

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Kellam for Congress

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 1 | 0 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

 To:

| | |
|---|---|
| M | M |
| 1 | 0 |

| | |
|---|---|
| D | D |
| 1 | 8 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

| | 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))..... | 156907.66 | 1159652.78 |
| (b) Total Contribution Refunds (from Line 20(d))..... | 0.00 | 2157.64 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))..... | 156907.66 | 1157495.14 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17)..... | 215763.87 | 1150998.78 |
| (b) Total Offsets to Operating Expenditures (from Line 14)..... | 0.00 | 0.00 |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))..... | 215763.87 | 1150998.78 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 146575.65 | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)..... | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)..... | 145100.00 | |

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

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name
Kellam for Congress

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 1 | 0 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

 To:

| | |
|---|---|
| M | M |
| 1 | 0 |

| | |
|---|---|
| D | D |
| 1 | 8 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

94920.00

773559.78

(ii) Unitemized.....

11837.66

76697.68

(iii) TOTAL of contributions

106757.66

850257.46

from individuals..... ▶

0.00

165.00

(b) Political Party Committees.....

50150.00

306500.00

(c) Other Political Committees (such as PACS).....

0.00

2730.32

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS

(other than loans)

156907.66

1159652.78

(add Lines 11(a)(iii), (b), (c), and (d))

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS

(a) Made or Guaranteed by the Candidate.....

45000.00

145100.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

45000.00

145100.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

201907.66

1304752.78

DETAILED SUMMARY PAGE
of Disbursements

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|---------------------------------------|--|
| 17. OPERATING EXPENDITURES..... | 215763.87 | 1150998.78 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES..... | 0.00 | 0.00 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate..... | 0.00 | 0.00 |
| (b) Of all Other Loans..... | 0.00 | 0.00 |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... | 0.00 | 0.00 |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees..... | 0.00 | 2157.64 |
| (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 20(a), (b), and (c))..... | 0.00 | 2157.64 |
| 21. OTHER DISBURSEMENTS..... | 0.00 | 3895.71 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶ | 215763.87 | 1157052.13 |

III. CASH SUMMARY

| | |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 160431.86 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3)..... | 201907.66 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 362339.52 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 215763.87 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 146575.65 |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 5 / 87 |
| | <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)
Kellam for Congress

A. Full Name (Last, First, Middle Initial)
Carolyn S Abshire

Mailing Address 311 S Saint Asaph St

City State Zip Code
Alexandria VA 22314-3745

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

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

Transaction ID: C869107

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Betty M. Allen

Mailing Address 2545 unbridled Lane

City State Zip Code
Virginia Beach VA 23456

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

Name of Employer unemployed Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 0 6

Transaction ID: C869686

Amount of Each Receipt this Period
150.00

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

C. Full Name (Last, First, Middle Initial)
Susan Cheryl Alper

Mailing Address 808 Bishopsgate Ln

City State Zip Code
Virginia Beach VA 23452-6125

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

Name of Employer Wilks & Harwood Occupation Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
750.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 0 6

Transaction ID: C853551

Amount of Each Receipt this Period
250.00

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

| | | |
|--|---|--------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 650.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 6 / 87 |
| | <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)
Kellam for Congress

A. Full Name (Last, First, Middle Initial)
Maryann Frawley Anderson

Mailing Address 104 Convention Dr

City State Zip Code
Virginia Beach VA 23462-6013

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 6

Transaction ID: C849994

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Donald Arthur Ashby

Mailing Address 313 Pickerel Ln

City State Zip Code
Virginia Beach VA 23456-4610

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

Name of Employer Information Requested Occupation Information Requested
Breedon & Collier Company, Inc. Manufacturers' Representative

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1250.00

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

Transaction ID: C867056

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Wendy A Attmore

Mailing Address 7616 Red Oak Lane

City State Zip Code
Charlotte NC 28226

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

Name of Employer Information Requested Occupation Information Requested
Self-Employed Writer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 6

Transaction ID: C867881

Amount of Each Receipt this Period
500.00

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) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 7 / 87 |
| | (check only one) |
| <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"/> | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Kellam for Congress

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) A. Robert C. Barclay, IV | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 9 / 2 0 0 6 | |
| Mailing Address 5111 Mariners Cove | | Transaction ID: C860306 | |
| City State Zip Code Virginia Beach VA 23435 | Amount of Each Receipt this Period 500.00 | | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Cooper Spong & Davis | Occupation Attorney | | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | | |

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) B. Stanley Graves Barr, Jr. | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 9 / 2 0 0 6 | |
| Mailing Address 7404 Cortlandt PI | | Transaction ID: C860338 | |
| City State Zip Code Norfolk VA 23505-2918 | Amount of Each Receipt this Period 500.00 | | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Kaufman & Canoles | Occupation Attorney | | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | | |

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) C. Timothy E. Barrow | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 3 / 2 0 0 6 | |
| Mailing Address 1928 Thunderbird Dr | | Transaction ID: C849551 | |
| City State Zip Code Virginia Beach VA 23454-2311 | Amount of Each Receipt this Period 100.00 | | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Tim Barrow and Associates | Occupation Planning and Consultation | | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 350.00 | | |

| | |
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| SUBTOTAL of Receipts This Page (optional) ▶ | 1100.00 |
| TOTAL This Period (last page this line number only) ▶ | _____ |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 8 / 87 |
| | <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)
Kellam for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Jon D. Becker, Esquire | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6 |
| Mailing Address PO Box 8915 | | Transaction ID: C853114 |
| City State Zip Code Virginia Beach VA 23450-8915 | Amount of Each Receipt this Period 250.00 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer Information Requested Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Information Requested Election Cycle-to-Date ▼ 250.00 | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. James W Beers | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6 |
| Mailing Address 207 SOutpoint Drive | | Transaction ID: C852892 |
| City State Zip Code Williamsburg VA 23185 | Amount of Each Receipt this Period 500.00 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer College of William and Mary Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Professor Election Cycle-to-Date ▼ 500.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Lawrence Bender | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6 |
| Mailing Address 10100 Santa Monica Blvd #1300 | | Transaction ID: C861234 |
| City State Zip Code Los Angeles CA 90067 | Amount of Each Receipt this Period 500.00 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer Lawrence Bender Productions, Inc. Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Producer Election Cycle-to-Date ▼ 500.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 1250.00 |
| TOTAL This Period (last page this line number only) ▶ | _____ |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 9 / 87 |
| | <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)
Kellam for Congress

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) A. Reinhart Billie Billiar | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 | |
| Mailing Address 3528 Sea Gull Rd | | Transaction ID: C853960 | |
| City State Zip Code Virginia Beach VA 23452-3716 | Amount of Each Receipt this Period 200.00 | | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Information Requested Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Information Requested Election Cycle-to-Date ▼ 400.00 | | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) B. William C. Bischoff | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 6 | |
| Mailing Address 512 Bushnell Dr. #615 | | Transaction ID: C868073 | |
| City State Zip Code Virginia Beach VA 23451 | Amount of Each Receipt this Period 1000.00 | | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Stallings and Bischoff Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Attorney Election Cycle-to-Date ▼ 4000.00 | | |

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) C. Blackwater Farms, Inc. | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 9 / 2 0 0 6 | |
| Mailing Address 213 62nd Street | | Transaction ID: C862613 | |
| City State Zip Code Virginia Beach VA 23451 | Amount of Each Receipt this Period 250.00 | | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Election Cycle-to-Date ▼ 250.00 | | |

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 1450.00 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 10 / 87 |
| | <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)
Kellam for Congress

A. Full Name (Last, First, Middle Initial)
Christopher F. Bonney

Mailing Address 813 Gilbert Circle

City State Zip Code
Virginia Beach VA 23454

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

Name of Employer Self Occupation Marketing Researcher

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

Transaction ID: C867183

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Katharine R Boyce

Mailing Address 106 W Rosemont Avenue

City State Zip Code
Alexandria VA 22301

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

Name of Employer Patton Boggs LLP Occupation Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 0 6

Transaction ID: C869497

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
William J Boyle

Mailing Address 2809 Central Avenue

City State Zip Code
Alexandria VA 22302

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

Name of Employer Fibergate Occupation Executive

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 0 6

Transaction ID: C869155

Amount of Each Receipt this Period
500.00

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

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1250.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 11 / 87 |
| | <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)
Kellam for Congress

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. John A Braun | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 |
| Mailing Address 6374 Dockser Ter | | Transaction ID: C869152 |
| City Falls Church State VA Zip Code 22041 | Amount of Each Receipt this Period 500.00 | |
| FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Teledyne Brown Engineering Inc Occupation Director | Election Cycle-to-Date ▼ 500.00 | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Stelianos Alex Bredologos | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Mailing Address 1044 Virginia Tech Trl | | Transaction ID: C865892 |
| City Virginia Beach State VA Zip Code 23455-6662 | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Bredologos Dentistry Occupation Dentist | Election Cycle-to-Date ▼ 1000.00 | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Susan G Brenner | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6 |
| Mailing Address 13370 SE Briggs Ave. | | Transaction ID: C867683 |
| City Milwaukie State OR Zip Code 97222-6114 | Amount of Each Receipt this Period 500.00 | |
| FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Not Applicable Occupation Homemaker | Election Cycle-to-Date ▼ 500.00 | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 2000.00 |
| TOTAL This Period (last page this line number only) ▶ | |

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

| | | |
|--|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 12 / 87 |
| | (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 | |

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)
Kellam for Congress

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. Gerald Bronstein | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 6 |
| Mailing Address 3470 Via Campesina | | Transaction ID: C866680 |
| City Rancho Palos Verde State CA Zip Code 90275-1783 | Amount of Each Receipt this Period 2000.00 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer Self-Employed | Occupation Investor | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 2000.00 | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Roy I Brooks | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 |
| Mailing Address 606N 5505 Seminary Rd. | | Transaction ID: C869096 |
| City Falls Church State VA Zip Code 22041 | Amount of Each Receipt this Period 250.00 | |
| FEC ID number of contributing federal political committee. C | | <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: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Steve Toshio Bullock | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 6 |
| Mailing Address 2512 Seaview Ave Apt 3 | | Transaction ID: C863286 |
| City Virginia Beach State VA Zip Code 23455-1448 | Amount of Each Receipt this Period 1500.00 | |
| FEC ID number of contributing federal political committee. C | | <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: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1500.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 3750.00 |
| TOTAL This Period (last page this line number only) ▶ | _____ |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 13 / 87 |
| | <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)
Kellam for Congress

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) A. William Cafaro | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 6 | |
| Mailing Address 86 Cocks Lane | | Transaction ID: C866717 | |
| City State Zip Code Locust Valley NY 11560 | | Amount of Each Receipt this Period 500.00 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Self-Employed Occupation Trial Lawyer | | | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 500.00 | |

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) B. W. C. Chick | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 | |
| Mailing Address 2028 Heron Ct | | Transaction ID: C860335 | |
| City State Zip Code Suffolk VA 23433-1302 | | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Information Requested Occupation Builder | | | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 1000.00 | |

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) C. J Whiting Chrisman | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 | |
| Mailing Address 226 Creekview Ln | | Transaction ID: C870011 | |
| City State Zip Code Hampton VA 23669-1088 | | Amount of Each Receipt this Period 2100.00 | |
| FEC ID number of contributing federal political committee. C | | <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: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 2100.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 3600.00 |
| TOTAL This Period (last page this line number only) ▶ | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 14 / 87 |
| | <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)
Kellam for Congress

A. Full Name (Last, First, Middle Initial)
Stan D Clark

Mailing Address 451 Court Street

City Portsmouth State VA Zip Code 23704

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

Name of Employer self-employed Occupation Attorney at Law

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

Transaction ID: C849609

Amount of Each Receipt this Period
 250.00

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

B. Full Name (Last, First, Middle Initial)
Nathaniel J. Cohen

Mailing Address 506 Wilder Rd

City Virginia Beach State VA Zip Code 23451-2346

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 3 / 2 0 0 6

Transaction ID: C849540

Amount of Each Receipt this Period
 250.00

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

C. Full Name (Last, First, Middle Initial)
Sanford M. Cohen

Mailing Address 1 Columbus Ctr. Suite 700

City Virginia Beach State VA Zip Code 23462-6761

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

Name of Employer Divaris Real Estate, Inc. Occupation Executive

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: C869293

Amount of Each Receipt this Period
 1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **1500.00**

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

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 15 / 87 |
| | <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)
Kellam for Congress

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. Ruth Puckett Cole | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6 |
| Mailing Address 4229 Battery Rd | | Transaction ID: C849997 |
| City State Zip Code Virginia Beach VA 23455-1507 | Amount of Each Receipt this Period 200.00 | |
| FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Not Applicable Occupation School Principal - Retired | | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 400.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Mark D Colley | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6 |
| Mailing Address 9 W. Cedar St. | | Transaction ID: C865903 |
| City State Zip Code Alexandria VA 22301 | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Holland & Knight LLP Occupation Attorney | | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Susan R. Colpitts | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6 |
| Mailing Address 150 W Main St, Ste 1550 | | Transaction ID: C869245 |
| City State Zip Code Norfolk VA 23510-1665 | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C | <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: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) | 2200.00 |
| TOTAL This Period (last page this line number only) | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 16 / 87 |
| | <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)
Kellam for Congress

| | | | |
|---|-------------------------------------|---|---|
| Full Name (Last, First, Middle Initial) A. Bert Crawford | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 | |
| Mailing Address 100 Holly Crescent | | Transaction ID: C859893 | |
| City Virginia beach | State VA | Zip Code 23451 | Amount of Each Receipt this Period 1000.00 |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer E. O. Crawford & Sons, Inc. | Occupation President | | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 2000.00 | | |

| | | | |
|---|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) B. John Francis Crowling | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 6 | |
| Mailing Address 529 Longleaf Rd | | Transaction ID: C862599 | |
| City Virginia Beach | State VA | Zip Code 23454-3347 | Amount of Each Receipt this Period 500.00 |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Virginia Beach Fishing Center | | Occupation General Manager | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | | |

| | | | |
|---|-------------------------------------|---|---|
| Full Name (Last, First, Middle Initial) C. William P Danielczyk | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 6 | |
| Mailing Address 3206 Sarah Joan Ct | | Transaction ID: C869090 | |
| City Oakton | State VA | Zip Code 22124-2264 | Amount of Each Receipt this Period 2100.00 |
| FEC ID number of contributing federal political committee. C | | <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: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 2100.00 | | |

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional) | 3600.00 |
| TOTAL This Period (last page this line number only) | (Empty box) |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 17 / 87 |
| | <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)
Kellam for Congress

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. scott daniels | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 6 |
| Mailing Address 3008 s. erin drive | | Transaction ID: C862474 |
| City State Zip Code oakton VA 22124 | Amount of Each Receipt this Period 500.00 | |
| FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer westerman hattori daniels adrian | Occupation lawyer | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Kim G. Davis | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 |
| Mailing Address 160 East 72nd Street Apt. 3A | | Transaction ID: C866026 |
| City State Zip Code New York City NY 10021 | Amount of Each Receipt this Period 2000.00 | |
| FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Charlesbank Capital Partners | Occupation Private Equity Investor | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 2000.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. David Darden Dickerson | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Mailing Address 115 S Lynnhaven Rd | | Transaction ID: C860340 |
| City State Zip Code Virginia Beach VA 23452-7422 | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Dickerson and Smith Law Group | Occupation Attorney | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1500.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 3500.00 |
| TOTAL This Period (last page this line number only) ▶ | _____ |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 18 / 87 |
| | <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)
Kellam for Congress

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

Mailing Address 1228 Bruton Ln

City Virginia Beach State VA Zip Code 23451-3767

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1050.00

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

Transaction ID: C860334

Amount of Each Receipt this Period
 500.00

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

B. Full Name (Last, First, Middle Initial)
H. Stewart Dunn

Mailing Address 1700 Pennsylvania Ave. N. W.

City Washington State DC Zip Code 20006

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

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

Transaction ID: C869163

Amount of Each Receipt this Period
 500.00

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

C. Full Name (Last, First, Middle Initial)
Lisa Claire Dwoskin

Mailing Address 9302 Lee Highway Suite 300

City Fairfax State VA Zip Code 22031

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2100.00

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

Transaction ID: C869199

Amount of Each Receipt this Period
 2100.00

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) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 19 / 87 |
| | <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)
Kellam for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. William a. Efir, II | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 6 |
| Mailing Address 3425 Archer Court | | Transaction ID: C868047 |
| City State Zip Code Virginia Beach VA 23452 | Amount of Each Receipt this Period 250.00 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer Not Applicable | Occupation Retired | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Susan Ervin | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 6 |
| Mailing Address 1636 Le | | Transaction ID: C868797 |
| City State Zip Code Berkeley CA 94709 | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer N/A | Occupation retired | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Troy Jay Farlow | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 6 |
| Mailing Address 217 W Queens Dr | | Transaction ID: C869082 |
| City State Zip Code Williamsburg VA 23185-4918 | Amount of Each Receipt this Period 250.00 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer Partnership for Peninsula's Future | Occupation Founder | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 2750.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 1500.00 |
| TOTAL This Period (last page this line number only) ▶ | _____ |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 20 / 87 |
| | <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)
Kellam for Congress

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

Mailing Address 704 Linkhorn Dr

City State Zip Code
Virginia Beach VA 23451-3919

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

Name of Employer and Recd
Tavss, Fletcher, Maiden and Reed

Occupation
Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

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

Transaction ID: C862444

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Paul D. Fraim

Mailing Address 5917 Studeley Ave

City State Zip Code
Norfolk VA 23508-1030

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

Name of Employer
Fraim & Fiorella

Occupation
Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 6

Transaction ID: C849988

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
martin freed

Mailing Address po bx 29

City State Zip Code
quinby VA 23423

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

Name of Employer
self-employed

Occupation
writer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

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

Transaction ID: C853586

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► **2000.00**

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

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 21 / 87 |
| | <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)
Kellam for Congress

| | | | |
|---|-------------------------------------|---|--|
| A. Full Name (Last, First, Middle Initial) martin freed | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 | |
| Mailing Address po bx 29 | | Transaction ID: C865862 | |
| City guinby | State VA | Amount of Each Receipt this Period 500.00 | |
| Zip Code 23423 | | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <input type="checkbox"/> | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer self-employed | Occupation writer | | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | | |

| | | | |
|---|-------------------------------------|---|--|
| B. Full Name (Last, First, Middle Initial) Marvin Stanley Friedberg | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6 | |
| Mailing Address 8204 Ocean Front Ave | | Transaction ID: C863305 | |
| City Virginia Beach | State VA | Amount of Each Receipt this Period 1000.00 | |
| Zip Code 23451-1800 | | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <input type="checkbox"/> | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Virginia Commonwealth Trading Company | Occupation CEO | | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | | |

| | | | |
|---|-------------------------------------|---|--|
| C. Full Name (Last, First, Middle Initial) Edward S Garcia, Jr. | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 6 | |
| Mailing Address 2209 Commerce Parkway | | Transaction ID: C867086 | |
| City Virginia Beach | State VA | Amount of Each Receipt this Period 1000.00 | |
| Zip Code 23454 | | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <input type="checkbox"/> | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Self | Occupation Attorney | | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | | |

| | |
|--|---------|
| 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) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 22 / 87 |
| | <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)
Kellam for Congress

| | | | |
|---|---|---|--|
| Full Name (Last, First, Middle Initial) A. Michael Frederick Gelardi | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6 | |
| Mailing Address 3105 Rivers Edge Cv | | Transaction ID: C867088 | |
| City State Zip Code Virginia Beach VA 23452-7100 | Amount of Each Receipt this Period 1000.00 | | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Information Requested Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Information Requested Election Cycle-to-Date ▼ 1000.00 | | |

| | | | |
|---|---|---|--|
| Full Name (Last, First, Middle Initial) B. Cynthia Byrnes Golubin | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 | |
| Mailing Address 2015 Scroggins Rd | | Transaction ID: C869121 | |
| City State Zip Code Alexandria VA 22302-3122 | Amount of Each Receipt this Period 1000.00 | | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Information Requested Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Information Requested Election Cycle-to-Date ▼ 1000.00 | | |

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) C. Stuart Robert Gordon | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6 | |
| Mailing Address 2316 Mariners Mark Way Apt 402 | | Transaction ID: C867052 | |
| City State Zip Code Virginia Beach VA 23451-1388 | Amount of Each Receipt this Period 200.00 | | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Information Requested Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Information Requested Election Cycle-to-Date ▼ 750.00 | | |

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 2200.00 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 23 / 87 |
| | <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)
Kellam for Congress

A. Full Name (Last, First, Middle Initial)
Mario P Granger

Mailing Address 1360 Riverside Dr

City State Zip Code
Virginia Beach VA 23453

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

Name of Employer Occupation
AMSEC LLC Logistics Specialist

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

280.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 6

Transaction ID: C849539

Amount of Each Receipt this Period
50.00

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

B. Full Name (Last, First, Middle Initial)
Gil Greeman

Mailing Address 725 12th Street, N.W.

City State Zip Code
Washington DC 20005

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

Name of Employer Occupation
Williams and Connolly Attorney

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

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

Transaction ID: C863578

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Joanna Uris Greene

Mailing Address 26260 White's Crossing

City State Zip Code
Hallwood VA 23359

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

Name of Employer Occupation
n/a retired

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 7 / 2 0 0 6

Transaction ID: C853609

Amount of Each Receipt this Period
500.00

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

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1050.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 24 / 87 |
| | <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)
Kellam for Congress

A. Full Name (Last, First, Middle Initial)
Jerald S Griffin

Mailing Address 1420 Ellerbeck Ct

City State Zip Code
Virginia Beach VA 23456-1486

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

Name of Employer
Portsmouth City Public Schools
Occupation
Teacher

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 6

Transaction ID: C867085

Amount of Each Receipt this Period
25.00

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

B. Full Name (Last, First, Middle Initial)
Josephine Rodriguez Guenther

Mailing Address 4605 Thoroughgood Dr

City State Zip Code
Virginia Beach VA 23455-4337

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

Name of Employer Information Requested
Occupation
Information Requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

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

Transaction ID: C860353

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Richard S Gunther

Mailing Address 1901 Avenue of the Stars
No. 620 310-552-354

City State Zip Code
Los Angeles CA 90067

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

Name of Employer Self-Employed
Occupation
Investor

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 0 6

Transaction ID: C866683

Amount of Each Receipt this Period
2000.00

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

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 2275.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 25 / 87 |
| | <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)
Kellam for Congress

| | | |
|---|---|---|
| A. Full Name (Last, First, Middle Initial) Nelson Helm Mailing Address 4112 Massie Ave No. 3 City State Zip Code Louisville KY 40207-2179 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6 Transaction ID: C860332 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer Information Requested Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Information Requested Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|---|---|--|
| B. Full Name (Last, First, Middle Initial) Anne B. Holton Mailing Address 1515 Confederate Ave. City State Zip Code Richmond VA 23227 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 6 Transaction ID: C869320 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer Not Applicable Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation First Lady of the Commonwealth of Virginia Election Cycle-to-Date ▼ 500.00 | |

| | | |
|--|--|--|
| C. Full Name (Last, First, Middle Initial) Dorothy M Isaacs Mailing Address 5200 Summit Dr City State Zip Code Fairfax VA 22030-6522 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6 Transaction ID: C869084 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer Information Requested Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Information Requested Election Cycle-to-Date ▼ 500.00 | |

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 2000.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 26 / 87 |
| | <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)
Kellam for Congress

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. Myra W Jennings | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6 |
| Mailing Address 1209 Merrifield Lndg | | Transaction ID: C849542 |
| City State Zip Code Virginia Beach VA 23464-5619 | Amount of Each Receipt this Period 200.00 | |
| FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Not Applicable Occupation Retired Teacher | Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Election Cycle-to-Date ▼ 1480.00 | | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) B. Myra W Jennings | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 6 |
| Mailing Address 1209 Merrifield Lndg | | Transaction ID: C853961 |
| City State Zip Code Virginia Beach VA 23464-5619 | Amount of Each Receipt this Period 500.00 | |
| FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Not Applicable Occupation Retired Teacher | Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Election Cycle-to-Date ▼ 1480.00 | | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) C. William Edmund Jennings, Jr | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6 |
| Mailing Address 1209 Merrifield Lndg | | Transaction ID: C849553 |
| City State Zip Code Virginia Beach VA 23464-5619 | Amount of Each Receipt this Period 100.00 | |
| FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Not Applicable Occupation Retired | Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Election Cycle-to-Date ▼ 400.00 | | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 800.00 |
| TOTAL This Period (last page this line number only) ▶ | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 27 / 87 |
| | <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)
Kellam for Congress

A. Full Name (Last, First, Middle Initial)
Lucius J Kellam, III

Mailing Address PO Box 350

City Belle Haven State VA Zip Code 23306

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

Name of Employer retired Occupation retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4100.00

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

Transaction ID: C861158

Amount of Each Receipt this Period
2000.00

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

B. Full Name (Last, First, Middle Initial)
Richard Kiefner, Jr.

Mailing Address 1356 Willow Wood Drive

City Norfolk State VA Zip Code 23509

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

Name of Employer Northwestern Mutual Life Insurance Com Occupation Insurance

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

Transaction ID: C865914

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Satish Korpe

Mailing Address 9244 East Hampton Dr. #615

City Capitol Heights State MD Zip Code 20743

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

Name of Employer Potowmac Engineers Occupation Engineers

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

Transaction ID: C867516

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ► 2750.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 28 / 87 |
| | <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)
Kellam for Congress

A. Full Name (Last, First, Middle Initial)
Constance Maureen Kumar

Mailing Address 3504 Holly Rd

City State Zip Code
Virginia Beach VA 23451-2822

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

Name of Employer Information Requested Occupation
Homemaker

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 6

Transaction ID: C849560

Amount of Each Receipt this Period
50.00

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

B. Full Name (Last, First, Middle Initial)
Surdendera Kumar

Mailing Address 3504 Holly Rd

City State Zip Code
Virginia Beach VA 23451

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

Name of Employer Information Requested Occupation
Engineering & Environment, Inc Engineer

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 6

Transaction ID: C849396

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Kevin Alan Lane

Mailing Address 1214 Rockbridge Ave

City State Zip Code
Norfolk VA 23508

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

Name of Employer Information Requested Occupation
US NAVY OFFICER

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 0 6

Transaction ID: C869524

Amount of Each Receipt this Period
250.00

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

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

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

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 29 / 87 |
| | <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)
Kellam for Congress

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. Lance Lavenstein | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 6 |
| Mailing Address 348 Southport Cir Ste 103 | | Transaction ID: C860330 |
| City State Zip Code Virginia Beach VA 23452-1181 | Amount of Each Receipt this Period 2100.00 | |
| FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Lavenstein Companies Occupation Executive | Election Cycle-to-Date ▼ 2100.00 | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Vivian Lawson | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Mailing Address 1015 South Bayshore Dr. | | Transaction ID: C859712 |
| City State Zip Code Va Beach VA 23451 | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer self employed Occupation small business owner | Election Cycle-to-Date ▼ 1000.00 | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Michael F. Leban | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 1 / 2 0 0 6 |
| Mailing Address 5010 Colonial Ave. | | Transaction ID: C863360 |
| City State Zip Code Norfolk VA 23508-2106 | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Leban & Imbrogno P.C. Occupation Attorney | Election Cycle-to-Date ▼ 1000.00 | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 4100.00 |
| TOTAL This Period (last page this line number only) ▶ | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 30 / 87 |
| | <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)
Kellam for Congress

| | | | |
|---|--|---|--|
| A. Full Name (Last, First, Middle Initial) Nancy L. Levin | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6 | |
| Mailing Address 701 Botetourt Gardens | | Transaction ID: C860342 | |
| City Norfolk | State VA | Zip Code 23507 | Amount of Each Receipt this Period 250.00 |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Newport Management Company, Inc. | Occupation Rental Property Management | | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | | |

| | | | |
|---|-------------------------------------|---|---|
| B. Full Name (Last, First, Middle Initial) Henry D. Light | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 | |
| Mailing Address 1221 S. Fairwater Dr. | | Transaction ID: C860345 | |
| City Norfolk | State VA | Zip Code 23508 | Amount of Each Receipt this Period 1000.00 |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Crenshaw, Ware and Martin | Occupation Attorney | | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 2500.00 | | |

| | | | |
|---|-------------------------------------|---|---|
| C. Full Name (Last, First, Middle Initial) Harvey Lee Lindsay, Jr | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 0 6 | |
| Mailing Address 7498 Maury Arch | | Transaction ID: C849321 | |
| City Norfolk | State VA | Zip Code 23505-1750 | Amount of Each Receipt this Period 1000.00 |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer NAI Harvey Lindsay | Occupation Real Estate Developer | | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 2000.00 | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 2250.00 |
| TOTAL This Period (last page this line number only) ▶ | _____ |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 31 / 87 |
| | <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)
Kellam for Congress

A. Full Name (Last, First, Middle Initial)
Robert I. Low, CPA

Mailing Address 2816 Charlemagne Dr

City State Zip Code
Virginia Beach VA 23451-1357

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

Name of Employer Not Applicable Occupation CPA, Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

250.00

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

Transaction ID: C865891

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Bruce W MacDonald

Mailing Address 345 Club View Drive

City State Zip Code
Great Falls VA 22066

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

Name of Employer Provectus Analytics Occupation President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 0 6

Transaction ID: C869807

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Bob R Maciver

Mailing Address 1021 Chumley Rd

City State Zip Code
Virginia Beach VA 23451-3734

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

Name of Employer NONE Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

-341.56

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 6

Transaction ID: C849549

Amount of Each Receipt this Period
25.00

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

SUBTOTAL of Receipts This Page (optional) ► **775.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 32 / 87 |
| | <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)
Kellam for Congress

| | | |
|---|--|--|
| A. Full Name (Last, First, Middle Initial) Helen A Manich Mailing Address 4300 Fox Haven Ln City Alexandria State VA Zip Code 22304-7401 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 Transaction ID: C869099 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer Information Requested Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Information Requested Election Cycle-to-Date ▼ 500.00 | |

| | | |
|---|--|--|
| B. Full Name (Last, First, Middle Initial) Benjamin Thomas Mansbach Mailing Address 2343 Ashmead Place, NW City Washington State DC Zip Code 20009 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 Transaction ID: C869070 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer Self Employed Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Attorney Election Cycle-to-Date ▼ 1500.00 | |

| | | |
|---|--|---|
| C. Full Name (Last, First, Middle Initial) Vincent J. Mastracco, Jr. Mailing Address 150 W Main St City Norfolk State VA Zip Code 23510-1665 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 Transaction ID: C860312 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer Kaufman & Canoles, PC Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Attorney Election Cycle-to-Date ▼ 4100.00 | |

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 2000.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 33 / 87 |
| | <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)
Kellam for Congress

A. Full Name (Last, First, Middle Initial)
Vincent J. Mastracco, Jr.

Mailing Address 150 W Main St

City Norfolk State VA Zip Code 23510-1665

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

Name of Employer Kaufman & Canoles, PC Occupation Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4100.00

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

Transaction ID: C865901

Amount of Each Receipt this Period
 1100.00

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

B. Full Name (Last, First, Middle Initial)
Robert William Mathieson

Mailing Address 500 Boswell Ct

City Virginia Beach State VA Zip Code 23452-5857

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

Name of Employer Dept. of Criminal Justice Serv Occupation Chief Deputy Director

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

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

Transaction ID: C849550

Amount of Each Receipt this Period
 100.00

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

C. Full Name (Last, First, Middle Initial)
Glenn B. McClanan

Mailing Address 425 S Witchduck Rd

City Virginia Beach State VA Zip Code 23462-3614

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

Name of Employer Information Requested Occupation Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

Transaction ID: C863276

Amount of Each Receipt this Period
 500.00

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

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1700.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 34 / 87 |
| | <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)
Kellam for Congress

A. Full Name (Last, First, Middle Initial)
Page C. McGaughy

Mailing Address 5905 Studeley Ave.

City Norfolk State VA Zip Code 23508

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

Name of Employer Not Applicable Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 6

Transaction ID: C868009

Amount of Each Receipt this Period
350.00

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

B. Full Name (Last, First, Middle Initial)
judith ann mchale

Mailing Address 8604 burning tree road

City bethesda State MD Zip Code 20817

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

Name of Employer Discovery Communications Occupation CEO

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: C866243

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Michael Stewart McHenry

Mailing Address 2557 Nestlebrook Trl

City Virginia Beach State VA Zip Code 23456-8298

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

Name of Employer Challenger Development, LLC Occupation Property Development & Management

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: C853110

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► 1850.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 35 / 87 |
| | <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)
Kellam for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. James Lee Miller | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 6 |
| Mailing Address 1722 Bolling Ave | | Transaction ID: C863282 |
| City Norfolk State VA Zip Code 23508-1353 | Amount of Each Receipt this Period 300.00 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer Information Requested Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Information Requested Election Cycle-to-Date ▼ 300.00 | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Jess Peck Miller, II | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6 |
| Mailing Address 28 Finns Point Ln | | Transaction ID: C849996 |
| City Hampton State VA Zip Code 23669-1075 | Amount of Each Receipt this Period 500.00 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer Information Requested Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Information Requested Election Cycle-to-Date ▼ 500.00 | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Williard J. Moody, Sr. | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6 |
| Mailing Address 500 Crawford St Ste 300 | | Transaction ID: C853115 |
| City Portsmouth State VA Zip Code 23704-3844 | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer Moody, Strople, Kloeppel, Basilone & H Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Attorney Election Cycle-to-Date ▼ 3000.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) | 1800.00 |
| TOTAL This Period (last page this line number only) | [] |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 36 / 87 |
| | <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)
Kellam for Congress

A. Full Name (Last, First, Middle Initial)
Katherine M Moore

Mailing Address 1369 Botetourt Gdns

City Norfolk State VA Zip Code 23517

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

Name of Employer More Music Group Occupation Bkg Agent

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

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

Transaction ID: C860304

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Antoinette G. Mote

Mailing Address 500 Pacific Ave Apt 911

City Virginia Beach State VA Zip Code 23451-3542

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

Name of Employer Chico's Occupation Retail Sales

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 6

Transaction ID: C849545

Amount of Each Receipt this Period
100.00

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

C. Full Name (Last, First, Middle Initial)
John Powell Myers

Mailing Address 300 W Franklin St Apt 1008E

City Richmond State VA Zip Code 23220-4940

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 8 / 2 0 0 6

Transaction ID: C862452

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► 1100.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 37 / 87 |
| | <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)
Kellam for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. James Hurst Newton | | Date of Receipt MM / DD / YYYY 10 / 03 / 2006 |
| Mailing Address 775 Sheraton Dr | | Transaction ID: C849544 |
| City Virginia Beach | State VA | Zip Code 23452-3826 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 500.00 | |
| Name of Employer CHKD | Occupation Computer Specialist | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 870.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. James Hurst Newton | | Date of Receipt MM / DD / YYYY 10 / 16 / 2006 |
| Mailing Address 775 Sheraton Dr | | Transaction ID: C867065 |
| City Virginia Beach | State VA | Zip Code 23452-3826 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 20.00 | |
| Name of Employer CHKD | Occupation Computer Specialist | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 870.00 | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Cornelius B. Owens | | Date of Receipt MM / DD / YYYY 10 / 02 / 2006 |
| Mailing Address 707 Greensboro Avenue | | Transaction ID: C840489 |
| City Virginia Beach | State VA | Zip Code 23451 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 300.00 | |
| Name of Employer Not Applicable | Occupation Retired | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 300.00 | |

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional) | 820.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 38 / 87 |
| | <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)
Kellam for Congress

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. Lewis F. Payne, Jr. | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 |
| Mailing Address 271 Stoney Crk E | | Transaction ID: C869150 |
| City State Zip Code Nellysford VA 22958-9512 | Amount of Each Receipt this Period 500.00 | |
| FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Occupation McGuire Woods President Lobbyist | Election Cycle-to-Date 500.00 | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Allen E. Perrel | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6 |
| Mailing Address 100 Moonlight Point | | Transaction ID: C865909 |
| City State Zip Code Suffolk VA 23434 | Amount of Each Receipt this Period 2100.00 | |
| FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Occupation Perrel Management Information Requested | Election Cycle-to-Date 2100.00 | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Harrison J. Perrine | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6 |
| Mailing Address 1082 Algonquin Road | | Transaction ID: C863210 |
| City State Zip Code Norfolk VA 23505 | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Occupation Perrine Investments, LLC Real Estate Investments | Election Cycle-to-Date 1000.00 | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) | 3600.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 39 / 87 |
| | <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)
Kellam for Congress

A. Full Name (Last, First, Middle Initial)
John Chapman Petersen

Mailing Address 10616 Moore St

City State Zip Code
Fairfax VA 22030-3912

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

Name of Employer Occupation
Surovell, Markel, Isaacs and Levy, PLC Attorney

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1500.00

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

Transaction ID: C869071

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Mary S. Petersen

Mailing Address 3926 Chain Bridge Rd

City State Zip Code
Fairfax VA 22030-3906

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

Name of Employer Occupation
Cassidy Pinkard Real Estate Agent

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 8 / 2 0 0 6

Transaction ID: C862433

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Mary S. Petersen

Mailing Address 3926 Chain Bridge Rd

City State Zip Code
Fairfax VA 22030-3906

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

Name of Employer Occupation
Cassidy Pinkard Real Estate Agent

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00

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

Transaction ID: C869072

Amount of Each Receipt this Period
250.00

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) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 40 / 87 |
| | <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)
Kellam for Congress

A. Full Name (Last, First, Middle Initial)
James M. Pickrell

Mailing Address 3812 Pine Rd

City Portsmouth State VA Zip Code 23703-3510

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

Name of Employer Kellam, Pickrell, Cox, & Tayloe
Occupation Attorneys

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt
MM / DD / YYYY
10 / 10 / 2006

Transaction ID: C862637

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Fred J Pollack

Mailing Address 1900 Sunset Harbor Dr.
Apt. PH-1

City Miami Beach State FL Zip Code 33139

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

Name of Employer N/A
Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt
MM / DD / YYYY
10 / 07 / 2006

Transaction ID: C853703

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Robert W. Remick

Mailing Address 909 Brandon Rd

City Virginia Beach State VA Zip Code 23451-3722

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

Name of Employer Robinson Sigma
Occupation Real Estate Broker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt
MM / DD / YYYY
10 / 09 / 2006

Transaction ID: C860337

Amount of Each Receipt this Period
500.00

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

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1250.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 41 / 87 |
| | <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)
Kellam for Congress

A. Full Name (Last, First, Middle Initial)
Robert John Robertson, Jr

Mailing Address 869 Old Cutler Rd

City State Zip Code
Virginia Beach VA 23454-6028

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 15 / 2006

Transaction ID: C867054

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
James E Rogers

Mailing Address 1410 Pumphouse Drive

City State Zip Code
Richmond VA 23221

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 08 / 2006

Transaction ID: C860299

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
C. E. Russell, Jr.

Mailing Address 227 74th St

City State Zip Code
Virginia Beach VA 23451-1907

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 13 / 2006

Transaction ID: C866093

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► **2000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 42 / 87 |
| | <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)
Kellam for Congress

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. Warren Edward Sachs | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6 |
| Mailing Address 125 86th St | | Transaction ID: C863348 |
| City State Zip Code Virginia Beach VA 23451-1817 | Amount of Each Receipt this Period 250.00 | |
| FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Information Requested Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Information Requested Election Cycle-to-Date ▼ 250.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Robert M. Salter | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6 |
| Mailing Address 111A 83rd St | | Transaction ID: C862447 |
| City State Zip Code Virginia Beach VA 23451-1805 | Amount of Each Receipt this Period 300.00 | |
| FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Goodman & Company Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation CPA Election Cycle-to-Date ▼ 300.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Anne Randolph Schumde | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6 |
| Mailing Address 917 Old Dominion Lane | | Transaction ID: C869028 |
| City State Zip Code Virginia Beach VA 23451 | Amount of Each Receipt this Period 50.00 | |
| FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer N/A Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Homemaker Election Cycle-to-Date ▼ 850.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional) | 600.00 |
| TOTAL This Period (last page this line number only) | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 43 / 87 |
| | <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)
Kellam for Congress

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

Mailing Address 870 United Nations Plaza - Apt 35E

City State Zip Code
New York NY 10017

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

Name of Employer Occupation
retired retired

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 0 6

Transaction ID: C863987

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Paula J Seward

Mailing Address 6723 Stonecutter Dr

City State Zip Code
Burke VA 22015-4191

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

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

Transaction ID: C869081

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Peter M Shaw

Mailing Address 500 Botetourt Street, # 205

City State Zip Code
Norfolk VA 23510

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

Name of Employer Occupation
Tidewater Community College Professor of Business and Economics

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

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

Transaction ID: C853520

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► **1500.00**

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

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 44 / 87 |
| | <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)
Kellam for Congress

A. Full Name (Last, First, Middle Initial)
Tom Cain Smith

Mailing Address 501 Surfside Ave

City State Zip Code
Virginia Beach VA 23451-3676

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

Name of Employer Self Employed Occupation Attorney and Counselor at Law

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 0 6

Transaction ID: C866681

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
David L Sparks

Mailing Address 3100 Shore Dr Apt 352

City State Zip Code
Virginia Beach VA 23451-1139

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

Name of Employer Not Applicable Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 0 6

Transaction ID: C853546

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 4635 Town Creek Dr

City State Zip Code
Williamsburg VA 23188-2690

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

250.00

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

Transaction ID: C862526

Amount of Each Receipt this Period
250.00

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) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 45 / 87 |
| | <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)
Kellam for Congress

A. Full Name (Last, First, Middle Initial)
Louisa M. Strayhorn

Mailing Address 408 Behl Ct

City State Zip Code
Virginia Beach VA 23464-1868

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

Name of Employer Occupation
Strayhorn Associates Business Consultant

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

600.00

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

Transaction ID: C860326

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Stephen Strickler

Mailing Address 1124 Windsor Road

City State Zip Code
Virginia Beach VA 23451

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

Name of Employer Occupation
Inman & Strickler attorney

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

1000.00

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

Transaction ID: C845682

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Daniel D Sullivan

Mailing Address 917 Charnell Drive Unit 302

City State Zip Code
Virginia Beach VA 23451

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

Name of Employer Occupation
Margaret Taylor Tax Preparer

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

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

Transaction ID: C866948

Amount of Each Receipt this Period
500.00

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

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 2000.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 46 / 87 |
| | <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)
Kellam for Congress

| | | |
|---|--|---|
| A. Full Name (Last, First, Middle Initial) Howard R Sykes | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 2 / 2 0 0 6 |
| Mailing Address Pembroke One Building Fifth Floor | | Transaction ID: C849991 |
| City Virginia Beach | State VA | Zip Code 23462 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Information Requested Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Information Requested Election Cycle-to-Date ▼ 250.00 | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |

| | | |
|---|---|---|
| B. Full Name (Last, First, Middle Initial) John Edmund Tankard, III | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 0 / 2 0 0 6 |
| Mailing Address PO Box 649 5002 Lankford Hwy. | | Transaction ID: C863278 |
| City Exmore | State VA | Zip Code 23350-0649 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer Information Requested Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Information Requested Election Cycle-to-Date ▼ 1000.00 | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |

| | | |
|---|--|---|
| C. Full Name (Last, First, Middle Initial) Bruce Lancer Thompson | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Mailing Address 456 Southside Rd | | Transaction ID: C860346 |
| City Virginia Beach | State VA | Zip Code 23451-7125 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 2100.00 |
| Name of Employer Information Requested Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Information Requested Chief Executive Officer Election Cycle-to-Date ▼ 2100.00 | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 3350.00 |
| TOTAL This Period (last page this line number only) ▶ | _____ |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 47 / 87 |
| | <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)
Kellam for Congress

A. Full Name (Last, First, Middle Initial)
Christopher P. Thompson

Mailing Address 456 Southside Rd

City Virginia Beach State VA Zip Code 23451-7125

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2100.00

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

Transaction ID: C860295

Amount of Each Receipt this Period
 2100.00

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

B. Full Name (Last, First, Middle Initial)
Gina E. Thompson

Mailing Address 456 Southside Rd

City Virginia Beach State VA Zip Code 23451-7125

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2100.00

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

Transaction ID: C860296

Amount of Each Receipt this Period
 2100.00

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

C. Full Name (Last, First, Middle Initial)
Courtney Allen Van Winkle

Mailing Address 2621 E Weyburn Rd

City Richmond State VA Zip Code 23235-3252

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

Name of Employer Allen, Allen, Allen and Allen Occupation Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

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

Transaction ID: C863316

Amount of Each Receipt this Period
 300.00

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

SUBTOTAL of Receipts This Page (optional) ► **4500.00**

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

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 48 / 87 |
| | <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)
Kellam for Congress

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) A. Thomson von Stein | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 | |
| Mailing Address 14216 Clayton St | | Transaction ID: C857999 | |
| City State Zip Code Rockville MD 20853 | Amount of Each Receipt this Period 300.00 | | |
| FEC ID number of contributing federal political committee. C | | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <input type="checkbox"/> | |
| Name of Employer self Occupation attorney | Election Cycle-to-Date <input type="checkbox"/> 300.00 | | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|---|---|--|
| Full Name (Last, First, Middle Initial) B. Elizabeth T Wachs | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 | |
| Mailing Address 289 Lake Dr | | Transaction ID: C865897 | |
| City State Zip Code Rhinebeck NY 12572-3249 | Amount of Each Receipt this Period 2100.00 | | |
| FEC ID number of contributing federal political committee. C | | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <input type="checkbox"/> | |
| Name of Employer Information Requested Occupation Information Requested | Election Cycle-to-Date <input type="checkbox"/> 2100.00 | | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|---|---|--|
| Full Name (Last, First, Middle Initial) C. Frederick Blair Wimbush | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 | |
| Mailing Address 1330 Baffy Loop | | Transaction ID: C853544 | |
| City State Zip Code Chesapeake VA 23320 | Amount of Each Receipt this Period 1000.00 | | |
| FEC ID number of contributing federal political committee. C | | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <input type="checkbox"/> | |
| Name of Employer Norfolk Southern Corp Occupation Executive | Election Cycle-to-Date <input type="checkbox"/> 1000.00 | | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 3400.00 |
| TOTAL This Period (last page this line number only) ▶ | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 49 / 87 |
| | <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)
Kellam for Congress

A. Full Name (Last, First, Middle Initial)
Glenn B. Wolfe, MD

Mailing Address 6295 Teal Lane

City State Zip Code
Chincoteague VA 23336

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

Name of Employer Occupation
Glenn B. Wolfe, M.D. P.C. Physician

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

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

Transaction ID: C858000

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Slipow, Robusto & Kellam, P.C.

Mailing Address 2625 Princess Anne Rd

City State Zip Code
Virginia Beach VA 23456-2507

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

Name of Employer Occupation

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

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

Transaction ID: C853131

Amount of Each Receipt this Period
1000.00

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

PARTNERSHIP--partners below if itemized

C. Full Name (Last, First, Middle Initial)
Rutter Mills, L.L.P.

Mailing Address 160 W Brambleton Ave

City State Zip Code
Norfolk VA 23510-2018

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

Name of Employer Occupation

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 0 6

Transaction ID: C860356

Amount of Each Receipt this Period
500.00

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

PARTNERSHIP--partners below if itemized

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 2000.00 |
| TOTAL This Period (last page this line number only) | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 50 / 87 |
| | <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)
Kellam for Congress

A. Full Name (Last, First, Middle Initial)
Robert L. Mills

Mailing Address 849 Greentree Arch

City Virginia Beach State VA Zip Code 23451-3787

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

Name of Employer PARTNER Occupation PARTNER

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 6

Transaction ID: C860359

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 1320 Marlwood Cir

City Charlotte State NC Zip Code 28227-4019

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

Name of Employer National Strategies, Inc. Occupation Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 6

Transaction ID: C880209

Amount of Each Receipt this Period
250.00

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

* Earmarked Contribution:
See Below

C. Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee, Inc.

Mailing Address 430 S Capitol St SE
FI 2

City Washington State DC Zip Code 20003-4024

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation Conduit total: 13,160.00

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ .00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 0 6

Transaction ID: C880209B

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional) ▶ **250.00**

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

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 51 / 87 |
| | <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)
Kellam for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. M A Gribin | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 |
| Mailing Address 10580 Wilshire Blvd | | Transaction ID: C867068 |
| City State Zip Code Los Angeles CA 90024-7614 | Amount of Each Receipt this Period 250.00 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer Information Requested Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Information Requested Election Cycle-to-Date ▼ 250.00 | |
| * Earmarked Contribution: See Below | | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Democratic Congressional Campaign Committee, Inc. | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 |
| Mailing Address 430 S Capitol St SE FI 2 | | Transaction ID: C867068B |
| City State Zip Code Washington DC 20003-4024 | Amount of Each Receipt this Period 250.00 | |
| FEC ID number of contributing federal political committee. C C00000935 | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Conduit total: 13,160.00 Election Cycle-to-Date ▼ .00 | |
| [MEMO ITEM] Note: Above Contribution earmarked through this organization. | | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) C. Byron Siliezar | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 6 |
| Mailing Address 10303 Mystic Meadow Way | | Transaction ID: C880208 |
| City State Zip Code Oakton VA 22124-1770 | Amount of Each Receipt this Period 500.00 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer NII Holdings Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Executive Election Cycle-to-Date ▼ 500.00 | |
| * Earmarked Contribution: See Below | | |

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 750.00 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

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

| | | | | |
|--|------------------------------|------------------------------|------------------------------|-----------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | | PAGE 52 / 87 | |
| | (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)
Kellam for Congress

A. Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee, Inc.

Mailing Address 430 S Capitol St SE
FI 2

City State Zip Code
Washington DC 20003-4024

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation
Conduit total: 13,160.00

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
.....00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 0 6

Transaction ID: C880208B

Amount of Each Receipt this Period
.....500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

| | | |
|--|---|---------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ |0.00 |
| TOTAL This Period (last page this line number only) | ▶ |94920.00 |

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

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 53 / 87 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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)
Kellam for Congress

A. AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Full Name (Last, First, Middle Initial)
Mailing Address 80 F STREET, N.W.

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C70000104

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 5 / 2 0 0 6

Transaction ID: C862594

Amount of Each Receipt this Period
 500.00

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

B. BOYD FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 15703
P.O. Box 15703

City Tallahassee State FL Zip Code 32317

FEC ID number of contributing federal political committee. **C** C00310607

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: C867682

Amount of Each Receipt this Period
 1000.00

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

C. CHANDLER VICTORY FUND

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 12678

City LEXINGTON State KY Zip Code 40583

FEC ID number of contributing federal political committee. **C** C00416883

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

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

Transaction ID: C867684

Amount of Each Receipt this Period
 2000.00

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

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 3500.00 |
| TOTAL This Period (last page this line number only) | |

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

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 54 / 87 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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)
Kellam for Congress

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. CONGRESSMAN WAXMAN CAMPAIGN COMMITTEE | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6 |
| Mailing Address 6380 Wilshire Blvd. #1612 | | Transaction ID: C867689 |
| City State Zip Code Los Angeles CA 90048 | Amount of Each Receipt this Period 2000.00 | |
| FEC ID number of contributing federal political committee. C C00013128 | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Occupation | Election Cycle-to-Date ▼ 2000.00 | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. CONYERS FOR CONGRESS | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 |
| Mailing Address 1031 N EDGEWOOD STREET | | Transaction ID: C867678 |
| City State Zip Code ARLINGTON VA 22201 | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C C00409797 | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Occupation | Election Cycle-to-Date ▼ 1000.00 | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Friends of Sheriff J McCabe | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 |
| Mailing Address 815 Lesner Avenue | | Transaction ID: C869272 |
| City State Zip Code Norfolk VA 23514 | Amount of Each Receipt this Period 150.00 | |
| FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Occupation | Election Cycle-to-Date ▼ 1150.00 | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 3150.00 |
| TOTAL This Period (last page this line number only) ▶ | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 55 / 87 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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)
Kellam for Congress

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

Mailing Address 236 MASSACHUSETTS AVENUE NE #508

City WASHINGTON State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C** C00415869

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

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

Transaction ID: C867667

Amount of Each Receipt this Period
 2000.00

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

B. Full Name (Last, First, Middle Initial)
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION AFL-CIO C

Mailing Address 17 Battery Place

City New York State NY Zip Code 10004

FEC ID number of contributing federal political committee. **C** C00158576

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 0 5 / 2 0 0 6

Transaction ID: C862766

Amount of Each Receipt this Period
 5000.00

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

C. Full Name (Last, First, Middle Initial)
INTERNATIONAL UNION OF OPERATING ENGINEERS

Mailing Address 1125 17 STREET NW

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C70001037

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 1 5 / 2 0 0 6

Transaction ID: C866679

Amount of Each Receipt this Period
 5000.00

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

| | | |
|--|---|----------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 12000.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 56 / 87 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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)
Kellam for Congress

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. IUPAT MEMBER AND FAMILY FUNDRAISING PC ACCOUNT | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 |
| Mailing Address 1750 New York Ave | | Transaction ID: C869104 |
| City State Zip Code Washington DC 20006 | Amount of Each Receipt this Period 5000.00 | |
| FEC ID number of contributing federal political committee. C C00349035 | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Occupation | Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Election Cycle-to-Date ▼ 5000.00 | | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) B. L A PAC | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6 |
| Mailing Address 6380 Wilshire Blvd. #1612 | | Transaction ID: C867179 |
| City State Zip Code Los Angeles CA 90048 | Amount of Each Receipt this Period 3000.00 | |
| FEC ID number of contributing federal political committee. C C00095059 | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Occupation | Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Election Cycle-to-Date ▼ 3000.00 | | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) C. LINCOLN DAVIS FOR CONGRESS | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 |
| Mailing Address PO Box 350 | | Transaction ID: C869287 |
| City State Zip Code Jamestown TN 38556 | Amount of Each Receipt this Period 2000.00 | |
| FEC ID number of contributing federal political committee. C C00365015 | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Occupation | Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Election Cycle-to-Date ▼ 2000.00 | | |

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 10000.00 |
| TOTAL This Period (last page this line number only) ▶ | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|------------------------------|---|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 57 / 87 |
| | (check only one) | |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" 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)
Kellam for Congress

A. Full Name (Last, First, Middle Initial)
Michaud for Congress

Mailing Address 213 Lisbon Street

City Lewiston State ME Zip Code 04240

FEC ID number of contributing federal political committee. **C** C00367821

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

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

Transaction ID: C869100

Amount of Each Receipt this Period
 1000.00

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

B. Full Name (Last, First, Middle Initial)
MODERATE VICTORY FUND

Mailing Address 6849 OLD DOMINION DRIVE SUITE 222

City MCLEAN State VA Zip Code 22101

FEC ID number of contributing federal political committee. **C** C00402255

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 0 3 / 2 0 0 6

Transaction ID: C869087

Amount of Each Receipt this Period
 1000.00

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

C. Full Name (Last, First, Middle Initial)
POLITICAL EDUCATIONAL FUND OF THE BUILDING AND CON

Mailing Address 815 16th St. NW Suite 600

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00003160

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: C869112

Amount of Each Receipt this Period
 1000.00

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) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 58 / 87 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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)
Kellam for Congress

A. Full Name (Last, First, Middle Initial)
SANFORD D. BISHOP JR. FOR CONGRESS

Mailing Address P. O. Box 909

City State Zip Code
Columbus GA 31902

FEC ID number of contributing federal political committee. **C** C00266940

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 6

Transaction ID: C869305

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
SHEET METAL WORKERS' INTERNATIONAL ASSOCIATION POL

Mailing Address 1750 New York Avenue NW

City State Zip Code
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00007542

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 0 6

Transaction ID: C869114

Amount of Each Receipt this Period
2500.00

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

C. Full Name (Last, First, Middle Initial)
TRANSPORTATION TRADES DEPARTMENT AFL-CIO POLITICAL

Mailing Address 888 16TH ST NW SUITE 650

City State Zip Code
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C** C00280909

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

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

Transaction ID: C869479

Amount of Each Receipt this Period
1000.00

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

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 4500.00 |
| TOTAL This Period (last page this line number only) | |

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

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 59 / 87 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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)
Kellam for Congress

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

Mailing Address 10605 CONCORD STREET

City State Zip Code
KENSINGTON MD 20895

FEC ID number of contributing federal political committee. **C** C00416743

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

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

Transaction ID: C867673

Amount of Each Receipt this Period
2000.00

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

B. Full Name (Last, First, Middle Initial)
CITIZENS FOR ELEANOR HOLMES NORTON

Mailing Address 2201 Wisconsin Avenue NW
Suite 320

City State Zip Code
Washington DC 20007

FEC ID number of contributing federal political committee. **C** C00244335

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

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

Transaction ID: C869095A

Amount of Each Receipt this Period
500.00

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

* Earmarked Contribution:
See Below

C. Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee, Inc.

Mailing Address 430 S Capitol St SE
Fl 2

City State Zip Code
Washington DC 20003-4024

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation
Conduit total: 13,160.00

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 0 6

Transaction ID: C869095AB

Amount of Each Receipt this Period
500.00

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

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

| | | |
|--|---|---------|
| 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) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 60 / 87 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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)
Kellam for Congress

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. CITIZENS FOR JOHN OLVER FOR CONGRESS | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6 |
| Mailing Address P.O. Box 819 | | Transaction ID: C861087 |
| City State Zip Code Amherst MA 01004 | Amount of Each Receipt this Period 2000.00 | |
| FEC ID number of contributing federal political committee. C C00250860 | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer | Occupation | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 2000.00 | |

* Earmarked Contribution: See Below

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Democratic Congressional Campaign Committee, Inc. | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6 |
| Mailing Address 430 S Capitol St SE FI 2 | | Transaction ID: C861087B |
| City State Zip Code Washington DC 20003-4024 | Amount of Each Receipt this Period 2000.00 | |
| FEC ID number of contributing federal political committee. C C00000935 | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer | Occupation Conduit total: 13,160.00 | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ .00 | |

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Laborers' Political League | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6 |
| Mailing Address 905 16th Street NW Second Floor | | Transaction ID: C869116A |
| City State Zip Code Washington DC 20006 | Amount of Each Receipt this Period 5000.00 | |
| FEC ID number of contributing federal political committee. C C00007922 | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer | Occupation | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 6000.00 | |

* Earmarked Contribution: See Below

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) | 7000.00 |
| TOTAL This Period (last page this line number only) | _____ |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 61 / 87 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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)
Kellam for Congress

A. Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee, Inc.

Mailing Address 430 S Capitol St SE
FI 2

City Washington State DC Zip Code 20003-4024

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation
Conduit total: 13,160.00

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 0 6

Transaction ID: C869116AB

Amount of Each Receipt this Period
5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
MEL WATT FOR CONGRESS COMMITTEE

Mailing Address PO BOX 36831

City CHARLOTTE State NC Zip Code 28236

FEC ID number of contributing federal political committee. **C** C00260604

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

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

Transaction ID: C869119A

Amount of Each Receipt this Period
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
* Earmarked Contribution:
See Below

C. Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee, Inc.

Mailing Address 430 S Capitol St SE
FI 2

City Washington State DC Zip Code 20003-4024

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation
Conduit total: 13,160.00

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 0 6

Transaction ID: C869119AB

Amount of Each Receipt this Period
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 2000.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | | | |
|--|--|---|------------------------------|-----------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 62 / 87 | | | |
| | (check only one) | | | |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" 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)
Kellam for Congress

A. Full Name (Last, First, Middle Initial)
NATIONAL COMMITTEE TO PRESERVE SOCIAL SECURITY & M

Mailing Address 10 G St. NE
Suite 600

City State Zip Code
Washington DC 20002

FEC ID number of contributing federal political committee. **C** C00172296

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
10 / 11 / 2006

Transaction ID: C865990A

Amount of Each Receipt this Period
2500.00

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

* Earmarked Contribution:
See Below

B. Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee, Inc.

Mailing Address 430 S Capitol St SE
Fl 2

City State Zip Code
Washington DC 20003-4024

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation
Conduit total: 13,160.00

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
.00

Date of Receipt
MM / DD / YYYY
10 / 13 / 2006

Transaction ID: C865990AB

Amount of Each Receipt this Period
2500.00

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

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

| | |
|--|-----------------|
| SUBTOTAL of Receipts This Page (optional) | 2500.00 |
| TOTAL This Period (last page this line number only) | 50150.00 |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|--|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 63 / 87 |
| | (check only one) | |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 11d | <input checked="" 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)
Kellam for Congress

A. Full Name (Last, First, Middle Initial)
Philip J. Kellam

Mailing Address PO Box 56254

City State Zip Code
Virginia Beach VA 23456-9254

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

Name of Employer Occupation
City of Virginia Beach Commissioner of the Revenue

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
147830.32

Date of Receipt
MM / DD / YYYY
10 / 18 / 2006

Transaction ID: C869656

Amount of Each Receipt this Period
45000.00

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

| | | |
|--|---|----------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 45000.00 |
| TOTAL This Period (last page this line number only) | ▶ | 45000.00 |

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)
Kellam for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. American Express | | Transaction ID: D70333 Date of Disbursement 10 / 02 / 2006 |
| Mailing Address P.O. Box 553852 | | Amount of Each Disbursement this Period 3.25 |
| City Phoenix State AZ Zip Code 85072 | Purpose of Disbursement Credit Card Transaction Fee Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. American Express | | Transaction ID: D70334 Date of Disbursement 10 / 03 / 2006 |
| Mailing Address P.O. Box 553852 | | Amount of Each Disbursement this Period 7.31 |
| City Phoenix State AZ Zip Code 85072 | Purpose of Disbursement Credit Card Transaction Fee Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. American Express | | Transaction ID: D70336 Date of Disbursement 10 / 04 / 2006 |
| Mailing Address P.O. Box 553852 | | Amount of Each Disbursement this Period 1.63 |
| City Phoenix State AZ Zip Code 85072 | Purpose of Disbursement Credit Card Transaction Fee Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |

| | |
|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 12.19 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

**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 65 / 87

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <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)
Kellam for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. American Express | | Transaction ID: D70347 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 |
| Mailing Address P.O. Box 553852 | | Amount of Each Disbursement this Period 32.50 |
| City Phoenix State AZ Zip Code 85072 | Purpose of Disbursement Credit Card Transaction Fee Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. American Express | | Transaction ID: D70352 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6 |
| Mailing Address P.O. Box 553852 | | Amount of Each Disbursement this Period 43.91 |
| City Phoenix State AZ Zip Code 85072 | Purpose of Disbursement Credit Card Transaction Fee Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. American Express | | Transaction ID: D70354 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6 |
| Mailing Address P.O. Box 553852 | | Amount of Each Disbursement this Period 21.61 |
| City Phoenix State AZ Zip Code 85072 | Purpose of Disbursement Credit Card Transaction Fee Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |

SUBTOTAL of Disbursements This Page (optional) ▶

98.02

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)
Kellam for Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. American Express | | Transaction ID: D70356 Date of Disbursement 10 / 10 / 2006 |
| Mailing Address P.O. Box 553852 | | Amount of Each Disbursement this Period 0.81 |
| City Phoenix State AZ Zip Code 85072 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Credit Card Transaction Fee Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. American Express | | Transaction ID: D70366 Date of Disbursement 10 / 13 / 2006 |
| Mailing Address P.O. Box 553852 | | Amount of Each Disbursement this Period 32.50 |
| City Phoenix State AZ Zip Code 85072 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Credit Card Transaction Fee Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. American Express | | Transaction ID: D70368 Date of Disbursement 10 / 16 / 2006 |
| Mailing Address P.O. Box 553852 | | Amount of Each Disbursement this Period 65.00 |
| City Phoenix State AZ Zip Code 85072 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Credit Card Transaction Fee Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 98.31 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

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)

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| | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <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)
Kellam for Congress

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. American Express | | Transaction ID: D70369 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 |
| Mailing Address P.O. Box 553852 | | Amount of Each Disbursement this Period 16.74 |
| City Phoenix State AZ Zip Code 85072 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Credit Card Transaction Fee Candidate Name | | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) B. American Express | | Transaction ID: D70373 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6 |
| Mailing Address P.O. Box 553852 | | Amount of Each Disbursement this Period 82.23 |
| City Phoenix State AZ Zip Code 85072 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Credit Card Transaction Fee Candidate Name | | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) C. American Express | | Transaction ID: D70379 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6 |
| Mailing Address P.O. Box 553852 | | Amount of Each Disbursement this Period 32.50 |
| City Phoenix State AZ Zip Code 85072 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Credit Card Transaction Fee Candidate Name | | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | |
|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 131.47 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

**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)
Kellam for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Blackwater Farms, Inc. | | Transaction ID: D70358 Date of Disbursement 10 / 11 / 2006 |
| Mailing Address 213 62nd Street | | Amount of Each Disbursement this Period 250.00 |
| City Virginia Beach | State VA Zip Code 23451 | |
| Purpose of Disbursement Contribution Refund | | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Buying Time, LLC | | Transaction ID: D70362 Date of Disbursement 10 / 12 / 2006 |
| Mailing Address 2715 M Street, NW Ste 150 | | Amount of Each Disbursement this Period 86950.00 |
| City Washington | State DC Zip Code 20007 | |
| Purpose of Disbursement Media Buy: Broadcast TV | | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Buying Time, LLC | | Transaction ID: D70340 Date of Disbursement 10 / 05 / 2006 |
| Mailing Address 2715 M Street, NW Ste 150 | | Amount of Each Disbursement this Period 55250.00 |
| City Washington | State DC Zip Code 20007 | |
| Purpose of Disbursement Media Buy: Broadcast TV | | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|--|------------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 142450.00 |
| 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 69 / 87

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <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)
Kellam for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Cooper & Secret Associates | | Transaction ID: D70341 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6 |
| Mailing Address 228 South Washington St Suite 330 | | Amount of Each Disbursement this Period 1800.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Alexandria State VA Zip Code 22314 | Purpose of Disbursement Polling Costs Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/ Type |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Cooper & Secret Associates | | Transaction ID: D70342 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6 |
| Mailing Address 228 South Washington St Suite 330 | | Amount of Each Disbursement this Period 110.78 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Alexandria State VA Zip Code 22314 | Purpose of Disbursement Shipping Costs Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/ Type |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Cooper & Secret Associates | | Transaction ID: D70349 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6 |
| Mailing Address 228 South Washington St Suite 330 | | Amount of Each Disbursement this Period 11950.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Alexandria State VA Zip Code 22314 | Purpose of Disbursement Polling Costs Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/ Type |

| | |
|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 13860.78 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

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)

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| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <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)
Kellam for Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Cooper & Secrest Associates | | Transaction ID: D70328 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 0 6 |
| Mailing Address 228 South Washington St Suite 330 | | Amount of Each Disbursement this Period 11950.00 |
| City Alexandria State VA Zip Code 22314 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Polling Costs | | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Extended Stay America | | Transaction ID: D70343 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6 |
| Mailing Address 4548 Bonney Road | | Amount of Each Disbursement this Period 236.88 |
| City Virginia Beach State VA Zip Code 23462 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Staff Hotel | | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. FEDEX Kinko's | | Transaction ID: D70350 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6 |
| Mailing Address 5957A Virginia Beach Blvd. | | Amount of Each Disbursement this Period 22.43 |
| City Norfolk State VA Zip Code 23502-7136 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Printing Fee | | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | |
|--|----------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 12209.31 |
| 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)
Kellam for Congress

| | | | |
|--|---|--|---|
| Full Name (Last, First, Middle Initial) A. FEDEX Kinko's | | Transaction ID: D70353 | |
| Mailing Address 5957A Virginia Beach Blvd. | | Date of Disbursement 10 / 10 / 2006 | |
| City Norfolk | State VA | Zip Code 23502-7136 | Amount of Each Disbursement this Period 27.38 |
| Purpose of Disbursement Postage Fee | 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 | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | Category/Type | | |

| | | | |
|--|---|--|---|
| Full Name (Last, First, Middle Initial) B. FEDEX Kinko's | | Transaction ID: D70355 | |
| Mailing Address 5957A Virginia Beach Blvd. | | Date of Disbursement 10 / 10 / 2006 | |
| City Norfolk | State VA | Zip Code 23502-7136 | Amount of Each Disbursement this Period 18.06 |
| Purpose of Disbursement Postage Fee | 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 | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | Category/Type | | |

| | | | |
|--|---|--|---|
| Full Name (Last, First, Middle Initial) C. FEDEX Kinko's | | Transaction ID: D70374 | |
| Mailing Address 5957A Virginia Beach Blvd. | | Date of Disbursement 10 / 17 / 2006 | |
| City Norfolk | State VA | Zip Code 23502-7136 | Amount of Each Disbursement this Period 43.22 |
| Purpose of Disbursement Shipping Fee | 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 | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | Category/Type | | |

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|--|--------------|
| SUBTOTAL of Disbursements This Page (optional) | 88.66 |
| 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)
Kellam for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. FEDEX Kinko's | | Transaction ID: D70375 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6 |
| Mailing Address 5957A Virginia Beach Blvd. | | Amount of Each Disbursement this Period 25.92 |
| City Norfolk State VA Zip Code 23502-7136 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Shipping Fee Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. FEDEX Kinko's | | Transaction ID: D70376 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6 |
| Mailing Address 5957A Virginia Beach Blvd. | | Amount of Each Disbursement this Period 24.47 |
| City Norfolk State VA Zip Code 23502-7136 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Shipping Fee Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. FEDEX Kinko's | | Transaction ID: D70377 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6 |
| Mailing Address 5957A Virginia Beach Blvd. | | Amount of Each Disbursement this Period 22.43 |
| City Norfolk State VA Zip Code 23502-7136 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Shipping Fee Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 72.82 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

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)
Kellam for Congress

| | | |
|--|--|--|
| A. Full Name (Last, First, Middle Initial) Fenn Communications Group | | Transaction ID: D70372 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6 |
| Mailing Address 2715 M Street, NW Suite 150 | | Amount of Each Disbursement this Period 16906.78 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Washington State DC Zip Code 20007 | Purpose of Disbursement Media: Production Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| B. Full Name (Last, First, Middle Initial) Fenn Communications Group | | Transaction ID: D70348 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6 |
| Mailing Address 2715 M Street, NW Suite 150 | | Amount of Each Disbursement this Period 6217.78 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Washington State DC Zip Code 20007 | Purpose of Disbursement Media: Production Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| C. Full Name (Last, First, Middle Initial) Mr. Eric S Fleming | | Transaction ID: D70323 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 0 6 |
| Mailing Address 1324 Five Point Rd | | Amount of Each Disbursement this Period 2500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Virginia Beach State VA Zip Code 23454-1931 | 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: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|----------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 25624.56 |
| 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)
Kellam for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Judy Boone Realty, Inc. | | Transaction ID: D70346 Date of Disbursement 10 / 06 / 2006 |
| Mailing Address 809 E Ocean View Ave | | Amount of Each Disbursement this Period 950.00 |
| City Norfolk State VA Zip Code 23503-1822 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Staff Housing | Candidate Name | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Mr. Charles B Kelly | | Transaction ID: D70321 Date of Disbursement 10 / 02 / 2006 |
| Mailing Address 44 Kenwood Pkwy | | Amount of Each Disbursement this Period 5000.00 |
| City St. Paul State MN Zip Code 55105 | <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: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Kempsville Ace Hardware | | Transaction ID: D70330 Date of Disbursement 10 / 02 / 2006 |
| Mailing Address 5168 Princess Anne Road | | Amount of Each Disbursement this Period 117.00 |
| City Virginia Beach State VA Zip Code 23462 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Postage | Candidate Name | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|----------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 6067.00 |
| 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)
Kellam for Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Kempsville Ace Hardware | | Transaction ID: D70363 Date of Disbursement 10 / 12 / 2006 |
| Mailing Address 5168 Princess Anne Road | | Amount of Each Disbursement this Period 117.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Virginia Beach | State VA Zip Code 23462 | |
| Purpose of Disbursement Postage | Category/Type | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Kempsville Ace Hardware | | Transaction ID: D70371 Date of Disbursement 10 / 17 / 2006 |
| Mailing Address 5168 Princess Anne Road | | Amount of Each Disbursement this Period 195.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Virginia Beach | State VA Zip Code 23462 | |
| Purpose of Disbursement Postage | Category/Type | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Ms. Karen E. Kolber | | Transaction ID: D70326 Date of Disbursement 10 / 02 / 2006 |
| Mailing Address 528 Salt Aire Court | | Amount of Each Disbursement this Period 4000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Virginia Beach | State VA Zip Code 23451 | |
| Purpose of Disbursement Fundraising Consultation Fee | Category/Type | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | |

| | |
|--|----------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 4312.00 |
| 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)
Kellam for Congress

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) A. Mr. H. Lankford, III | | Transaction ID: D70327 Date of Disbursement 10 / 02 / 2006 | |
| Mailing Address 1901 Hunts Neck Ct | | Amount of Each Disbursement this Period 1000.00 | |
| City Virginia Beach State VA Zip Code 23456-5205 | Purpose of Disbursement Salary | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) B. Office Max | | Transaction ID: D70329 Date of Disbursement 10 / 02 / 2006 | |
| Mailing Address 60 South Broadway | | Amount of Each Disbursement this Period 37.91 | |
| City Virginia Beach State VA Zip Code 10601 | Purpose of Disbursement Miscellaneous Office Supplies | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) C. Office Max | | Transaction ID: D70335 Date of Disbursement 10 / 03 / 2006 | |
| Mailing Address 60 South Broadway | | Amount of Each Disbursement this Period 4.19 | |
| City Virginia Beach State VA Zip Code 10601 | Purpose of Disbursement Miscellaneous Office Supplies | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type | |

| | |
|--|----------------|
| SUBTOTAL of Disbursements This Page (optional) | 1042.10 |
| 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)
Kellam for Congress

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. Office Max | | Transaction ID: D70365 Date of Disbursement 10 / 12 / 2006 |
| Mailing Address 60 South Broadway | | Amount of Each Disbursement this Period 7.34 |
| City Virginia Beach State VA Zip Code 10601 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Miscellaneou Office Supplies | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) B. RBC Centura | | Transaction ID: D70364 Date of Disbursement 10 / 12 / 2006 |
| Mailing Address PO Box 6057 | | Amount of Each Disbursement this Period 15.00 |
| City Rocky Mount State NC Zip Code 27802-6057 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Wire Transfer Fee | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) C. RBC Centura | | Transaction ID: D70359 Date of Disbursement 10 / 11 / 2006 |
| Mailing Address PO Box 6057 | | Amount of Each Disbursement this Period 436.84 |
| City Rocky Mount State NC Zip Code 27802-6057 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Credit Card Transaction Fee | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 459.18 |
| 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)
Kellam for Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. RBC Centura | | Transaction ID: D70360 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 6 |
| Mailing Address PO Box 6057 | | Amount of Each Disbursement this Period 27.67 |
| City Rocky Mount State NC Zip Code 27802-6057 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Credit Card Transaction Fee Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. RBC Centura | | Transaction ID: D70361 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 6 |
| Mailing Address PO Box 6057 | | Amount of Each Disbursement this Period 14.22 |
| City Rocky Mount State NC Zip Code 27802-6057 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Credit Card Transaction Fee Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. RBC Centura | | Transaction ID: D70332 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 0 6 |
| Mailing Address PO Box 6057 | | Amount of Each Disbursement this Period 5.00 |
| City Rocky Mount State NC Zip Code 27802-6057 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Deposit Correction Fee Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

SUBTOTAL of Disbursements This Page (optional) ▶

46.89

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)
Kellam for Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. RBC Centura | | Transaction ID: D70344 Date of Disbursement 10 / 05 / 2006 |
| Mailing Address PO Box 6057 | | Amount of Each Disbursement this Period 15.00 |
| City Rocky Mount State NC Zip Code 27802-6057 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Wire Transfer Fee | Candidate Name | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Sutter's Mill Fund Raising and Strategy | | Transaction ID: D70370 Date of Disbursement 10 / 17 / 2006 |
| Mailing Address 499 S Capitol St SW Suite 404 | | Amount of Each Disbursement this Period 5615.33 |
| City Washington State DC Zip Code 20003-4013 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Fundraising Consultant Fees | Candidate Name | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Tara Rabuck | | Transaction ID: D70322 Date of Disbursement 10 / 02 / 2006 |
| Mailing Address 2620 Dumbarton Road | | Amount of Each Disbursement this Period 2000.00 |
| City Richmond State VA Zip Code 23228 | <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: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|----------------|
| SUBTOTAL of Disbursements This Page (optional) | 7630.33 |
| 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 80 / 87

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <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)
Kellam for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Town Center City Club | | Transaction ID: D70345 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 |
| Mailing Address 222 Central Park Ave | | Amount of Each Disbursement this Period 1980.13 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Virginia Beach State VA Zip Code 23462-3022 | Purpose of Disbursement Catering for Event Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. USRental.com | | Transaction ID: D70378 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6 |
| Mailing Address 970 Summer Street | | Amount of Each Disbursement this Period 771.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Stamford State CT Zip Code 06905 | Purpose of Disbursement Computer Rentals Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Warren Richards | | Transaction ID: D70324 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 0 6 |
| Mailing Address 919 Druid Circle, Apt. 7 | | Amount of Each Disbursement this Period 850.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Norfolk State VA Zip Code 23504 | 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: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|----------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 3601.13 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

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)
Kellam for Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Warren Richards | | Transaction ID: D70337 Date of Disbursement 10 / 05 / 2006 |
| Mailing Address 919 Druid Circle, Apt. 7 | | Amount of Each Disbursement this Period 107.00 |
| City Norfolk State VA Zip Code 23504 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Mileage Rembursement Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Warren Richards | | Transaction ID: D70338 Date of Disbursement 10 / 05 / 2006 |
| Mailing Address 919 Druid Circle, Apt. 7 | | Amount of Each Disbursement this Period 30.35 |
| City Norfolk State VA Zip Code 23504 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Office Supplies Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Warren Richards | | Transaction ID: D70339 Date of Disbursement 10 / 05 / 2006 |
| Mailing Address 919 Druid Circle, Apt. 7 | | Amount of Each Disbursement this Period 136.49 |
| City Norfolk State VA Zip Code 23504 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Mobile Phone Purchase Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 273.84 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

**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)
Kellam for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Ms. Abigail Marie Williams | | Transaction ID: D70325 Date of Disbursement 10 / 02 / 2006 |
| Mailing Address 2921 Meadow Forest Road | | Amount of Each Disbursement this Period 1500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Chesapeake State VA Zip Code 23321 | | |
| 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: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Xpedx | | Transaction ID: D70331 Date of Disbursement 10 / 02 / 2006 |
| Mailing Address STR #14 | | Amount of Each Disbursement this Period 18.25 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Virginia Beach State VA Zip Code 23462 | | |
| Purpose of Disbursement Office Supplies Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Xpedx | | Transaction ID: D70357 Date of Disbursement 10 / 11 / 2006 |
| Mailing Address STR #14 | | Amount of Each Disbursement this Period 30.35 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Virginia Beach State VA Zip Code 23462 | | |
| Purpose of Disbursement Office Supplies Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|------------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 1548.60 |
| TOTAL This Period (last page this line number only) ▶ | 219627.19 |

SCHEDULE C (FEC Form 3)

LOANS

| | |
|---|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | PAGE 83 / 87 |
| | FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b |

NAME OF COMMITTEE (In Full)
Kellam for Congress

Transaction ID: L68

| | |
|---|--|
| LOAN SOURCE Full Name (Last, First, Middle Initial) Philip J. Kellam (Personal Funds) | Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Mailing Address PO Box 56254 | |
| City Virginia Beach State VA ZIP Code 23456-9254 | |

| | | |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 40000.00 | 0.00 | 40000.00 |

TERMS

| | | | |
|--|-----------------------------|--------------------------------|---|
| Date Incurred M M 1 2 D D 3 1 Y Y Y Y 2 0 0 5 | Date Due When funds beco | Interest Rate .0000 % (apr) | Secured: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
|--|-----------------------------|--------------------------------|---|

List All Endorsers or Guarantors (if any) to Loan Source

| | |
|---|---|
| Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input type="text"/> |
| Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input type="text"/> |
| Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input type="text"/> |
| Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input type="text"/> |

| | |
|---|----------------------|
| SUBTOTALS This Period This Page (optional) | 40000.00 |
| TOTALS This Period (last page in this line only) | <input type="text"/> |
| Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary. | |

SCHEDULE C (FEC Form 3)

LOANS

| | |
|---|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | PAGE 84 / 87 |
| | FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b |

NAME OF COMMITTEE (In Full)
Kellam for Congress

Transaction ID: L70

| | |
|---|--|
| LOAN SOURCE Full Name (Last, First, Middle Initial) Philip J. Kellam (Personal Funds) | Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Mailing Address PO Box 56254 | |
| City Virginia Beach State VA ZIP Code 23456-9254 | |

| | | |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 100.00 | 0.00 | 100.00 |

TERMS

| | | | |
|--|-----------------------------|--------------------------------|---|
| Date Incurred M M 1 1 D D 3 0 Y Y Y Y 2 0 0 5 | Date Due When funds beco | Interest Rate .0000 % (apr) | Secured: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
|--|-----------------------------|--------------------------------|---|

List All Endorsers or Guarantors (if any) to Loan Source

| | |
|---|------------------------------------|
| Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |

| | |
|---|--------|
| SUBTOTALS This Period This Page (optional) | 100.00 |
| TOTALS This Period (last page in this line only) | |
| Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary. | |

SCHEDULE C (FEC Form 3)

LOANS

| | |
|---|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | PAGE 85 / 87 |
| | FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b |

NAME OF COMMITTEE (In Full)
Kellam for Congress

Transaction ID: L120

| | |
|---|--|
| LOAN SOURCE Full Name (Last, First, Middle Initial) Philip J. Kellam (Personal Funds) | Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Mailing Address PO Box 56254 | |
| City Virginia Beach State VA ZIP Code 23456-9254 | |

| | | |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 25000.00 | 0.00 | 25000.00 |

TERMS

| | | | |
|---|-----------------------------|--------------------------------|---|
| Date Incurred M M 03 D D 30 Y Y Y Y 2006 | Date Due When funds beco | Interest Rate .0000 % (apr) | Secured: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
|---|-----------------------------|--------------------------------|---|

List All Endorsers or Guarantors (if any) to Loan Source

| | |
|---|------------------------------------|
| Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |

| | |
|---|-----------------|
| SUBTOTALS This Period This Page (optional) | 25000.00 |
| TOTALS This Period (last page in this line only) | [] |
| Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary. | |

SCHEDULE C (FEC Form 3)

LOANS

| | |
|---|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | PAGE 86 / 87 |
| | FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b |

NAME OF COMMITTEE (In Full)
Kellam for Congress

Transaction ID: L147

| | |
|---|--|
| LOAN SOURCE Full Name (Last, First, Middle Initial) Philip J. Kellam (Personal Funds) | Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Mailing Address PO Box 56254 | |
| City Virginia Beach State VA ZIP Code 23456-9254 | |

| | | |
|-------------------------------------|------------------------------------|---|
| Original Amount of Loan 35000.00 | Cumulative Payment To Date 0.00 | Balance Outstanding at Close of This Period 35000.00 |
|-------------------------------------|------------------------------------|---|

TERMS

| | | | |
|---|-----------------------------|--------------------------------|---|
| Date Incurred MM DD YY 06 30 2006 | Date Due When funds beco | Interest Rate .0000 % (apr) | Secured: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
|---|-----------------------------|--------------------------------|---|

List All Endorsers or Guarantors (if any) to Loan Source

| | |
|---|------------------------------------|
| Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |

| | |
|---|-----------------|
| SUBTOTALS This Period This Page (optional) | 35000.00 |
| TOTALS This Period (last page in this line only) | |

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)

LOANS

| | |
|---|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | PAGE 87 / 87 |
| | FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b |

NAME OF COMMITTEE (In Full)
Kellam for Congress

Transaction ID: L155

| | |
|---|--|
| LOAN SOURCE Full Name (Last, First, Middle Initial) Philip J. Kellam (Personal Funds) | Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Mailing Address PO Box 56254 | |
| City Virginia Beach State VA ZIP Code 23456-9254 | |

| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
|-------------------------|----------------------------|---|
| 45000.00 | 0.00 | 45000.00 |

TERMS

| | | | |
|---|-----------------------------|--------------------------------|---|
| Date Incurred M M 10 D D 18 Y Y Y Y 2006 | Date Due When funds beco | Interest Rate .0000 % (apr) | Secured: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
|---|-----------------------------|--------------------------------|---|

List All Endorsers or Guarantors (if any) to Loan Source

| Full Name (Last, First, Middle Initial) | Name of Employer |
|---|------------------------------------|
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |

| | |
|---|-----------|
| SUBTOTALS This Period This Page (optional) | 45000.00 |
| TOTALS This Period (last page in this line only) | 145100.00 |

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.