

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
DENBURY RESOURCES INC POLITICAL COMMITTEE

ADDRESS (number and street) 5100 TENNYSON PARKWAY SUITE 1200
 Check if different than previously reported. (ACC)
PLANO TX 75024

2. **FEC IDENTIFICATION NUMBER** C00440651
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)
CITY STATE ZIPCODE

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

5. Covering Period 07 01 2008 through 09 30 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Edwin G Ricci

Signature of Treasurer Electronically Filed by Edwin G Ricci Date 10 15 2008

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

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
DENBURY RESOURCES INC POLITICAL COMMITTEE

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date										
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>		<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00
Y	Y	Y	Y									
2	0	0	8									
0.00												
(b) Cash on Hand at Beginning of Reporting Period	<table border="1" style="width: 100%;"><tr><td align="right">31882.70</td></tr></table>	31882.70										
31882.70												
(c) Total Receipts (from Line 19)	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00	<table border="1" style="width: 100%;"><tr><td align="right">39050.00</td></tr></table>	39050.00								
0.00												
39050.00												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<table border="1" style="width: 100%;"><tr><td align="right">31882.70</td></tr></table>	31882.70	<table border="1" style="width: 100%;"><tr><td align="right">39050.00</td></tr></table>	39050.00								
31882.70												
39050.00												
7. Total Disbursements (from Line 31)	<table border="1" style="width: 100%;"><tr><td align="right">12300.00</td></tr></table>	12300.00	<table border="1" style="width: 100%;"><tr><td align="right">19467.30</td></tr></table>	19467.30								
12300.00												
19467.30												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table border="1" style="width: 100%;"><tr><td align="right">19582.70</td></tr></table>	19582.70	<table border="1" style="width: 100%;"><tr><td align="right">19582.70</td></tr></table>	19582.70								
19582.70												
19582.70												
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00										
0.00												
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00										
0.00												

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
DENBURY RESOURCES INC POLITICAL COMMITTEE

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	0.00	39000.00
(i) Itemized (use Schedule A)	0.00	50.00
(ii) Unitemized	0.00	39050.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5)	0.00	39050.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	0.00	39050.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	0.00	39050.00

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	5167.30
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	5167.30
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10800.00	11800.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	1500.00	2500.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	12300.00	19467.30
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12300.00	19467.30

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	0.00	39050.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	39050.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	5167.30
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	5167.30

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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)
DENBURY RESOURCES INC POLITICAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Childers for Congress	Transaction ID: SB23.4161 Date of Disbursement
	Mailing Address PO BOX 177	<input type="text" value="09"/> <input type="text" value="05"/> / <input type="text" value="2008"/>
	City BOONEVILLE State MS Zip Code 38829	Amount of Each Disbursement this Period
	Purpose of Disbursement contribution	<input type="text" value="1000.00"/>
	Candidate Name Childers for Congress	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 01	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Citizens for Cochran	Transaction ID: SB23.4155 Date of Disbursement
	Mailing Address PO BOX 7183	<input type="text" value="09"/> <input type="text" value="05"/> / <input type="text" value="2008"/>
	City TUPELO State MS Zip Code 38802	Amount of Each Disbursement this Period
	Purpose of Disbursement Luncheon contribution	<input type="text" value="2000.00"/>
	Candidate Name Citizens for Cochran	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Friends of Bennie Thompson	Transaction ID: SB23.4159 Date of Disbursement
	Mailing Address P.O. Box 100 P.O. Box 100	<input type="text" value="09"/> <input type="text" value="05"/> / <input type="text" value="2008"/>
	City Bolton State MS Zip Code 39041	Amount of Each Disbursement this Period
	Purpose of Disbursement contribution	<input type="text" value="1000.00"/>
	Candidate Name Friends of Bennie Thompson	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 02	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DENBURY RESOURCES INC POLITICAL COMMITTEE

A. Full Name (Last, First, Middle Initial) Gregg Harper for Congress <hr/> Mailing Address POST OFFICE BOX 54344 <hr/> City PEARL State MS Zip Code 39288 <hr/> Purpose of Disbursement contribution Candidate Name Gregg Harper for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 03 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4157 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 5 / 2 0 0 8
	Amount of Each Disbursement this Period 1500.00
	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Mississippi Republican Party <hr/> Mailing Address P. O. Box 60 PO BOX 60 <hr/> City Jackson State MS Zip Code 39205 <hr/> Purpose of Disbursement Luncheon contribution Candidate Name Victory 2008 Federal Account Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 00 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4145 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 8
	Amount of Each Disbursement this Period 700.00
	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) MONTANANS FOR TESTER <hr/> Mailing Address PO BOX 1135 <hr/> City HELENA State MT Zip Code 59624 <hr/> Purpose of Disbursement Check # 1101 dated 6/9/08 - no good Candidate Name MONTANANS FOR TESTER Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00 Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4163 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 8
	Amount of Each Disbursement this Period -1000.00
	Category/ Type
	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

1200.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DENBURY RESOURCES INC POLITICAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MONTANANS FOR TESTER Mailing Address PO BOX 1135 City HELENA State MT Zip Code 59624 Purpose of Disbursement Replacement check for Q2 # 1101 Candidate Name MONTANANS FOR TESTER Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00 Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4153 Date of Disbursement 09 / 05 / 2008 Amount of Each Disbursement this Period 1000.00
B.	Full Name (Last, First, Middle Initial) Musgrove for US Senate Mailing Address PO BOX 24477 1076 HIGHLAND COLONY PARKWAY City JACKSON State MS Zip Code 39225 Purpose of Disbursement contribution Candidate Name Musgrove for US Senate Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 00 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4147 Date of Disbursement 07 / 01 / 2008 Amount of Each Disbursement this Period 2300.00
C.	Full Name (Last, First, Middle Initial) Wicker for Senate Mailing Address PO BOX 64 City JACKSON State MS Zip Code 39205 Purpose of Disbursement Luncheon contribution Candidate Name Wicker for Senate Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 00 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4142 Date of Disbursement 07 / 01 / 2008 Amount of Each Disbursement this Period 2300.00

SUBTOTAL of Disbursements This Page (optional)	5600.00
TOTAL This Period (last page this line number only)	10800.00

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DENBURY RESOURCES INC POLITICAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Warren Chisum	Transaction ID: SB29.4149 Date of Disbursement 08 / 07 / 2008
	Mailing Address P.O. Box 2061	Amount of Each Disbursement this Period 500.00
	City Pampa State TX Zip Code 79066	
	Purpose of Disbursement Rodeo fundraiser contribution	
	Candidate Name Warren Chisum	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Ms Elizabeth Ames Jones	Transaction ID: SB29.4164 Date of Disbursement 07 / 01 / 2008
	Mailing Address 3838 Oak Lawn Avenue Suite 850	Amount of Each Disbursement this Period -1000.00
	City Dallas State TX Zip Code 75219	
	Purpose of Disbursement check # 1102 dated 6/17/08 - no good	
	Candidate Name Ms Elizabeth Ames Jones	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Ms Elizabeth Ames Jones	Transaction ID: SB29.4154 Date of Disbursement 09 / 05 / 2008
	Mailing Address 3838 Oak Lawn Avenue Suite 850	Amount of Each Disbursement this Period 1000.00
	City Dallas State TX Zip Code 75219	
	Purpose of Disbursement Replacement check for Q2 # 1102	
	Candidate Name Ms Elizabeth Ames Jones	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	500.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 10 / 10

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

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NAME OF COMMITTEE (In Full)
DENBURY RESOURCES INC POLITICAL COMMITTEE

A.

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

Transaction ID: SB29.4151

Date of Disbursement

Mailing Address P.O. Box 717

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

City State Zip Code
Austin TX 78767

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Corpus Christi fundraiser contribution

--

Candidate Name
Michael Williams

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: TX District:

SUBTOTAL of Disbursements This Page (optional) ►

1000.00

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

1500.00
