election) (last day of reporting period) (* See page 5 for date)
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(c) Other political committees (such as PACs)

3000.00	4000.00	0.00
---------	---------	------

(d) TOTAL CONTRIBUTION REFUNDS (See Lines 20(a), (b) and (c) )

3000.00	4750.00	0.00
---------	---------	------

21. OTHER DISBURSEMENTS

11100.00	120262.00	1000.00
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22. TOTAL DISBURSEMENTS (add lines 17, 18, 19(c), 20(d), and 21)

60874.79	902208.66	8100.00
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**III. NET CONTRIBUTIONS (OTHER THAN LOANS)**

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract line 20(d) from Line 11(e))

84735.00	760029.84	0.00
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**IV. NET OPERATING EXPENDITURES**

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract line 14 from Line 17)

46774.79	574148.69	7100.00
----------	-----------	---------

**V. CASH SUMMARY**

23. CASH ON HAND AT BEGINING OF REPORTING PERIOD .....	346909.62
24. TOTAL RECEIPTS AT THIS PERIOD (from Line 16).....	87735.00
25. SUBTOTAL(add Line 23 and Line 24) .....	434644.62
26. TOTAL DISBURSEMENTS AT THIS PERIOD (from Line 22).....	60874.79
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 26 from Line 25).....	373769.83

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

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

FOR LINE NUMBER: PAGE 7 / 45  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Action Comm. for Rural Electrificat. PAC  
Mailing Address 4301 Wilson Blvd

City State Zip Code  
Arlington VA 22203-1867

FEC ID number of contributing federal political committee. **C** C00002972

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 8000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 3 1 / 2 0 0 8

**Transaction ID:** 81031.C6310

Amount of Each Receipt this Period  
5000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
AGL Resources Inc. PAC  
Mailing Address PO Box 4569

City State Zip Code  
Atlanta GA 30302-4569

FEC ID number of contributing federal political committee. **C** C00145037

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 2 7 / 2 0 0 8

**Transaction ID:** 81027.C6304

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
American Bankers Assoc. PAC  
Mailing Address 1120 Connecticut Ave NW

City State Zip Code  
Washington DC 20036-3905

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 6500.00

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

**Transaction ID:** 81022.C6278

Amount of Each Receipt this Period  
4500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **10500.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 45  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
American Council of Engineering PAC  
Mailing Address 1015 15th St NW FI 8

City State Zip Code  
Washington DC 20005-2605

FEC ID number of contributing federal political committee. C C00010868

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt M M / D D / Y Y Y Y  
1 0 / 2 3 / 2 0 0 8  
**Transaction ID:** 81023.C6282  
 Amount of Each Receipt this Period 2000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Bryan Cave LLP Political Fund  
Mailing Address 700 13th St NW Ste 700

City State Zip Code  
Washington DC 20005-6619

FEC ID number of contributing federal political committee. C C00332643

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt M M / D D / Y Y Y Y  
1 0 / 2 2 / 2 0 0 8  
**Transaction ID:** 81022.C6279  
 Amount of Each Receipt this Period 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Coca-Cola Enterprises PAC  
Mailing Address Attn: Gene Rackley  
P.O. Box 723040

City State Zip Code  
Atlanta GA 31139-0040

FEC ID number of contributing federal political committee. C C00250134

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt M M / D D / Y Y Y Y  
1 0 / 2 4 / 2 0 0 8  
**Transaction ID:** 81024.C6284  
 Amount of Each Receipt this Period 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 4000.00

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



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

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

FOR LINE NUMBER: PAGE 9 / 45  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Committee to Re-Elect Jack Longino  
Mailing Address 1676 Columbia Ave  
City State Zip Code  
College Park GA 30337-2935  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
100.00  
Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 0 / 2 0 0 8  
Transaction ID: 81113.C6319  
Amount of Each Receipt this Period  
100.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Cooper Industries PAC  
Mailing Address PO Box 4446  
Attn: John Breed  
City State Zip Code  
Houston TX 77210-4446  
FEC ID number of contributing federal political committee. **C** C00099937  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
2000.00  
Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 7 / 2 0 0 8  
Transaction ID: 81027.C6305  
Amount of Each Receipt this Period  
2000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Electrical Construction PAC  
Mailing Address 3 Bethesda Metro Ctr  
City State Zip Code  
Bethesda MD 20814-5330  
FEC ID number of contributing federal political committee. **C** C00113811  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
10000.00  
Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 4 / 2 0 0 8  
Transaction ID: 81024.C6289  
Amount of Each Receipt this Period  
1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3100.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 45  
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 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Farm Credit PAC  
Mailing Address 50 F St NW Ste 900  
City Washington State DC Zip Code 20001-1530  
FEC ID number of contributing federal political committee. **C** C00193631  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1500.00  
Date of Receipt 11 / 04 / 2008  
Transaction ID: 81113.C6311  
Amount of Each Receipt this Period 1500.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Federation of American Hospitals PAC  
Mailing Address 801 Pennsylvania Ave NW Ste 245  
City Washington State DC Zip Code 20004-2697  
FEC ID number of contributing federal political committee. **C** C00002261  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 11 / 04 / 2008  
Transaction ID: 81118.C6331  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Georgia Power Company PAC  
Mailing Address 241 Ralph McGill Blvd NE Bin 10230  
City Atlanta State GA Zip Code 30308-3374  
FEC ID number of contributing federal political committee. **C** C00119776  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 10000.00  
Date of Receipt 11 / 04 / 2008  
Transaction ID: 81113.C6328  
Amount of Each Receipt this Period 3000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 5500.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 11 / 45  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
KPMG PAC  
Mailing Address PO Box 18254  
City Washington State DC Zip Code 20036-8254  
FEC ID number of contributing federal political committee. **C** C00280222  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 10 / 30 / 2008  
Transaction ID: 81030.C6309  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Natl Assoc. of Convenience Stores PAC  
Mailing Address 1600 Duke St  
Attn: Elizabeth Sabin  
City Alexandria State VA Zip Code 22314-3466  
FEC ID number of contributing federal political committee. **C** C00126763  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 11 / 04 / 2008  
Transaction ID: 81113.C6327  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
National Assoc of Insurance and  
Mailing Address Finacial Advisors PAC  
2901 Telestar Court  
City Falls Church State VA Zip Code 22042  
FEC ID number of contributing federal political committee. **C** C00005249  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 10 / 28 / 2008  
Transaction ID: 81028.C6307  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 45  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
National Beer Wholesalers Assoc PAC  
Mailing Address 1101 King St Ste 600

City State Zip Code  
Alexandria VA 22314-2965

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 1 7 / 2 0 0 8

**Transaction ID:** 81017.C6257

Amount of Each Receipt this Period  
2500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
National Lumber & Building Material PAC  
Mailing Address 2025 M St NW Ste 800

City State Zip Code  
Washington DC 20036-2422

FEC ID number of contributing federal political committee. **C** C00039214

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 2 7 / 2 0 0 8

**Transaction ID:** 81027.C6306

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Publix Super Markets Associates PAC  
Mailing Address PO Box 407

City State Zip Code  
Lakeland FL 33802-0407

FEC ID number of contributing federal political committee. **C** C00400705

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 1 7 / 2 0 0 8

**Transaction ID:** 81017.C6255

Amount of Each Receipt this Period  
2500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 6000.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 45  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

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

Mailing Address 430 N Michigan Ave

City State Zip Code  
Chicago IL 60611-4011

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

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

**Transaction ID:** 81021.C6277

Amount of Each Receipt this Period  
5000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Synovus Effective Leadership PAC

Mailing Address PO Box 120  
Attn: G. Sanders Griffith, III

City State Zip Code  
Columbus GA 31902-0120

FEC ID number of contributing federal political committee. **C** C00032607

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 6000.00

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

**Transaction ID:** 81024.C6290

Amount of Each Receipt this Period  
5000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Truck PAC

Mailing Address 430 First Street SE  
Attn: Gray L. Mitchell

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00002881

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 0 / 3 0 / 2 0 0 8

**Transaction ID:** 81030.C6308

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **11000.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 45  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

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

Mailing Address 55 Glenlake Pkwy NE  
Attn: Clifford L. Hinds

City Atlanta State GA Zip Code 30328-3474

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

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

**Transaction ID:** 81020.C6264

Amount of Each Receipt this Period  
4000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
US Oncology Good Government Fund

Mailing Address 16825 Northchase Dr Ste 1300

City Houston State TX Zip Code 77060-6012

FEC ID number of contributing federal political committee. **C** C00339655

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

**Transaction ID:** 81020.C6265

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Vulcan Materials Co. PAC

Mailing Address P.O. Box 385014

City Birmingham State AL Zip Code 35238-5014

FEC ID number of contributing federal political committee. **C** C00116020

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 1 / 0 3 / 2 0 0 8

**Transaction ID:** 81113.C6325

Amount of Each Receipt this Period  
1500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **6500.00**

**TOTAL** This Period (last page this line number only) ..... ► **49600.00**

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 45  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Bill Adcox

Mailing Address 407 Mount Vernon Trce

City State Zip Code  
Peachtree City GA 30269-2641

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

Name of Employer Occupation  
Self Employed Physician

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

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

**Transaction ID:** 81113.C6321

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Daniel Ades

Mailing Address 90 Alton Rd TH 5

City State Zip Code  
Miami Beach FL 33139

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

Name of Employer Occupation  
Kawa Capital Management Investment Manager

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 1 7 / 2 0 0 8

**Transaction ID:** 81017.C6247

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Thomas Barron

Mailing Address 8 Featherston Dr

City State Zip Code  
Newnan GA 30263-1520

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

Name of Employer Occupation  
Lindseys Inc. Real Estate Broker

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

**Transaction ID:** 81027.C6301

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1750.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Sharon Bell		Date of Receipt
	Mailing Address 5844 Beauregard Dr		<input type="text" value="10"/> / <input type="text" value="17"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Nashville	TN	37215-4805
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 81017.C6248
Name of Employer Self-Employed		Occupation Business Executive	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="text" value="1000.00"/>
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			Receipt
<input type="checkbox"/> Other (specify) ▼		<input type="text" value="1000.00"/>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b>	Full Name (Last, First, Middle Initial) Bob Berrin		Date of Receipt
	Mailing Address 6445 S Mitchell Manor Cir		<input type="text" value="10"/> / <input type="text" value="17"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Miami	FL	33156-4878
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 81017.C6254
Name of Employer Information Requested		Occupation Information Requested	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="text" value="1000.00"/>
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			Receipt
<input type="checkbox"/> Other (specify) ▼		<input type="text" value="1000.00"/>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b>	Full Name (Last, First, Middle Initial) Huie Bray		Date of Receipt
	Mailing Address 167 Friendship Church Road		<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Brooks	GA	30205-1704
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 81027.C6302
Name of Employer Self-Employed		Occupation Builder	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="text" value="500.00"/>
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			Receipt
<input type="checkbox"/> Other (specify) ▼		<input type="text" value="500.00"/>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="2500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 17 / 45
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Connie Brezina	Date of Receipt MM / DD / YYYY 10 / 17 / 2008
	Mailing Address 155 Tillinghast Trce	<b>Transaction ID:</b> 81017.C6262
	City State Zip Code Newnan GA 30265-6000	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Christian Founders Today Founder	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Frank Cawood	Date of Receipt MM / DD / YYYY 10 / 20 / 2008
	Mailing Address 103 Clover Grn	<b>Transaction ID:</b> 81020.C6272
	City State Zip Code Peachtree City GA 30269-1672	Amount of Each Receipt this Period 2300.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Frank W. Cawood & Ass., Inc. CEO	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Chris Clark	Date of Receipt MM / DD / YYYY 10 / 20 / 2008
	Mailing Address 5203 Veterans Memorial Pkwy	<b>Transaction ID:</b> 81020.C6267
	City State Zip Code Lanett AL 36863-4275	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Information Requested Information Requested	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3800.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Anthony Collins		Date of Receipt
	Mailing Address 122 Hillcrest Rd		<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	West Point	GA	31833-5208
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Information Requested		Occupation Information Requested	Transaction ID: 81020.C6269
Receipt For: 2008		Election Cycle-to-Date ▼	
<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General	<input type="text" value="1500.00"/>	
<input type="checkbox"/> Other (specify) ▼			Amount of Each Receipt this Period
			<input type="text" value="1500.00"/>
			Receipt
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b>	Full Name (Last, First, Middle Initial) Herbert Crawford		Date of Receipt
	Mailing Address P.O. Box 263		<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Luthersville	GA	30251-0263
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Crawford Grading		Occupation Owner	Transaction ID: 81020.C6266
Receipt For: 2008		Election Cycle-to-Date ▼	
<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General	<input type="text" value="3300.00"/>	
<input type="checkbox"/> Other (specify) ▼			Amount of Each Receipt this Period
			<input type="text" value="1000.00"/>
			Receipt
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b>	Full Name (Last, First, Middle Initial) L.H. Davis		Date of Receipt
	Mailing Address 217 Mockingbird Lane		<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Brooks	GA	30205-2541
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Wood World Furniture		Occupation President	Transaction ID: 81023.C6283
Receipt For: 2008		Election Cycle-to-Date ▼	
<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼			Amount of Each Receipt this Period
			<input type="text" value="1000.00"/>
			Receipt
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="3500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 45  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Cynthia Fallon

Mailing Address 409 Cimaron Park

City State Zip Code  
Peachtree City GA 30269-4044

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

Name of Employer None Occupation Homemaker

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

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

**Transaction ID:** 81020.C6274

Amount of Each Receipt this Period  
2300.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
James Fallon

Mailing Address 409 Cimaron Park

City State Zip Code  
Peachtree City GA 30269-4044

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

Name of Employer Am Ret Occupation President

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

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

**Transaction ID:** 81020.C6273

Amount of Each Receipt this Period  
2300.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Drew Ferguson

Mailing Address 117 Hillcrest Rd

City State Zip Code  
West Point GA 31833-6134

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

Name of Employer Self Employed Occupation Dentist

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

**Transaction ID:** 81020.C6268

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5600.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 45  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Mark Griswell

Mailing Address PO Box 328

City Jonesboro State GA Zip Code 30237-0328

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

Name of Employer Self-Employed Occupation Real Estate

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 10 / 20 / 2008

Transaction ID: 81113.C6322

Amount of Each Receipt this Period 500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
David Hirsch

Mailing Address 4500 Powers Ferry Rd NW

City Atlanta State GA Zip Code 30327-3425

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

Name of Employer ECI Group Occupation Executive

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 10 / 17 / 2008

Transaction ID: 81017.C6250

Amount of Each Receipt this Period 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Michael Joblove

Mailing Address 3344 Bimini Ave

City Hollywood State FL Zip Code 33026-4638

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

Name of Employer Genovese Joblove & Battiste Occupation Attorney

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 10 / 17 / 2008

Transaction ID: 81017.C6246

Amount of Each Receipt this Period 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2500.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) George Johnson	Date of Receipt MM / DD / YYYY 10 / 17 / 2008
	Mailing Address PO Box 3524	<b>Transaction ID:</b> 81017.C6256
	City State Zip Code Spartanburg SC 29304-3524	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Michael Kogon	Date of Receipt MM / DD / YYYY 10 / 17 / 2008
	Mailing Address 335 Glen Lake Dr NW	<b>Transaction ID:</b> 81017.C6253
	City State Zip Code Atlanta GA 30327-4819	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Definition6	Occupation CEO	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Ross Kogon	Date of Receipt MM / DD / YYYY 10 / 17 / 2008
	Mailing Address 44 W Ferry Dr NE	<b>Transaction ID:</b> 81017.C6252
	City State Zip Code Atlanta GA 30319-4310	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Pull-A-Part	Occupation Executive	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	3000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Mac Langley		Date of Receipt
	Mailing Address PO Box 638		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 0 / 2 0 0 8
	City	State	Zip Code
	Lanett	AL	36863-0638
	FEC ID number of contributing federal political committee.		Transaction ID: 81020.C6275
		Amount of Each Receipt this Period	<input type="text"/> 1000.00
Name of Employer Langley Motor Company		Occupation Owner	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008	Election Cycle-to-Date ▼	<input type="text"/> 1000.00	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>B.</b>	Full Name (Last, First, Middle Initial) Campbell Lanier		Date of Receipt
	Mailing Address PO Box 510		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 0 / 2 0 0 8
	City	State	Zip Code
	West Point	GA	31833-0510
	FEC ID number of contributing federal political committee.		Transaction ID: 81020.C6276
		Amount of Each Receipt this Period	<input type="text"/> 2300.00
Name of Employer ITC Holding Company		Occupation CEO	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008	Election Cycle-to-Date ▼	<input type="text"/> 2300.00	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>C.</b>	Full Name (Last, First, Middle Initial) Gaines Lanier		Date of Receipt
	Mailing Address PO Box 70		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 4 / 2 0 0 8
	City	State	Zip Code
	West Point	GA	31833-0070
	FEC ID number of contributing federal political committee.		Transaction ID: 81024.C6287
		Amount of Each Receipt this Period	<input type="text"/> 1000.00
Name of Employer J. Smith Lanier & Co.		Occupation CEO	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008	Election Cycle-to-Date ▼	<input type="text"/> 1000.00	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 4300.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 45  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
J. Smith Lanier

Mailing Address PO Box 70

City State Zip Code  
West Point GA 31833-0070

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

Name of Employer Occupation  
None Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Amount of Each Receipt this Period: 1000.00

Transaction ID: 81024.C6285

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Melanie Lanier

Mailing Address 1601 Tanyard Rd

City State Zip Code  
Lanett AL 36863-6601

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

Name of Employer Occupation  
None Homemaker

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Amount of Each Receipt this Period: 2300.00

Transaction ID: 81020.C6271

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Joseph Mendola

Mailing Address 180 Green Meadow Ln

City State Zip Code  
Fayetteville GA 30215-6503

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Amount of Each Receipt this Period: 250.00

Transaction ID: 81113.C6320

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3550.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Donna Miller		Date of Receipt
	Mailing Address 185 Pebble Beach Dr		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 5 / 2 0 0 8
	City	State	Zip Code
	Fayetteville	GA	30215-2762
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 81113.C6313
Name of Employer None		Occupation Homemaker	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00
			Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b>	Full Name (Last, First, Middle Initial) Tyree Raptis		Date of Receipt
	Mailing Address 238 Lone Oak Rd		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 0 / 2 0 0 8
	City	State	Zip Code
	Grantville	GA	30220-2078
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 81020.C6270
Name of Employer East Georgia Grading		Occupation Owner	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 2000.00
			Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b>	Full Name (Last, First, Middle Initial) Otis Scarborough		Date of Receipt
	Mailing Address PO Box 7727		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 4 / 2 0 0 8
	City	State	Zip Code
	Columbus	GA	31908-7727
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 81024.C6286
Name of Employer Information Requested		Occupation Information Requested	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1000.00
			Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 3250.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 45  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Beno Schechter

Mailing Address 1139 Alfonso Ave

City State Zip Code  
Coral Gables FL 33146-3209

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 1 7 / 2 0 0 8

Transaction ID: 81017.C6249

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Rhonda Waddy

Mailing Address 160 Rock Hill Dr

City State Zip Code  
Fayetteville GA 30215-4951

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

Transaction ID: 81113.C6323

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Frank Wingate

Mailing Address PO Box 2728

City State Zip Code  
Alpharetta GA 30023-2728

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

Name of Employer Information Requested Occupation Information Requested  
HiTech Partners LLC Engineer

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1750.00

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

Transaction ID: 81113.C6312

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1750.00**

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

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

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

FOR LINE NUMBER: PAGE 26 / 45  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Ed Wyatt  
 Mailing Address 362 Lees Mill Rd  
 City Fayetteville State GA Zip Code 30214-3622  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Green Oil Company Occupation Gasoline Jobber  
 Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 2 7 / 2 0 0 8  
**Transaction ID:** 81027.C6299  
 Amount of Each Receipt this Period  
 200.00  
 Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Fred Zimmerman  
 Mailing Address 5844 Beauregard Dr  
 City Nashville State TN Zip Code 37215-4805  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Four Squared Ventures, LL-C Occupation Executive  
 Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 1 7 / 2 0 0 8  
**Transaction ID:** 81017.C6251  
 Amount of Each Receipt this Period  
 1000.00  
 Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	36700.00

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

A.

Full Name (Last, First, Middle Initial)  
ADP Easypay Atlanta

Transaction ID: 81118.E3054  
Date of Disbursement

Mailing Address 5680 New Northside Dr NW

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	8

City Atlanta State GA Zip Code 30328-4668

Amount of Each Disbursement this Period

93.33
-------

Purpose of Disbursement  
Payroll Expenses

Category/ Type
-------------------

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

PAYROLL EXPENSES

B.

Full Name (Last, First, Middle Initial)  
ADP Easypay Atlanta

Transaction ID: 81118.E3055  
Date of Disbursement

Mailing Address 5680 New Northside Dr NW

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	8

City Atlanta State GA Zip Code 30328-4668

Amount of Each Disbursement this Period

1567.95
---------

Purpose of Disbursement  
Payroll Taxes

Category/ Type
-------------------

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

PAYROLL TAXES

C.

Full Name (Last, First, Middle Initial)  
ADP Easypay Atlanta

Transaction ID: 81118.E3064  
Date of Disbursement

Mailing Address 5680 New Northside Dr NW

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	8

City Atlanta State GA Zip Code 30328-4668

Amount of Each Disbursement this Period

1539.50
---------

Purpose of Disbursement  
Payroll Taxes

Category/ Type
-------------------

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

PAYROLL TAXES

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

3200.78
---------

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

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

A.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: 81118.E3053 Date of Disbursement 10 / 16 / 2008
	Mailing Address PO Box 53852	Amount of Each Disbursement this Period 52.85
	City Phoenix State AZ Zip Code 85072-3852	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Transaction Fees 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) ▼
		TRANSACTION FEES

B.	Full Name (Last, First, Middle Initial) Anthem Media, LLC	Transaction ID: 81113.E3020 Date of Disbursement 10 / 22 / 2008
	Mailing Address 5524 Bee Cave Rd Ste B5	Amount of Each Disbursement this Period 535.00
	City West Lake Hills State TX Zip Code 78746-5248	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Media 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) ▼
		MEDIA CONSULTING

C.	Full Name (Last, First, Middle Initial) Aristotle	Transaction ID: 81118.E3065 Date of Disbursement 10 / 16 / 2008
	Mailing Address 205 Pennsylvania Ave SE	Amount of Each Disbursement this Period 30.30
	City Washington State DC Zip Code 20003-1164	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Transaction Fees 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) ▼
		TRANSACTION FEES

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>618.15</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

A.

Full Name (Last, First, Middle Initial)  
Aristotle

Mailing Address 205 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement  
Transaction Fees  
Candidate Name

Category/Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Transaction ID: 81118.E3066  
Date of Disbursement

10 / 23 / 2008

Amount of Each Disbursement this Period

83.45

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

TRANSACTION FEES

B.

Full Name (Last, First, Middle Initial)  
Aristotle

Mailing Address 205 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement  
Software  
Candidate Name

Category/Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Transaction ID: 81113.E3027  
Date of Disbursement

10 / 29 / 2008

Amount of Each Disbursement this Period

2300.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SOFTWARE

C.

Full Name (Last, First, Middle Initial)  
Arthur Murphy Florist

Mailing Address 6 Lagrange St

City Newnan State GA Zip Code 30263-2604

Purpose of Disbursement  
Flowers  
Candidate Name

Category/Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Transaction ID: 81113.E3013  
Date of Disbursement

10 / 20 / 2008

Amount of Each Disbursement this Period

95.78

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

FLOWERS

SUBTOTAL of Disbursements This Page (optional) ▶

2479.23

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

A.	Full Name (Last, First, Middle Initial) AT&T	Transaction ID: 81113.E3037 Date of Disbursement 11 / 02 / 2008
	Mailing Address 5565 Glenridge Connector NE	Amount of Each Disbursement this Period 125.04
	City Atlanta State GA Zip Code 30342-4756	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Cell Phone	CELL PHONE
	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) Bank of Coweta	Transaction ID: 81118.E3063 Date of Disbursement 10 / 16 / 2008
	Mailing Address PO Box 1218	Amount of Each Disbursement this Period 15.00
	City Newnan State GA Zip Code 30264-1218	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Bank Fees	BANK FEES
	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) Bank of Coweta	Transaction ID: 81113.E3014 Date of Disbursement 10 / 20 / 2008
	Mailing Address PO Box 1218	Amount of Each Disbursement this Period 3793.27
	City Newnan State GA Zip Code 30264-1218	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement See Below	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) .....	3933.31
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) BP Oil</p> <p>Mailing Address 501 Westlake Park Blvd</p> <p>City Houston State TX Zip Code 77079-2604</p> <p>Purpose of Disbursement 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> 81113.E3042</p> <p>Date of Disbursement 10 / 20 / 2008</p> <p>Amount of Each Disbursement this Period 199.88</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b> MEMO: TRAVEL EXPENSES</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) The Caucus Room</p> <p>Mailing Address 401 9th St NW</p> <p>City Washington State DC Zip Code 20004-2127</p> <p>Purpose of Disbursement Meeting Expense</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> 81113.E3046</p> <p>Date of Disbursement 10 / 20 / 2008</p> <p>Amount of Each Disbursement this Period 310.85</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b> MEMO: MEETING EXPENSE</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Crowne Plaza</p> <p>Mailing Address 1160 Thorn Run Rd</p> <p>City Coraopolis State PA Zip Code 15108-3152</p> <p>Purpose of Disbursement 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> 81113.E3044</p> <p>Date of Disbursement 10 / 20 / 2008</p> <p>Amount of Each Disbursement this Period 208.99</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b> MEMO: TRAVEL EXPENSES</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p>0.00</p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

A.	Full Name (Last, First, Middle Initial) CrystalTech Web Hosting	Transaction ID: 81113.E3045
	Mailing Address 1125 W Pinnacle Peak Rd Ste 103	Date of Disbursement 10 / 20 / 2008
	City Phoenix State AZ Zip Code 85027-1368	Amount of Each Disbursement this Period 80.85
	Purpose of Disbursement Web Hosting	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	<input type="checkbox"/> Category/Type
	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:	<b>[MEMO ITEM]</b> MEMO: WEB HOSTING

B.	Full Name (Last, First, Middle Initial) Delta Airlines	Transaction ID: 81113.E3048
	Mailing Address Hartsfield Intl Airport	Date of Disbursement 10 / 20 / 2008
	City Atlanta State GA Zip Code 30309-	Amount of Each Disbursement this Period 1116.00
	Purpose of Disbursement Travel Expenses	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	<input type="checkbox"/> Category/Type
	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:	<b>[MEMO ITEM]</b> MEMO: TRAVEL EXPENSES

C.	Full Name (Last, First, Middle Initial) Office Depot	Transaction ID: 81113.E3051
	Mailing Address 2200 Old Germantown Rd.	Date of Disbursement 10 / 20 / 2008
	City Delray Beach State FL Zip Code 33445-	Amount of Each Disbursement this Period 66.28
	Purpose of Disbursement Office Supplies	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	<input type="checkbox"/> Category/Type
	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:	<b>[MEMO ITEM]</b> MEMO: OFFICE SUPPLIES

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

A.

Full Name (Last, First, Middle Initial)  
SW Steakhouse

Mailing Address 3131 Las Vegas Blvd S

City Las Vegas State NV Zip Code 89109-1967

Purpose of Disbursement  
Meeting Expense

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 81113.E3049  
Date of Disbursement

10 / 20 / 2008

Amount of Each Disbursement this Period

410.11

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEETING EXPENSE

B.

Full Name (Last, First, Middle Initial)  
Sprayberrys BBQ

Mailing Address 229 Jackson St

City Newnan State GA Zip Code 30263-1156

Purpose of Disbursement  
Meeting Expense

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 81113.E3040  
Date of Disbursement

10 / 20 / 2008

Amount of Each Disbursement this Period

363.30

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEETING EXPENSE

C.

Full Name (Last, First, Middle Initial)  
U.S. Postal Service

Mailing Address 6545 Highway 54

City Sharpsburg State GA Zip Code 30277-6909

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 81113.E3041  
Date of Disbursement

10 / 20 / 2008

Amount of Each Disbursement this Period

595.57

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

MEMO: POSTAGE

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

A.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: 81113.E3050 Date of Disbursement
	Mailing Address P.O. Box 660108	<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2008"/>
	City Dallas State TX Zip Code 75266-0108	Amount of Each Disbursement this Period
	Purpose of Disbursement Cell Phone	<input type="text" value="120.01"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> MEMO: CELL PHONE
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Merchant Bankcard	Transaction ID: 81118.E3052 Date of Disbursement
	Mailing Address 5701 Lindero Canyon Rd # 3	<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2008"/>
	City Westlake Village State CA Zip Code 91362-4060	Amount of Each Disbursement this Period
	Purpose of Disbursement Transaction Fees	<input type="text" value="31.50"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	TRANSACTION FEES
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Bellwether Consulting Group	Transaction ID: 81113.E3015 Date of Disbursement
	Mailing Address 1775 I St NW Ste 700	<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2008"/>
	City Washington State DC Zip Code 20006-2416	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraising Consulting	<input type="text" value="832.13"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	FUNDRAISING CONSULTING
	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="863.63"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 35 / 45

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

A.

Full Name (Last, First, Middle Initial)  
Bellwether Consulting Group

Mailing Address 1775 I St NW Ste 700

City Washington State DC Zip Code 20006-2416

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 81113.E3025

Date of Disbursement

10 / 27 / 2008

Amount of Each Disbursement this Period

1970.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

FUNDRAISING CONSULTING

B.

Full Name (Last, First, Middle Initial)  
Bellwether Consulting Group

Mailing Address 1775 I St NW Ste 700

City Washington State DC Zip Code 20006-2416

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 81113.E3026

Date of Disbursement

10 / 29 / 2008

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

FUNDRAISING CONSULTING

C.

Full Name (Last, First, Middle Initial)  
Brad Bohannon

Mailing Address 70 Southfield Dr

City Newnan State GA Zip Code 30265-1911

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 81118.E3056

Date of Disbursement

10 / 16 / 2008

Amount of Each Disbursement this Period

1717.15

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SALARY

SUBTOTAL of Disbursements This Page (optional) ▶

4687.15

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

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

A.	Full Name (Last, First, Middle Initial) Brad Bohannon	Transaction ID: 81118.E3057 Date of Disbursement 10 / 30 / 2008
	Mailing Address 70 Southfield Dr	Amount of Each Disbursement this Period 1717.15
	City Newnan State GA Zip Code 30265-1911	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Salary 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) ▼
		SALARY

B.	Full Name (Last, First, Middle Initial) Wes Bruer	Transaction ID: 81118.E3058 Date of Disbursement 10 / 16 / 2008
	Mailing Address 2933 Lynda Ln	Amount of Each Disbursement this Period 2215.80
	City Columbus State GA Zip Code 31906-1337	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Salary 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) ▼
		SALARY

C.	Full Name (Last, First, Middle Initial) Wes Bruer	Transaction ID: 81113.E3030 Date of Disbursement 10 / 29 / 2008
	Mailing Address 2933 Lynda Ln	Amount of Each Disbursement this Period 541.12
	City Columbus State GA Zip Code 31906-1337	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Reimbursement for Mileage 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) ▼
		REIMBURSEMENT FOR MILEAGE

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	4474.07
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

A.

Full Name (Last, First, Middle Initial)  
Wes Bruer

Mailing Address 2933 Lynda Ln

City Columbus State GA Zip Code 31906-1337

Purpose of Disbursement

Salary

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 81118.E3059

Date of Disbursement

10 / 30 / 2008

Amount of Each Disbursement this Period

2215.80

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SALARY

B.

Full Name (Last, First, Middle Initial)  
Capitol Hill Club

Mailing Address 300 1st St SE

City Washington State DC Zip Code 20003-1801

Purpose of Disbursement

Meeting Expense

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 81113.E3036

Date of Disbursement

11 / 02 / 2008

Amount of Each Disbursement this Period

50.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

MEETING EXPENSE

C.

Full Name (Last, First, Middle Initial)  
Influential Data

Mailing Address 12121 Wilshire Blvd Ste 750

City Los Angeles State CA Zip Code 90025-1084

Purpose of Disbursement

Phone Calls

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 81113.E3039

Date of Disbursement

11 / 06 / 2008

Amount of Each Disbursement this Period

7100.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

PHONE CALLS

SUBTOTAL of Disbursements This Page (optional) ▶

9365.80

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

A.	Full Name (Last, First, Middle Initial) Chip Lake	Transaction ID: 81118.E3060 Date of Disbursement 10 / 16 / 2008
	Mailing Address 769 Nob Ridge Dr	Amount of Each Disbursement this Period 461.50
	City Marietta State GA Zip Code 30064-5736	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Salary Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SALARY

B.	Full Name (Last, First, Middle Initial) Chip Lake	Transaction ID: 81118.E3061 Date of Disbursement 10 / 30 / 2008
	Mailing Address 769 Nob Ridge Dr	Amount of Each Disbursement this Period 461.50
	City Marietta State GA Zip Code 30064-5736	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Salary Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SALARY

C.	Full Name (Last, First, Middle Initial) Chip Lake	Transaction ID: 81113.E3034 Date of Disbursement 10 / 30 / 2008
	Mailing Address 769 Nob Ridge Dr	Amount of Each Disbursement this Period 630.52
	City Marietta State GA Zip Code 30064-5736	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Reimbursement for Mileage Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	REIMBURSEMENT FOR MILEAGE

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1553.52
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) National Republican Congressional Comm.</p> <p>Mailing Address 320 1st St SE</p> <p>City Washington State DC Zip Code 20003-1838</p> <p>Purpose of Disbursement Event Ticket</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> 81113.E3010 <b>Date of Disbursement</b> 10 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 1050.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>EVENT TICKET</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Premier Mail Company</p> <p>Mailing Address PO Box 27048</p> <p>City Raleigh State NC Zip Code 27611-7048</p> <p>Purpose of Disbursement Direct Marketing</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> 81113.E3016 <b>Date of Disbursement</b> 10 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>DIRECT MARKETING</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Professional Data Services</p> <p>Mailing Address 264 N Lumpkin St # 202</p> <p>City Athens State GA Zip Code 30601-2742</p> <p>Purpose of Disbursement Compliance Consulting</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> 81113.E3029 <b>Date of Disbursement</b> 10 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>COMPLIANCE CONSULTING</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3550.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

PAGE 40 / 45

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Public Opinion Strategies Mailing Address 227 S Washington St Ste 320 City Alexandria State VA Zip Code 22314-3625 Purpose of Disbursement Polling Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81113.E3017 Date of Disbursement 10 / 22 / 2008
	Amount of Each Disbursement this Period 10000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 POLLING
<b>B.</b> Full Name (Last, First, Middle Initial) Willis Consulting Mailing Address 3126 Bransford Rd City Augusta State GA Zip Code 30909-3008 Purpose of Disbursement Fundraising Consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81113.E3028 Date of Disbursement 10 / 29 / 2008
	Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FUNDRAISING CONSULTING

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>12000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>46725.64</b>



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Breazeale for Congress</p> <p>Mailing Address PO Box 717</p> <p>City Elizabethtown State NC Zip Code 28337-0717</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name WILLIAM JAMES BREAZEALE</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 07</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81113.E3018</p> <p>Date of Disbursement 10 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Chambliss for Senate</p> <p>Mailing Address PO Box 12469</p> <p>City Atlanta State GA Zip Code 30355-2469</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name C SAXBY CHAMBLISS</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 00</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81113.E3023</p> <p>Date of Disbursement 10 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Culberson for Congress</p> <p>Mailing Address PO Box 41964</p> <p>City Houston State TX Zip Code 77241-1964</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name JOHN CULBERSON</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 07</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81113.E3032</p> <p>Date of Disbursement 10 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>4000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

A.

Full Name (Last, First, Middle Initial)  
Thelma Drake for Congress

Transaction ID: 81113.E3019  
Date of Disbursement

Mailing Address PO Box 61480

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

City Virginia Beach State VA Zip Code 23466-1480

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
CONTRIBUTION

Category/  
Type

Candidate Name  
THELMA D. DRAKE

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: VA District: 02

B.

Full Name (Last, First, Middle Initial)  
McCaul for Congress

Transaction ID: 81113.E3033  
Date of Disbursement

Mailing Address 1415 Westover Rd

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	8

City Austin State TX Zip Code 78703-1909

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
CONTRIBUTION

Category/  
Type

Candidate Name  
MICHAEL MCCAUL

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: TX District: 10

C.

Full Name (Last, First, Middle Initial)  
Musgrave for Congress

Transaction ID: 81113.E3021  
Date of Disbursement

Mailing Address 5401 Stone Creek Cir Unit 777

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

City Loveland State CO Zip Code 80538-7022

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
CONTRIBUTION

Category/  
Type

Candidate Name  
MARILYN MUSGRAVE

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: CO District: 04

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

3000.00
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TOTAL This Period (last page this line number only) .....

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# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

A.

Full Name (Last, First, Middle Initial)  
People for English

Mailing Address PO Box 1940

City Erie State PA Zip Code 16507-0940

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
PHILIP S. ENGLISH

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: PA District: 03

Transaction ID: 81113.E3022  
Date of Disbursement

10 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)  
Friends of Dave Reichert

Mailing Address PO Box 53322

City Bellevue State WA Zip Code 98015-3322

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
DAVE REICHERT

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: WA District: 08

Transaction ID: 81113.E3035  
Date of Disbursement

10 / 30 / 2008

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)  
John Shadeggs Friends

Mailing Address PO Box 45444

City Phoenix State AZ Zip Code 85064-5444

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
JOHN B. SHADEGG

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: AZ District: 03

Transaction ID: 81113.E3031  
Date of Disbursement

10 / 30 / 2008

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

3000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 44 / 45

<input type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input checked="" type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

A.

Full Name (Last, First, Middle Initial)  
Stivers Recount Fund

Transaction ID: 81210.E3075

Date of Disbursement

Mailing Address 81 S 5th St

<sup>M</sup>	<sup>M</sup>	/	<sup>D</sup>	<sup>D</sup>	/	<sup>Y</sup>	<sup>Y</sup>	<sup>Y</sup>	<sup>Y</sup>
1	1		1	7		2	0	0	8

City State Zip Code  
Columbus OH 43215-4323

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
RECOUNT FUND CONTRIBUTION

Category/  
Type

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Candidate Name  
STEVE STIVERS

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: OH District: 15

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

1000.00
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TOTAL This Period (last page this line number only) .....

11000.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input checked="" type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Action Comm. for Rural Electrificat. PAC <hr/> Mailing Address 4301 Wilson Blvd <hr/> City Arlington State VA Zip Code 22203-1867 <hr/> Purpose of Disbursement Refund of Contribution Candidate Name ACTION COMMITTEE. FOR RURAL ELECTRIFICATION. (ACRE) NATIONAL RURAL ELECTRIC COOPERATIVE Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 81113.E3038 Date of Disbursement 11 / 03 / 2008
	Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) Synovus Effective Leadership PAC <hr/> Mailing Address PO Box 120 Attn: G. Sanders Griffith, III <hr/> City Columbus State GA Zip Code 31902-0120 <hr/> Purpose of Disbursement Refund of Contribution Candidate Name SYNOVUS FINANCIAL CORP. GEORGIA FUND FOR EFFECTIVE LEADERSHIP Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 81113.E3024 Date of Disbursement 10 / 27 / 2008
	Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

3000.00

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

3000.00