

REPORT OF RECEIPTS AND DISBURSEMENTS

BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE-PRESIDENT

1 / 96

1. NAME OF COMMITTEE (in full) JIM GILMORE FOR PRESIDENT		2. IDENTIFICATION NUMBER C00431288
ADDRESS (number and street) P.O. Box 19128	<input type="checkbox"/> Check if different than previously reported	
CITY, STATE, and ZIP CODE ALEXANDRIA VA 22320	3. IS THIS REPORT FOR : <input type="checkbox"/> Primary <input type="checkbox"/> General	

4. TYPE OF REPORT

(Check here if this is a Termination Report.)

Monthly Report Due On:

<input checked="" type="checkbox"/> April 15 Quarterly Report	<input type="checkbox"/> February 20	<input type="checkbox"/> June 20	<input type="checkbox"/> October 20
<input type="checkbox"/> July 15 Quarterly Report	<input type="checkbox"/> March 20	<input type="checkbox"/> July 20	<input type="checkbox"/> November 20
<input type="checkbox"/> October 15 Quarterly Report	<input type="checkbox"/> April 20	<input type="checkbox"/> August 20	<input type="checkbox"/> December 20
<input type="checkbox"/> January 31 Year End Report	<input type="checkbox"/> May 20	<input type="checkbox"/> September 20	<input type="checkbox"/> January 31

Twelfth day report preceding _____
(Type of Election)

election on _____ in the State of _____

Thirtieth day report following the General Election on _____
on _____

IS THIS REPORT AN AMENDMENT YES NO

5. COVERING PERIOD	FROM	THROUGH
	01/01/2007	03/31/2007
SUMMARY	6. CASH ON HAND AT BEGINNING OF THE REPORTING PERIOD	0.00
	7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 2)	197923.78
	8. SUBTOTAL (Lines 6 and 7)	197923.78
	9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2)	113789.86
	10. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 9 from 8)	84133.92
	11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P)	0.00
	12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P)	88013.72
	13. EXPENDITURES SUBJECT TO LIMITATION	113789.86
NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES	14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2)	168816.79
	15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B from 23, Column B, Page 2)	113789.86

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

Type or Print Name of Treasurer Danny Adams	Date 04/15/2007
Signature of Treasurer	

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.
All previous versions of FEC FORM 3P are obsolete and should no longer be used.

For further information contact: Federal Election Commission
999 E Street, N.W.
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 3P
(01/2001)

DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS

(PAGE 2, FEC FORM 3P)

Name of committee (in full) JIM GILMORE FOR PRESIDENT	Report Covering the Period	
	From: 01/01/2007	To: 03/31/2007
I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
16. FEDERAL FUNDS (Itemize on Schedule A-P)	0.00	0.00
17. CONTRIBUTIONS (other than loans) FROM :		
(a) Individuals/Persons Other Than Political Committees	166566.79	166566.79
(b) Political Party Committees	250.00	250.00
(c) Other Political Committees	2000.00	2000.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a) , 17(b), 17(c), 17(d))	168816.79	168816.79
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOANS RECEIVED:		
(a) Loans Received From or Guaranteed by Candidate	0.00	0.00
(b) Other Loans	29104.03	29104.03
(c) TOTAL LOANS (Add 19(a) and 19(b))	29104.03	29104.03
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.) :		
(a) Operating	0.00	0.00
(b) Fundraising	0.00	0.00
(c) Legal and Accounting	0.00	0.00
(d) TOTAL OFFSETS TO OPERATING EXPENDITURES (Add 20(a), 20(b) and 20(c))	0.00	0.00
21. OTHER RECEIPTS (Dividend, Interest, etc.)	2.96	2.96
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d), 21)	197923.78	197923.78
II. DISBURSEMENTS		
23. OPERATING EXPENDITURES	113789.86	113789.86
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
25. FUNDRAISING DISBURSEMENTS	0.00	0.00
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS	0.00	0.00
27. LOAN REPAYMENTS MADE :		
(a) Repayment of Loans made or Guaranteed by Candidate	0.00	0.00
(b) Other Repayments	0.00	0.00
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b))	0.00	0.00
28. REFUNDS OF CONTRIBUTIONS TO :		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b), 28(c))	0.00	0.00
29. OTHER DISBURSEMENTS	0.00	0.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)	113789.86	113789.86
III. CONTRIBUTED ITEMS (Stock, Art Objects, etc.)		
31. ITEMS ON HAND TO BE LIQUIDATED (Attach List)	0.00	

ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A PRESIDENTIAL CANDIDATE 3 / 96
 (Used Only by Primary Committees Receiving or Expecting to Receive Federal Funds)
 (PAGE 3, FEC FORM 3P)

1. NAME OF COMMITTEE (in full)

JIM GILMORE FOR PRESIDENT

ADDRESS (number and street)

P.O. Box 19128

CITY, STATE, and ZIP CODE

ALEXANDRIA

VA

22320

2. IDENTIFICATION NUMBER

C00431288

ALLOCATION BY STATE

STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE	STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE
Alabama	0.00	0.00	Nebraska	0.00	0.00
Alaska	0.00	0.00	Nevada	0.00	0.00
Arizona	0.00	0.00	New Hampshire	0.00	0.00
Arkansas	0.00	0.00	New Jersey	0.00	0.00
California	0.00	0.00	New Mexico	0.00	0.00
Colorado	0.00	0.00	New York	0.00	0.00
Connecticut	0.00	0.00	North Carolina	0.00	0.00
Delaware	0.00	0.00	North Dakota	0.00	0.00
District of Columbia	0.00	0.00	Ohio	0.00	0.00
Florida	0.00	0.00	Oklahoma	0.00	0.00
Georgia	0.00	0.00	Oregon	0.00	0.00
Hawaii	0.00	0.00	Pennsylvania	0.00	0.00
Idaho	0.00	0.00	Rhode Island	0.00	0.00
Illinois	0.00	0.00	South Carolina	0.00	0.00
Indiana	0.00	0.00	South Dakota	0.00	0.00
Iowa	0.00	0.00	Tennessee	0.00	0.00
Kansas	0.00	0.00	Texas	0.00	0.00
Kentucky	0.00	0.00	Utah	0.00	0.00
Louisiana	0.00	0.00	Vermont	0.00	0.00
Maine	0.00	0.00	Virginia	0.00	0.00
Maryland	0.00	0.00	Washington	0.00	0.00
Massachusetts	0.00	0.00	West Virginia	0.00	0.00
Michigan	0.00	0.00	Wisconsin	0.00	0.00
Minnesota	0.00	0.00	Wyoming	0.00	0.00
Mississippi	0.00	0.00	Puerto Rico	0.00	0.00
Missouri	0.00	0.00	Guam	0.00	0.00
Montana	0.00	0.00	Virgin Islands	0.00	0.00
			TOTALS	0.00	0.00

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4 / 96
	<input type="checkbox"/> 16 19a <input checked="" type="checkbox"/> 17a 19b <input type="checkbox"/> 17b 20a <input type="checkbox"/> 17c 20b <input type="checkbox"/> 17d 20c <input type="checkbox"/> 18 21	

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)
JIM GILMORE FOR PRESIDENT

A. Full Name (Last, First, Middle Initial) Mr. John Ackerly, III		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 1 / 2 0 0 7	
Mailing Address 10 Oak Lane		Amount of Each Receipt this Period 500.00	
City Richmond	State VA	Zip Code 23226	
FEC ID number of contributing federal political committee.		Transaction ID: SA17A.4333	
Name of Employer Troutman Sanders	Occupation Attorney		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		

B. Full Name (Last, First, Middle Initial) Mr. Robert Agnew		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 7 / 2 0 0 7	
Mailing Address 1276 North Wayne Street Penthouse 22		Amount of Each Receipt this Period 1200.00	
City Arlington	State VA	Zip Code 22201	
FEC ID number of contributing federal political committee.		Transaction ID: SA17A.4341	
Name of Employer Morten Beyer & Agnew	Occupation Aviation Consultant		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1200.00		

C. Full Name (Last, First, Middle Initial) Mr. Hanif Akhtar		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 1 / 2 0 0 7	
Mailing Address 10520 Hunting Crest Lane		Amount of Each Receipt this Period 4500.00	
City Vienna	State VA	Zip Code 22182	
FEC ID number of contributing federal political committee.		REATTRIBUTION REQUESTED (AUTOMATIC)	
Name of Employer Self-Employed	Occupation Consultant		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4500.00		
		Transaction ID: SA17A.4343	

SUBTOTAL of Receipts This Page (optional) ▶	6200.00
TOTAL This Period (last page this line number only) ▶	

**Schedule A-P
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 5 / 96
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Mr. R. Allen	Date of Receipt MM / DD / YYYY 03 / 09 / 2007
	Mailing Address 2 Ball Mill Place	Amount of Each Receipt this Period 1000.00
	City State Zip Code Atlanta GA 30350	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Firstmile Communications President	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	Transaction ID: SA17A.4345

B.	Full Name (Last, First, Middle Initial) Mr. David Anderson	Date of Receipt MM / DD / YYYY 03 / 29 / 2007
	Mailing Address 3637 Rolridge Road	Amount of Each Receipt this Period 2300.00
	City State Zip Code Richmond VA 23233	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Advantus Strategies, Llc Lobbyist	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	Transaction ID: SA17A.4349

C.	Full Name (Last, First, Middle Initial) Mr. abcdef Anonymous	Date of Receipt MM / DD / YYYY 03 / 29 / 2007
	Mailing Address Info Requested	Amount of Each Receipt this Period 500.00
	City State Zip Code Info Requested VA 22311	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Information Requested	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	Transaction ID: SA17A.4355

SUBTOTAL of Receipts This Page (optional)	3800.00
TOTAL This Period (last page this line number only)	

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 / 96
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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)
JIM GILMORE FOR PRESIDENT

A. Full Name (Last, First, Middle Initial) Mr. abcdef Anonymous Mailing Address Info Requested City State Zip Code Info Requested VA 22311 FEC ID number of contributing federal political committee.	Date of Receipt	M M / D D / Y Y Y Y 0 3 / 2 9 / 2 0 0 7
	Amount of Each Receipt this Period	20.00
	Name of Employer	Occupation
	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 520.00
	Transaction ID: SA17A.4356	

B. Full Name (Last, First, Middle Initial) Mr. Adam Apatoff Mailing Address 602 Grand Champion Drive City State Zip Code Rockville MD 20850 FEC ID number of contributing federal political committee.	Date of Receipt	M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 7
	Amount of Each Receipt this Period	2300.00
	Name of Employer	Occupation
	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00
	Transaction ID: SA17A.4360	

C. Full Name (Last, First, Middle Initial) Mr. Kenneth Atherholt Mailing Address P.O. Box 152 City State Zip Code Manakin-Sabot VA 23103 FEC ID number of contributing federal political committee.	Date of Receipt	M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 7
	Amount of Each Receipt this Period	25.00
	Name of Employer	Occupation
	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 25.00
	Transaction ID: SA17A.5327	

SUBTOTAL of Receipts This Page (optional)	▶	2345.00
TOTAL This Period (last page this line number only)	▶	

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 / 96
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Dr. Peter Ault	Date of Receipt MM / DD / YYYY 03 / 29 / 2007
	Mailing Address 12831 Sturgeon Pt. Road	Amount of Each Receipt this Period 1000.00
	City State Zip Code Charles City VA 23030	
	FEC ID number of contributing federal political committee.	
	Name of Employer Information Requested Per Best Efforts Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Per Best Efforts Election Cycle-to-Date ▼ 1000.00
		Transaction ID: SA17A.4362

B.	Full Name (Last, First, Middle Initial) Mr. Dionel Aviles	Date of Receipt MM / DD / YYYY 03 / 29 / 2007
	Mailing Address 2103 Lakeside Bend Court	Amount of Each Receipt this Period 2300.00
	City State Zip Code Houston TX 77077	
	FEC ID number of contributing federal political committee.	
	Name of Employer Aviles Engineering Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation President Election Cycle-to-Date ▼ 2300.00
		Transaction ID: SA17A.4368

C.	Full Name (Last, First, Middle Initial) Mr. Robert Bailie	Date of Receipt MM / DD / YYYY 03 / 29 / 2007
	Mailing Address 8101 Vanguard Drive Suite 300	Amount of Each Receipt this Period 2300.00
	City State Zip Code Mechanicsville VA 23111	
	FEC ID number of contributing federal political committee.	
	Name of Employer Retired Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Election Cycle-to-Date ▼ 2300.00
		Transaction ID: SA17A.4374

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

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 / 96
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Mr. Robert Barlow	Date of Receipt MM / DD / YYYY 03 / 29 / 2007
	Mailing Address 6096 11th Street	Amount of Each Receipt this Period 1150.00
	City State Zip Code King George VA 22485	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Self-Employed Attorney	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1150.00	Transaction ID: SA17A.4382

B.	Full Name (Last, First, Middle Initial) Hilaire Beck	Date of Receipt MM / DD / YYYY 03 / 29 / 2007
	Mailing Address 4008 W. Franklin Street	Amount of Each Receipt this Period 1000.00
	City State Zip Code Richmond VA 23221	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Information Requested Per Best Efforts Information Requested Per Best Efforts	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	Transaction ID: SA17A.4390

C.	Full Name (Last, First, Middle Initial) Mr. Belden Bell	Date of Receipt MM / DD / YYYY 03 / 26 / 2007
	Mailing Address 6403 Enon School Road	Amount of Each Receipt this Period 500.00
	City State Zip Code Marshall VA 20115	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Retired	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	Transaction ID: SA17A.4392

SUBTOTAL of Receipts This Page (optional)	2650.00
TOTAL This Period (last page this line number only)	

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 / 96
	(check only one)	
<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a
<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Mr. Thomas Bliley	Date of Receipt MM / DD / YYYY 03 / 29 / 2007
	Mailing Address 408 Henri Road	Amount of Each Receipt this Period 500.00
	City State Zip Code Richmond VA 23226	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Bliley Funeral Home Owner	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	Transaction ID: SA17A.4411

B.	Full Name (Last, First, Middle Initial) Mrs. Andrea Boyle	Date of Receipt MM / DD / YYYY 02 / 08 / 2007
	Mailing Address 430 H. Street	Amount of Each Receipt this Period 2100.00
	City State Zip Code Lynden WA 98264	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Homemaker	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2100.00	Transaction ID: SA17A.4417

C.	Full Name (Last, First, Middle Initial) Mr. Gerrit Boyle	Date of Receipt MM / DD / YYYY 02 / 08 / 2007
	Mailing Address 430 H. Street	Amount of Each Receipt this Period 2100.00
	City State Zip Code Lynden WA 98264	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Self-Employed Sales	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2100.00	Transaction ID: SA17A.4419

SUBTOTAL of Receipts This Page (optional)	4700.00
TOTAL This Period (last page this line number only)	

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 96
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Mr. Thomas Branin	Date of Receipt MM / DD / YYYY 02 / 06 / 2007
	Mailing Address 8402 Michaels Road	Amount of Each Receipt this Period 1000.00
	City State Zip Code Richmond VA 23229	
	FEC ID number of contributing federal political committee.	
	Name of Employer Colonial Construction Materials Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Vice President Election Cycle-to-Date ▼ 1000.00
		Transaction ID: SA17A.4423

B.	Full Name (Last, First, Middle Initial) Mr. Peter Broadbent, Jr.	Date of Receipt MM / DD / YYYY 03 / 20 / 2007
	Mailing Address 4804 Cary Street Road	Amount of Each Receipt this Period 1000.00
	City State Zip Code Richmond VA 23226	
	FEC ID number of contributing federal political committee.	
	Name of Employer Christian And Barton LLP Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Attorney Election Cycle-to-Date ▼ 1000.00
		Transaction ID: SA17A.4429

C.	Full Name (Last, First, Middle Initial) Mr. Wilbert Bryant	Date of Receipt MM / DD / YYYY 03 / 13 / 2007
	Mailing Address 15331 Riding Club Drive	Amount of Each Receipt this Period 2100.00
	City State Zip Code Haymarket VA 20169	
	FEC ID number of contributing federal political committee.	
	Name of Employer Peace Corps. Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Associate Director - Mgmt. Election Cycle-to-Date ▼ 2100.00
		Transaction ID: SA17A.4437

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

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 96
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) C.M.J. Associates, L.L.C.	Date of Receipt MM / DD / YYYY 03 / 31 / 2007
	Mailing Address 3230 Monroe Street	Amount of Each Receipt this Period 500.00
	City State Zip Code Earlysville VA 22936	ATtribution TO PARTNERS REQUESTED
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 500.00	Transaction ID: SA17A.5101	

B.	Full Name (Last, First, Middle Initial) Mr. James Carney	Date of Receipt MM / DD / YYYY 01 / 09 / 2007
	Mailing Address P.O. Box 455 9337 Ada Road	Amount of Each Receipt this Period 2100.00
	City State Zip Code Marshall VA 20116	ATtribution TO PARTNERS REQUESTED
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Corporate Crisis Response Officer Asso President	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2100.00	Transaction ID: SA17A.4445

C.	Full Name (Last, First, Middle Initial) Mrs. James Carney	Date of Receipt MM / DD / YYYY 01 / 11 / 2007
	Mailing Address P.O. Box 455 9337 Ada Road	Amount of Each Receipt this Period 2100.00
	City State Zip Code Marshall VA 20116	ATtribution TO PARTNERS REQUESTED
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Information Requested Per Best Efforts Information Requested Per Best Efforts	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2100.00	Transaction ID: SA17A.4447

SUBTOTAL of Receipts This Page (optional)	4700.00
TOTAL This Period (last page this line number only)	

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 / 96
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Mr. Ira Cleveland	Date of Receipt MM / DD / YYYY 03 / 28 / 2007
	Mailing Address 304 Montalvo Drive	Amount of Each Receipt this Period 500.00
	City State Zip Code Bakersfield CA 93309	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Retired	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	Transaction ID: SA17A.4457

B.	Full Name (Last, First, Middle Initial) Mr. Jonathan Comer	Date of Receipt MM / DD / YYYY 03 / 29 / 2007
	Mailing Address 322 Massanutten Avenue	Amount of Each Receipt this Period 500.00
	City State Zip Code Shenandoah VA 22849	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Student	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	Transaction ID: SA17A.4471

C.	Full Name (Last, First, Middle Initial) Mr. E. Crenshaw, Jr.	Date of Receipt MM / DD / YYYY 03 / 31 / 2007
	Mailing Address 5100 Monument Ave. Unit 703	Amount of Each Receipt this Period 1000.00
	City State Zip Code Richmond VA 23230	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Information Requested Per Best Efforts Information Requested Per Best Efforts	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	Transaction ID: SA17A.4483

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

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 / 96
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Ms. Donna Curry	Date of Receipt MM / DD / YYYY 03 / 29 / 2007
	Mailing Address 4312 Monument Park	Amount of Each Receipt this Period 250.00
	City State Zip Code Richmond VA 23230	
	FEC ID number of contributing federal political committee.	
	Name of Employer Information Requested Per Best Efforts Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Per Best Efforts Election Cycle-to-Date ▼ 250.00
		Transaction ID: SA17A.4491

B.	Full Name (Last, First, Middle Initial) Mr. Bruce Downey	Date of Receipt MM / DD / YYYY 03 / 20 / 2007
	Mailing Address 9314 Rapley Preserve Drive	Amount of Each Receipt this Period 2100.00
	City State Zip Code Potomac MD 20854	
	FEC ID number of contributing federal political committee.	
	Name of Employer Barr Laboratories Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Chairman & CEO Election Cycle-to-Date ▼ 2100.00
		Transaction ID: SA17A.4515

C.	Full Name (Last, First, Middle Initial) Mrs. Deborah Downey	Date of Receipt MM / DD / YYYY 03 / 20 / 2007
	Mailing Address 9314 Rapley Preserve Drive	Amount of Each Receipt this Period 2100.00
	City State Zip Code Potomac MD 20854	
	FEC ID number of contributing federal political committee.	
	Name of Employer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker Election Cycle-to-Date ▼ 2100.00
		Transaction ID: SA17A.4517

SUBTOTAL of Receipts This Page (optional)	4450.00
TOTAL This Period (last page this line number only)	

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 / 96
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Mr. Charles Falk		Date of Receipt
	Mailing Address 4004 Oceanfront Penthouse 2		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 31 / 2007
	City	State	Zip Code
	Virginia Beach	VA	23451
	FEC ID number of contributing federal political committee.		<input type="text"/>
	Name of Employer Falk Holding Corp.		Occupation President
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text"/> 2300.00	Amount of Each Receipt this Period <input type="text"/> 2300.00
			Transaction ID: SA17A.4534

B.	Full Name (Last, First, Middle Initial) Ms. Kathryn Falk		Date of Receipt
	Mailing Address 4004 Oceanfront Penthouse 2		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 31 / 2007
	City	State	Zip Code
	Virginia Beach	VA	23451
	FEC ID number of contributing federal political committee.		<input type="text"/>
	Name of Employer		Occupation Homemaker
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text"/> 2300.00	Amount of Each Receipt this Period <input type="text"/> 2300.00
			Transaction ID: SA17A.4536

C.	Full Name (Last, First, Middle Initial) Mr. Thomas Farrell		Date of Receipt
	Mailing Address 9019 Norwick Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 31 / 2007
	City	State	Zip Code
	Richmond	VA	23229
	FEC ID number of contributing federal political committee.		<input type="text"/>
	Name of Employer Information Requested Per Best Efforts		Occupation Information Requested Per Best Efforts
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text"/> 1000.00	Amount of Each Receipt this Period <input type="text"/> 1000.00
			Transaction ID: SA17A.4538

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 5600.00
TOTAL This Period (last page this line number only)	<input type="text"/>

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 / 96
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Mr. Robert Gillam	Date of Receipt MM / DD / YYYY 03 / 09 / 2007
	Mailing Address 3301 C. Street Suite 500	Amount of Each Receipt this Period 2300.00
	City State Zip Code Anchorage AK 99503	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Mckinley Capital Management Director Receipt For: 2008 Election Cycle-to-Date <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2300.00	Transaction ID: SA17A.4569

B.	Full Name (Last, First, Middle Initial) Buddy Gilmore	Date of Receipt MM / DD / YYYY 02 / 28 / 2007
	Mailing Address 8818 Alpine Valley Drive	Amount of Each Receipt this Period 2300.00
	City State Zip Code Colorado Springs CO 80920	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Shape Technologies Llc CEO Receipt For: 2008 Election Cycle-to-Date <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2300.00	Transaction ID: SA17A.4571

C.	Full Name (Last, First, Middle Initial) Mrs. Alice Goodwin	Date of Receipt MM / DD / YYYY 03 / 20 / 2007
	Mailing Address 901 E. Cary Street One James Center Suite 1500	Amount of Each Receipt this Period 2300.00
	City State Zip Code Richmond VA 23219	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Homemaker Receipt For: 2008 Election Cycle-to-Date <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2300.00	Transaction ID: SA17A.4575

SUBTOTAL of Receipts This Page (optional)	6900.00
TOTAL This Period (last page this line number only)	

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 / 96
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Mr. William Goodwin, Jr.	Date of Receipt MM / DD / YYYY 03 / 20 / 2007
	Mailing Address 901 E. Cary Street One James Center Suite 1500	Amount of Each Receipt this Period 2300.00
	City State Zip Code Richmond VA 23219	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation CCA Industries CEO	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	Transaction ID: SA17A.4577

B.	Full Name (Last, First, Middle Initial) Mr. John Gregory	Date of Receipt MM / DD / YYYY 03 / 29 / 2007
	Mailing Address 9111 Peabody Street	Amount of Each Receipt this Period 250.00
	City State Zip Code Manassas VA 20110	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Gregory Construction, Inc. Construction	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	Transaction ID: SA17A.4585

C.	Full Name (Last, First, Middle Initial) Mr. Gerald Halpin	Date of Receipt MM / DD / YYYY 03 / 31 / 2007
	Mailing Address 7979 E. Boulevard Drive	Amount of Each Receipt this Period 2300.00
	City State Zip Code Alexandria VA 22308	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation West Group Management Company Business Executive/President	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	Transaction ID: SA17A.4589

SUBTOTAL of Receipts This Page (optional)	▶	4850.00
TOTAL This Period (last page this line number only)	▶	

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 96
	<input type="checkbox"/> 16 19a <input checked="" type="checkbox"/> 17a 19b <input type="checkbox"/> 17b 20a <input type="checkbox"/> 17c 20b <input type="checkbox"/> 17d 20c <input type="checkbox"/> 18 21	

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Mrs. Helen Halpin		Date of Receipt
	Mailing Address 7979 E. Boulevard Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 31 / 2007
	City	State	Zip Code
	Alexandria	VA	22308
	FEC ID number of contributing federal political committee.		<input type="text"/>
Name of Employer		Occupation Homemaker	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text"/>	<input type="text"/> 2300.00
			Transaction ID: SA17A.4591

B.	Full Name (Last, First, Middle Initial) Mrs. Mary Hansen		Date of Receipt
	Mailing Address 6653 Scottswood Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 29 / 2007
	City	State	Zip Code
	Alexandria	VA	22315
	FEC ID number of contributing federal political committee.		<input type="text"/>
Name of Employer		Occupation Homemaker	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text"/>	<input type="text"/> 1000.00
			Transaction ID: SA17A.4595

C.	Full Name (Last, First, Middle Initial) Ms. Dorcus Hardy		Date of Receipt
	Mailing Address 11407 Stonewall Jackson Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 31 / 2007
	City	State	Zip Code
	Spotsylvania	VA	22533
	FEC ID number of contributing federal political committee.		<input type="text"/>
Name of Employer Dorcas R. Hardy & Associates		Occupation Govt. Relations Consultant	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text"/>	<input type="text"/> 250.00
			Transaction ID: SA17A.4597

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 3550.00
TOTAL This Period (last page this line number only)	<input type="text"/>

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 18 / 96
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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)
JIM GILMORE FOR PRESIDENT

A. Full Name (Last, First, Middle Initial) Mr. Edwin Harper, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 9 / 2 0 0 7	
Mailing Address 2205 Link Road		Amount of Each Receipt this Period 1000.00	
City Lynchburg	State VA	Zip Code 24503	
FEC ID number of contributing federal political committee.		Transaction ID: SA17A.4600	
Name of Employer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Election Cycle-to-Date ▼ 1000.00		

B. Full Name (Last, First, Middle Initial) Mr. Alan Hilburg		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 6 / 2 0 0 7	
Mailing Address 228 N. Columbus Street		Amount of Each Receipt this Period 2300.00	
City Alexandria	State VA	Zip Code 22314	
FEC ID number of contributing federal political committee.		Transaction ID: SA17A.4622	
Name of Employer PN Consulting Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation President Election Cycle-to-Date ▼ 2300.00		

C. Full Name (Last, First, Middle Initial) Mrs. Ellen Holmes		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 2 3 / 2 0 0 7	
Mailing Address 108 Hurlburt Street		Amount of Each Receipt this Period 2100.00	
City Glastonbury	State CT	Zip Code 06033	
FEC ID number of contributing federal political committee.		Transaction ID: SA17A.4636	
Name of Employer Information Requested Per Best Efforts Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Per Best Efforts Election Cycle-to-Date ▼ 2100.00		

SUBTOTAL of Receipts This Page (optional) ▶	5400.00
TOTAL This Period (last page this line number only) ▶	

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 / 96
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Ms. Laura Holmes	Date of Receipt MM / DD / YYYY 01 / 23 / 2007
	Mailing Address 2640 Jockey's Neck Trail	Amount of Each Receipt this Period 2100.00
	City State Zip Code Williamsburg VA 23185	
	FEC ID number of contributing federal political committee.	
	Name of Employer Chandler Management Corporation Occupation Real Estate Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2100.00	Transaction ID: SA17A.4638

B.	Full Name (Last, First, Middle Initial) Mr. Robert Holmes	Date of Receipt MM / DD / YYYY 01 / 23 / 2007
	Mailing Address 108 Hurlburt Street	Amount of Each Receipt this Period 2100.00
	City State Zip Code Glastonbury CT 06033	
	FEC ID number of contributing federal political committee.	
	Name of Employer Information Requested Per Best Efforts Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2100.00	Transaction ID: SA17A.4640

C.	Full Name (Last, First, Middle Initial) Mr. James Horton	Date of Receipt MM / DD / YYYY 03 / 29 / 2007
	Mailing Address 2 Belmont Court	Amount of Each Receipt this Period 1000.00
	City State Zip Code Fredericksburg VA 22405	
	FEC ID number of contributing federal political committee.	
	Name of Employer Horton Consulting Occupation Owner Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00	Transaction ID: SA17A.4646

SUBTOTAL of Receipts This Page (optional)	5200.00
TOTAL This Period (last page this line number only)	

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 20 / 96
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Mr. Stephen Horton	Date of Receipt M M / D D / Y Y Y Y Y 03 / 01 / 2007
	Mailing Address P.O. Box 17661	Amount of Each Receipt this Period 500.00
	City State Zip Code Richmond VA 23226	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Mc Guire Woods Public Affairs	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	Transaction ID: SA17A.4648

B.	Full Name (Last, First, Middle Initial) Mr. Stephen Horton	Date of Receipt M M / D D / Y Y Y Y Y 03 / 29 / 2007
	Mailing Address P.O. Box 17661	Amount of Each Receipt this Period 300.00
	City State Zip Code Richmond VA 23226	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Mc Guire Woods Public Affairs	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 800.00	Transaction ID: SA17A.4649

C.	Full Name (Last, First, Middle Initial) Mr. William Hurd	Date of Receipt M M / D D / Y Y Y Y Y 03 / 29 / 2007
	Mailing Address 1001 Haxall Point Troutman Sanders Building	Amount of Each Receipt this Period 1000.00
	City State Zip Code Richmond VA 23219	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Troutman Sanders Attorney	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	Transaction ID: SA17A.4651

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

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 21 / 96
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Dr. Robert Jacey	Date of Receipt MM / DD / YYYY 03 / 29 / 2007
	Mailing Address 2821 Parham Road Suite 105	Amount of Each Receipt this Period 1000.00
	City State Zip Code Richmond VA 23294	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Self-Employed Opthamologist	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	Transaction ID: SA17A.4653

B.	Full Name (Last, First, Middle Initial) Cw04 Robert Jaffin	Date of Receipt MM / DD / YYYY 03 / 31 / 2007
	Mailing Address 47 Governors Road	Amount of Each Receipt this Period 1000.00
	City State Zip Code Rochester NH 03867	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Retired	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	Transaction ID: SA17A.4655

C.	Full Name (Last, First, Middle Initial) Mr. James Jenkins	Date of Receipt MM / DD / YYYY 03 / 29 / 2007
	Mailing Address 9504 Lyndonway Drive	Amount of Each Receipt this Period 250.00
	City State Zip Code Richmond VA 23229	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Information Requested Per Best Efforts Information Requested Per Best Efforts	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	Transaction ID: SA17A.4657

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

**Schedule A-P
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 22 / 96
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Mrs. Taqui Johnson	Date of Receipt MM / DD / YYYY 03 / 29 / 2007
	Mailing Address 8106 University Drive	Amount of Each Receipt this Period 250.00
	City State Zip Code Richmond VA 23229	
	FEC ID number of contributing federal political committee.	
	Name of Employer Information Requested Per Best Efforts Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Per Best Efforts Election Cycle-to-Date ▼ 250.00
		Transaction ID: SA17A.4668

B.	Full Name (Last, First, Middle Initial) Ms. Eliane Jost	Date of Receipt MM / DD / YYYY 02 / 06 / 2007
	Mailing Address 5 Wolf Pit Court, Kccc	Amount of Each Receipt this Period 2100.00
	City State Zip Code Rehoboth Beach DE 19971	
	FEC ID number of contributing federal political committee.	
	Name of Employer Information Requested Per Best Efforts Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Per Best Efforts Election Cycle-to-Date ▼ 2100.00
		Transaction ID: SA17A.4674

C.	Full Name (Last, First, Middle Initial) Mr. Henry Jost	Date of Receipt MM / DD / YYYY 03 / 31 / 2007
	Mailing Address 7 Wolfpit Court	Amount of Each Receipt this Period 4200.00
	City State Zip Code Rehoboth Beach DE 19971	
	FEC ID number of contributing federal political committee.	
	Name of Employer Information Requested Per Best Efforts Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Per Best Efforts Election Cycle-to-Date ▼ 4200.00
		REATTRIBUTION REQUESTED (AUTOMATIC) Transaction ID: SA17A.4676

SUBTOTAL of Receipts This Page (optional)	▶	6550.00
TOTAL This Period (last page this line number only)	▶	

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 23 / 96
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Paul Jost	Date of Receipt MM / DD / YYYY 01 / 23 / 2007
	Mailing Address 2640 Jockey's Neck Trail	Amount of Each Receipt this Period 2100.00
	City State Zip Code Williamsburg VA 23185	
	FEC ID number of contributing federal political committee.	
	Name of Employer Chandler Management Corporation Occupation President Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2100.00
		Transaction ID: SA17A.4678

B.	Full Name (Last, First, Middle Initial) Mr. Quintin Kendall	Date of Receipt MM / DD / YYYY 03 / 31 / 2007
	Mailing Address 1313 Nottoway Ave.	Amount of Each Receipt this Period 250.00
	City State Zip Code Richmond VA 23227	
	FEC ID number of contributing federal political committee.	
	Name of Employer Information Requested Per Best Efforts Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Per Best Efforts Election Cycle-to-Date ▼ 250.00
		Transaction ID: SA17A.4690

C.	Full Name (Last, First, Middle Initial) Mrs. Robert Kilpatrick	Date of Receipt MM / DD / YYYY 03 / 29 / 2007
	Mailing Address Foxwood P.O. Box 38	Amount of Each Receipt this Period 2300.00
	City State Zip Code Crozier VA 23039	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Retired Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00
		Transaction ID: SA17A.4696

SUBTOTAL of Receipts This Page (optional)	▶	4650.00
TOTAL This Period (last page this line number only)	▶	

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 24 / 96
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Ms Bonnie Lanier	Date of Receipt MM / DD / YYYY 03 / 24 / 2007
	Mailing Address 3704 Cork Road	Amount of Each Receipt this Period 25.00
	City State Zip Code Plant City FL 33565	Contribution
	FEC ID number of contributing federal political committee.	Transaction ID: SA17A.5365
	Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 25.00	

B.	Full Name (Last, First, Middle Initial) Mrs. Laura A. Lantzy	Date of Receipt MM / DD / YYYY 03 / 10 / 2007
	Mailing Address 433 Old Town Court	Amount of Each Receipt this Period 20.00
	City State Zip Code Alexandria VA 22314	Contribution
	FEC ID number of contributing federal political committee.	Transaction ID: SA17A.5317
	Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 20.00	

C.	Full Name (Last, First, Middle Initial) Mr. Frank Laughon, Jr.	Date of Receipt MM / DD / YYYY 03 / 29 / 2007
	Mailing Address 4400 S. Ashlawn Drive	Amount of Each Receipt this Period 250.00
	City State Zip Code Richmond VA 23221	Contribution
	FEC ID number of contributing federal political committee.	Transaction ID: SA17A.4712
	Name of Employer Occupation Richmond Cold Storage Co. Inc. Executive Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	295.00
TOTAL This Period (last page this line number only)	

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 25 / 96
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Mr. Gary Leclair		Date of Receipt	
	Mailing Address 11508 Barrington Bridge Terrace		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y	
	City State Zip Code Richmond VA 23233		<input type="text"/> 03 / <input type="text"/> 29 / <input type="text"/> 2007	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
	Name of Employer Occupation Self-Employed Attorney		<input type="text"/> 2300.00	
	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text"/> 2300.00	
Transaction ID: SA17A.4720				

B.	Full Name (Last, First, Middle Initial) Mr. Howard Lee		Date of Receipt	
	Mailing Address 6701 Democracy Blvd.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y	
	City State Zip Code Bethesda MD 20817		<input type="text"/> 03 / <input type="text"/> 31 / <input type="text"/> 2007	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
	Name of Employer Occupation Cosmos Alliance Attorney / Partner		<input type="text"/> 1000.00	
	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text"/> 1000.00	
Transaction ID: SA17A.4722				

C.	Full Name (Last, First, Middle Initial) Mrs. Dede Levitt		Date of Receipt	
	Mailing Address P.O. Box 1079 4 Stone Tower Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y	
	City State Zip Code Alpine NJ 07620		<input type="text"/> 01 / <input type="text"/> 22 / <input type="text"/> 2007	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
	Name of Employer Occupation Homemaker		<input type="text"/> 2100.00	
	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text"/> 2100.00	
Transaction ID: SA17A.4726				

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 5400.00
TOTAL This Period (last page this line number only)	<input type="text"/>

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 26 / 96
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Mr. Michael Levitt	Date of Receipt MM / DD / YYYY 01 / 22 / 2007
	Mailing Address P.O. Box 1079 4 Stone Tower Drive	Amount of Each Receipt this Period 2100.00
	City State Zip Code Alpine NJ 07620	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Stone Tower Capital CEO	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2100.00	Transaction ID: SA17A.4728

B.	Full Name (Last, First, Middle Initial) Mr. Edward Lippen	Date of Receipt MM / DD / YYYY 03 / 31 / 2007
	Mailing Address 8803 River Road	Amount of Each Receipt this Period 1000.00
	City State Zip Code Richmond VA 23229	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Information Requested Per Best Efforts Information Requested Per Best Efforts	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	Transaction ID: SA17A.4730

C.	Full Name (Last, First, Middle Initial) Mr. Michael Lockerby	Date of Receipt MM / DD / YYYY 03 / 13 / 2007
	Mailing Address 105 Thomashire Court	Amount of Each Receipt this Period 1000.00
	City State Zip Code Richmond VA 23229	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Foley & Lardner LLP Attorney	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	Transaction ID: SA17A.4732

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

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 27 / 96
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Mr. Howard Macrae, Jr.	Date of Receipt MM / DD / YYYY 03 / 29 / 2007
	Mailing Address 2413 Cedar Cone Drive	Amount of Each Receipt this Period 225.00
	City State Zip Code Richmond VA 23233	
	FEC ID number of contributing federal political committee.	
	Name of Employer Information Requested Per Best Efforts Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Per Best Efforts Election Cycle-to-Date ▼ 225.00
		Transaction ID: SA17A.4744

B.	Full Name (Last, First, Middle Initial) Mr. Paul Madison	Date of Receipt MM / DD / YYYY 03 / 14 / 2007
	Mailing Address 39800 Waterfordway Lane	Amount of Each Receipt this Period 75.00
	City State Zip Code Waterford VA 20197	
	FEC ID number of contributing federal political committee.	
	Name of Employer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 75.00
		Transaction ID: SA17A.5319

C.	Full Name (Last, First, Middle Initial) Mr. James Massie, III	Date of Receipt MM / DD / YYYY 03 / 29 / 2007
	Mailing Address 9011 Norwick Road	Amount of Each Receipt this Period 250.00
	City State Zip Code Richmond VA 23229	
	FEC ID number of contributing federal political committee.	
	Name of Employer James P. Massie III Inc. Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Private Equity Election Cycle-to-Date ▼ 250.00
		Transaction ID: SA17A.4750

SUBTOTAL of Receipts This Page (optional)	550.00
TOTAL This Period (last page this line number only)	

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 28 / 96
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Mr. Robert McNichols		Date of Receipt
	Mailing Address 3333 Peters Creek Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 12 / 2007
	City	State	Zip Code
	Roanoke	VA	24019
	FEC ID number of contributing federal political committee.		<input type="text"/>
Name of Employer CSM, Inc		Occupation Consultant	Contribution
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text"/>	
		<input type="text"/> 100.00	
			Transaction ID: SA17A.5325

B.	Full Name (Last, First, Middle Initial) Mr. Christopher Meyer		Date of Receipt
	Mailing Address 311 Runnin Cedar Lane		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 29 / 2007
	City	State	Zip Code
	Richmond	VA	23229
	FEC ID number of contributing federal political committee.		<input type="text"/>
Name of Employer Allen, Allen & Allen		Occupation Attorney	Contribution
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text"/>	
		<input type="text"/> 1000.00	
			Transaction ID: SA17A.4768

C.	Full Name (Last, First, Middle Initial) Mr. Jacob Miles		Date of Receipt
	Mailing Address 4 Gatehouse Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 31 / 2007
	City	State	Zip Code
	Scarsdale	NY	10583
	FEC ID number of contributing federal political committee.		<input type="text"/>
Name of Employer Information Requested Per Best Efforts		Occupation Information Requested Per Best Efforts	Contribution
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text"/>	
		<input type="text"/> 2300.00	
			Transaction ID: SA17A.4770

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 3400.00
TOTAL This Period (last page this line number only)	<input type="text"/>

Schedule A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 96
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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

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)
JIM GILMORE FOR PRESIDENT

A. Full Name (Last, First, Middle Initial) Ms. Lisa Miller		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 7	
Mailing Address 6013 A. Wilson Blvd		Amount of Each Receipt this Period 500.00	
City State Zip Code Arlington VA 22314	FEC ID number of contributing federal political committee.		
Name of Employer State Farm	Occupation Self-Employed		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		
Transaction ID: SA17A.4772			

B. Full Name (Last, First, Middle Initial) Mr. Nathan Miller		Date of Receipt M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 7	
Mailing Address 560 Neff Avenue Suite 200		Amount of Each Receipt this Period 1000.00	
City State Zip Code Harrisonburg VA 22801	FEC ID number of contributing federal political committee.		
Name of Employer Miller & Earle	Occupation Attorney		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		
Transaction ID: SA17A.4774			

C. Full Name (Last, First, Middle Initial) Mg William Moore		Date of Receipt M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 7	
Mailing Address 8424 Weller Avenue		Amount of Each Receipt this Period 1000.00	
City State Zip Code Mclean VA 22102	FEC ID number of contributing federal political committee.		
Name of Employer Moore Associates Internat- ional	Occupation Consultant		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		
Transaction ID: SA17A.4784			

SUBTOTAL of Receipts This Page (optional) ▶	2500.00
TOTAL This Period (last page this line number only) ▶	[]

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 30 / 96
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Mr. Richard Neel, Jr.	Date of Receipt MM / DD / YYYY 03 / 29 / 2007
	Mailing Address 1793 Duffield Lane	Amount of Each Receipt this Period 1000.00
	City State Zip Code Alexandria VA 22307	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Self-Employed Attorney	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	Transaction ID: SA17A.4796

B.	Full Name (Last, First, Middle Initial) Mr. Kenneth Newsome	Date of Receipt MM / DD / YYYY 03 / 29 / 2007
	Mailing Address 8905 Highfield Road	Amount of Each Receipt this Period 250.00
	City State Zip Code Richmond VA 23229	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Amf Bakery Systems President	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	Transaction ID: SA17A.4802

C.	Full Name (Last, First, Middle Initial) Mr. John O'bannon, III	Date of Receipt MM / DD / YYYY 03 / 31 / 2007
	Mailing Address 8111 Rosehill Road	Amount of Each Receipt this Period 500.00
	City State Zip Code Richmond VA 23229	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Information Requested Per Best Efforts Information Requested Per Best Efforts	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	Transaction ID: SA17A.4808

SUBTOTAL of Receipts This Page (optional)	1750.00
TOTAL This Period (last page this line number only)	

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 31 / 96
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Mr. Frank Paris	Date of Receipt MM / DD / YYYY 01 / 22 / 2007
	Mailing Address 6508 Elk Court	Amount of Each Receipt this Period 2100.00
	City State Zip Code Waldorf MD 20603	
	FEC ID number of contributing federal political committee.	
	Name of Employer Prosperity Mortgage	Occupation Mortgage Banker
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2100.00	Transaction ID: SA17A.4828

B.	Full Name (Last, First, Middle Initial) Mrs. Marie-Louise Paris	Date of Receipt MM / DD / YYYY 01 / 22 / 2007
	Mailing Address 6508 Elk Court	Amount of Each Receipt this Period 2100.00
	City State Zip Code Waldorf MD 20603	
	FEC ID number of contributing federal political committee.	
	Name of Employer Information Requested Per Best Efforts	Occupation Information Requested Per Best Efforts
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2100.00	Transaction ID: SA17A.4830

C.	Full Name (Last, First, Middle Initial) Mr. Donald Patten	Date of Receipt MM / DD / YYYY 02 / 06 / 2007
	Mailing Address 139 West Landing	Amount of Each Receipt this Period 1000.00
	City State Zip Code Williamsburg VA 23185	
	FEC ID number of contributing federal political committee.	
	Name of Employer Patten, Wornom, Hatten & Diamondstein	Occupation Attorney
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	Transaction ID: SA17A.4834

SUBTOTAL of Receipts This Page (optional)	5200.00
TOTAL This Period (last page this line number only)	

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 32 / 96
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Ms. Anna Pearson	Date of Receipt MM / DD / YYYY 01 / 22 / 2007
	Mailing Address 6085 Wellington Court	Amount of Each Receipt this Period 2100.00
	City State Zip Code Cumming GA 30040	
	FEC ID number of contributing federal political committee.	
	Name of Employer Information Requested Per Best Efforts Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Per Best Efforts Election Cycle-to-Date ▼ 2100.00
		Transaction ID: SA17A.4836

B.	Full Name (Last, First, Middle Initial) Mr. Eugene Pearson	Date of Receipt MM / DD / YYYY 01 / 22 / 2007
	Mailing Address 6085 Wellington Court	Amount of Each Receipt this Period 2100.00
	City State Zip Code Cumming GA 30040	
	FEC ID number of contributing federal political committee.	
	Name of Employer Paramount Grading Company Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation President Election Cycle-to-Date ▼ 2100.00
		Transaction ID: SA17A.4838

C.	Full Name (Last, First, Middle Initial) Mr. Eugene Pearson, Jr.	Date of Receipt MM / DD / YYYY 01 / 22 / 2007
	Mailing Address 209 Fawn Drive	Amount of Each Receipt this Period 2100.00
	City State Zip Code Dawsonville GA 30534	
	FEC ID number of contributing federal political committee.	
	Name of Employer Paramont Grading Co. Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Contractor Election Cycle-to-Date ▼ 2100.00
		Transaction ID: SA17A.4840

SUBTOTAL of Receipts This Page (optional)	6300.00
TOTAL This Period (last page this line number only)	

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 33 / 96
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Ms. Jill Pearson		Date of Receipt MM / DD / YYYY 01 / 22 / 2007
	Mailing Address 209 Fawn Drive		Amount of Each Receipt this Period 2100.00
	City Dawsonville	State GA	
	FEC ID number of contributing federal political committee.		Transaction ID: SA17A.4842
	Name of Employer	Occupation Homemaker	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2100.00		

B.	Full Name (Last, First, Middle Initial) Mr. John Pearson		Date of Receipt MM / DD / YYYY 01 / 22 / 2007
	Mailing Address 6060 Mockingbird Road		Amount of Each Receipt this Period 2100.00
	City Cumming	State GA	
	FEC ID number of contributing federal political committee.		Transaction ID: SA17A.4844
	Name of Employer Information Requested Per Best Efforts	Occupation Information Requested Per Best Efforts	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2100.00		

C.	Full Name (Last, First, Middle Initial) Mrs. Sandy Pearson		Date of Receipt MM / DD / YYYY 01 / 22 / 2007
	Mailing Address 6060 Mockingbird Road		Amount of Each Receipt this Period 2100.00
	City Cumming	State GA	
	FEC ID number of contributing federal political committee.		Transaction ID: SA17A.4846
	Name of Employer Information Requested Per Best Efforts	Occupation Information Requested Per Best Efforts	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2100.00		

SUBTOTAL of Receipts This Page (optional)	6300.00
TOTAL This Period (last page this line number only)	

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 34 / 96
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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)
JIM GILMORE FOR PRESIDENT

A. Full Name (Last, First, Middle Initial) Mr. Baxter Phillips, Jr.		Date of Receipt M M / D D / Y Y Y Y 03 / 29 / 2007	
Mailing Address 714 Meadow View Ridge		Amount of Each Receipt this Period 4600.00	
City State Zip Code Manakin Sabot VA 23103	REATTRIBUTION REQUESTED (AUTOMATIC)		
FEC ID number of contributing federal political committee.		Transaction ID: SA17A.4862	
Name of Employer Occupation Massey Energy Company Executive Vice President and CAO	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Election Cycle-to-Date ▼ 4600.00			

B. Full Name (Last, First, Middle Initial) Mr. Cameron Quinn		Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2007	
Mailing Address P.O. Box 2611		Amount of Each Receipt this Period 300.00	
City State Zip Code Arlington VA 22202	Transaction ID: SA17A.4884		
FEC ID number of contributing federal political committee.			
Name of Employer Occupation U.S. Department Of Justice Attorney	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Election Cycle-to-Date ▼ 300.00			

C. Full Name (Last, First, Middle Initial) Mr. John R. Quinn		Date of Receipt M M / D D / Y Y Y Y 03 / 11 / 2007	
Mailing Address 125 Wood Duck Place Apt. 203		Amount of Each Receipt this Period 50.00	
City State Zip Code Charlottesville VA 22902	Transaction ID: SA17A.5321		
FEC ID number of contributing federal political committee.			
Name of Employer Occupation Retired	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Election Cycle-to-Date ▼ 50.00			

SUBTOTAL of Receipts This Page (optional) ▶	4950.00
TOTAL This Period (last page this line number only) ▶	

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 35 / 96
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Mr. Robert Roberson	Date of Receipt MM / DD / YYYY 02 / 06 / 2007
	Mailing Address P.O. Box 280	Amount of Each Receipt this Period 1000.00
	City State Zip Code Williamsburg VA 23187	
	FEC ID number of contributing federal political committee.	
	Name of Employer Information Requested Per Best Efforts Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Per Best Efforts Election Cycle-to-Date ▼ 1000.00
		Transaction ID: SA17A.4914

B.	Full Name (Last, First, Middle Initial) Mr. John Roberts	Date of Receipt MM / DD / YYYY 03 / 09 / 2007
	Mailing Address 1500 Westbrook Court Apartment 5115	Amount of Each Receipt this Period 4600.00
	City State Zip Code Richmond VA 23227	
	FEC ID number of contributing federal political committee.	
	Name of Employer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Election Cycle-to-Date ▼ 4600.00
		REATTRIBUTION REQUESTED (AUTOMATIC) Transaction ID: SA17A.4918

C.	Full Name (Last, First, Middle Initial) Mr. David Robertson	Date of Receipt MM / DD / YYYY 03 / 29 / 2007
	Mailing Address 5221 Sylvan Road	Amount of Each Receipt this Period 2300.00
	City State Zip Code Richmond VA 23225	
	FEC ID number of contributing federal political committee.	
	Name of Employer Mc Guire Woods L.L.P. Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Attorney Election Cycle-to-Date ▼ 2300.00
		Transaction ID: SA17A.4920

SUBTOTAL of Receipts This Page (optional)	7900.00
TOTAL This Period (last page this line number only)	

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 36 / 96
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Mr. John Rocovich, Jr.		Date of Receipt
	Mailing Address 5264 Falcon Ridge Road S.W.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 1 / 2 2 / 2 0 0 7
	City	State	Zip Code
	Roanoke	VA	24014
	FEC ID number of contributing federal political committee.		<input type="text"/>
Name of Employer Moss & Rocovich		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 2100.00
			Transaction ID: SA17A.4922

B.	Full Name (Last, First, Middle Initial) Dr. Sue Ellen Rocovich		Date of Receipt
	Mailing Address 5264 Falcon Ridge Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 3 / 2 9 / 2 0 0 7
	City	State	Zip Code
	Roanoke	VA	24018
	FEC ID number of contributing federal political committee.		<input type="text"/>
Name of Employer Self-Employed		Occupation Physician	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 2300.00
			Transaction ID: SA17A.4924

C.	Full Name (Last, First, Middle Initial) Mr. Louis Rossiter		Date of Receipt
	Mailing Address 276 William Way		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 3 / 3 1 / 2 0 0 7
	City	State	Zip Code
	Williamsburg	VA	23185
	FEC ID number of contributing federal political committee.		<input type="text"/>
Name of Employer Information Requested Per Best Efforts		Occupation Information Requested Per Best Efforts	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1000.00
			Transaction ID: SA17A.4930

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 5400.00
TOTAL This Period (last page this line number only)	<input type="text"/>

Schedule A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 96

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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

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)
JIM GILMORE FOR PRESIDENT

A. Full Name (Last, First, Middle Initial) Mr. Peter Seaver		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 2 3 / 2 0 0 7	
Mailing Address 1708 Embury Road		Amount of Each Receipt this Period 2100.00	
City Kalamazoo	State MI	Zip Code 49008	
FEC ID number of contributing federal political committee.		Transaction ID: SA17A.4957	
Name of Employer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Election Cycle-to-Date ▼ 2100.00		

B. Full Name (Last, First, Middle Initial) Ms. Lana Sergent		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 7	
Mailing Address P.O. Box 426		Amount of Each Receipt this Period 250.00	
City Pennington Gap	State VA	Zip Code 24277	
FEC ID number of contributing federal political committee.		Transaction ID: SA17A.4961	
Name of Employer Information Requested Per Best Efforts Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Per Best Efforts Election Cycle-to-Date ▼ 250.00		

C. Full Name (Last, First, Middle Initial) Mr. Victor Shaheen		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 0 / 2 0 0 7	
Mailing Address 8890 Three Chopt Road		Amount of Each Receipt this Period 2300.00	
City Richmond	State VA	Zip Code 23229	
FEC ID number of contributing federal political committee.		Transaction ID: SA17A.4963	
Name of Employer Self-Employed Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Attorney Election Cycle-to-Date ▼ 2300.00		

SUBTOTAL of Receipts This Page (optional) ▶	4650.00
TOTAL This Period (last page this line number only) ▶	

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 38 / 96
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Mr. Richard Short		Date of Receipt
	Mailing Address P.O. Box 933		<input type="text" value="03"/> / <input type="text" value="16"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Virginia Beach	VA	23451
	FEC ID number of contributing federal political committee.		<input type="text" value="250.00"/>
	Name of Employer Retired		Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text" value="250.00"/>	
			Transaction ID: SA17A.4971

B.	Full Name (Last, First, Middle Initial) Mr. George Slater		Date of Receipt
	Mailing Address 1444 Rhode Island Avenue N.W. #514		<input type="text" value="03"/> / <input type="text" value="29"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Washington	DC	20005
	FEC ID number of contributing federal political committee.		<input type="text" value="500.00"/>
	Name of Employer SBA Director		Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text" value="500.00"/>	
			Transaction ID: SA17A.4979

C.	Full Name (Last, First, Middle Initial) Mr. William Smith		Date of Receipt
	Mailing Address 115 Linden Drive		<input type="text" value="03"/> / <input type="text" value="29"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Danville	VA	24541
	FEC ID number of contributing federal political committee.		<input type="text" value="500.00"/>
	Name of Employer Self-Employed Attorney		Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text" value="500.00"/>	
			Transaction ID: SA17A.4991

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1250.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 96
	<input type="checkbox"/> 16 19a <input checked="" type="checkbox"/> 17a 19b <input type="checkbox"/> 17b 20a <input type="checkbox"/> 17c 20b <input type="checkbox"/> 17d 20c <input type="checkbox"/> 18 21	

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Mr. Donald D. Sowder	Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 7
	Mailing Address 12701 Knightcross Road	Amount of Each Receipt this Period 250.00
	City State Zip Code Midlothian VA 23113	Contribution
	FEC ID number of contributing federal political committee.	Transaction ID: SA17A.5329
	Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Mr. Wayne Sullivan	Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 9 / 2 0 0 7
	Mailing Address 3600 Edinger Road	Amount of Each Receipt this Period 250.00
	City State Zip Code Richmond VA 23234	Contribution
	FEC ID number of contributing federal political committee.	Transaction ID: SA17A.5010
	Name of Employer Occupation Retired Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Mr. Clarence L. Thomason	Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 2 / 2 0 0 7
	Mailing Address 7803 Freehollow Drive	Amount of Each Receipt this Period 50.00
	City State Zip Code Falls Church VA 22042	Contribution
	FEC ID number of contributing federal political committee.	Transaction ID: SA17A.5323
	Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 50.00	

SUBTOTAL of Receipts This Page (optional)	550.00
TOTAL This Period (last page this line number only)	

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 40 / 96
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Mr. Michael Thompson	Date of Receipt M M / D D / Y Y Y Y Y 03 / 29 / 2007
	Mailing Address 9035 Golden Sunset Lane	Amount of Each Receipt this Period 250.00
	City State Zip Code Springfield VA 22153	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Thomas Jefferson Institute President	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	Transaction ID: SA17A.5028

B.	Full Name (Last, First, Middle Initial) john Unitemized Receipts	Date of Receipt M M / D D / Y Y Y Y Y 03 / 31 / 2007
	Mailing Address Info. Requested	Amount of Each Receipt this Period 5760.00
	City State Zip Code Info. Requested VA 22311	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Info. Requested Info. Requested	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 5760.00	Transaction ID: SA17A.5041

C.	Full Name (Last, First, Middle Initial) Mr. George Urquhart	Date of Receipt M M / D D / Y Y Y Y Y 03 / 26 / 2007
	Mailing Address 7201 Newville Road	Amount of Each Receipt this Period 500.00
	City State Zip Code Waverly VA 23890	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Information Requested Per Best Efforts Information Requested Per Best Efforts	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	Transaction ID: SA17A.5043

SUBTOTAL of Receipts This Page (optional)	6510.00
TOTAL This Period (last page this line number only)	

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 41 / 96
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Mr. Michael Wade	Date of Receipt M M / D D / Y Y Y Y Y 03 / 29 / 2007
	Mailing Address 10400 Windingridge Circle	Amount of Each Receipt this Period 250.00
	City State Zip Code Richmond VA 23238	
	FEC ID number of contributing federal political committee.	
	Name of Employer Information Requested Per Best Efforts Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Per Best Efforts Election Cycle-to-Date ▼ 250.00
		Transaction ID: SA17A.5047

B.	Full Name (Last, First, Middle Initial) Mr. Gary Walker	Date of Receipt M M / D D / Y Y Y Y Y 03 / 29 / 2007
	Mailing Address P.O. Box 1	Amount of Each Receipt this Period 1000.00
	City State Zip Code Charlotte Court Ho VA 23923	
	FEC ID number of contributing federal political committee.	
	Name of Employer Information Requested Per Best Efforts Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Per Best Efforts Insurance Election Cycle-to-Date ▼ 1000.00
		Transaction ID: SA17A.5049

C.	Full Name (Last, First, Middle Initial) Mr. Thomas Walsh	Date of Receipt M M / D D / Y Y Y Y Y 03 / 31 / 2007
	Mailing Address 2732 Olive Avenue N.W.	Amount of Each Receipt this Period 2300.00
	City State Zip Code Washington DC 20007	
	FEC ID number of contributing federal political committee.	
	Name of Employer Information Requested Per Best Efforts Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Per Best Efforts Election Cycle-to-Date ▼ 2300.00
		Transaction ID: SA17A.5051

SUBTOTAL of Receipts This Page (optional)	▶	3550.00
TOTAL This Period (last page this line number only)	▶	

**Schedule A-P
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 42 / 96
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Mr. Paul Weimer	Date of Receipt MM / DD / YYYY 03 / 21 / 2007
	Mailing Address 4 Westwick Road	Amount of Each Receipt this Period 500.00
	City State Zip Code Richmond VA 23238	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Retired	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	Transaction ID: SA17A.5059

B.	Full Name (Last, First, Middle Initial) Mr. Jay Weinberg	Date of Receipt MM / DD / YYYY 03 / 31 / 2007
	Mailing Address 4805 Lockgreen Circle	Amount of Each Receipt this Period 500.00
	City State Zip Code Richmond VA 23226	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Information Requested Per Best Efforts	Information Requested Per Best Efforts
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	Transaction ID: SA17A.5061

C.	Full Name (Last, First, Middle Initial) Mr. Thomas Wigglesworth, Jr.	Date of Receipt MM / DD / YYYY 03 / 31 / 2007
	Mailing Address 9527 Liberty Tree Lane	Amount of Each Receipt this Period 250.00
	City State Zip Code Vienna VA 22182	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Retired	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	Transaction ID: SA17A.5069

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

**Schedule A-P
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 43 / 96
	(check only one)	
<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a
		<input type="checkbox"/> 17c
		<input type="checkbox"/> 17d
		<input type="checkbox"/> 20c
		<input type="checkbox"/> 18
		<input type="checkbox"/> 21

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Mr. Frank Young		Date of Receipt
	Mailing Address 8508 Woodhaven Blvd.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 0 6 / 2 0 0 7
	City	State	Zip Code
	Bethesda	MD	20817
	FEC ID number of contributing federal political committee.		<input type="text"/>
	Name of Employer Woodhaven Consultants, Inc.		Occupation Consultant
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text"/> 2100.00	
		Amount of Each Receipt this Period <input type="text"/> 2100.00	
			Transaction ID: SA17A.5099

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 2100.00
TOTAL This Period (last page this line number only)	<input type="text"/> 161200.00

**Schedule A-P
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 44 / 96
	(check only one)	
<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input checked="" type="checkbox"/> 17b
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a
<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Roanoke County Republican Committee	Date of Receipt
	Mailing Address Info. Requested	<input type="text" value="01"/> / <input type="text" value="23"/> / <input type="text" value="2007"/>
	City Info. Requested	Amount of Each Receipt this Period
	State VA	<input type="text" value="250.00"/>
	Zip Code 24018	
	FEC ID number of contributing federal political committee.	
Name of Employer	Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text" value="250.00"/>	
		Transaction ID: SA17B.5103

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="250.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="250.00"/>

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 45 / 96
	(check only one)	
<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a
<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Friends Of Dick Black	Date of Receipt MM / DD / YYYY 03 / 29 / 2007
	Mailing Address 20978 Flatboat Court	Amount of Each Receipt this Period 1000.00
	City State Zip Code Sterling VA 20165	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00
		Transaction ID: SA17C.5105

B.	Full Name (Last, First, Middle Initial) Mcguire, Woods Federal Pac	Date of Receipt MM / DD / YYYY 03 / 31 / 2007
	Mailing Address 901 East Cary Street	Amount of Each Receipt this Period 1000.00
	City State Zip Code Richmond VA 23219	
	FEC ID number of contributing federal political committee.	C00225342
	Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00
		Transaction ID: SA17C.5107

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

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 46 / 96
	(check only one)
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input type="checkbox"/> 17a <input checked="" type="checkbox"/> 19b
<input type="checkbox"/> 17b <input type="checkbox"/> 20a	<input type="checkbox"/> 17c <input type="checkbox"/> 20b
<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Brian Anderson		Date of Receipt MM / DD / YYYY 03 / 06 / 2007
	Mailing Address 5315 Connecticut Ave., #608		Amount of Each Receipt this Period 2300.00
	City Washington	State DC	
	FEC ID number of contributing federal political committee.		Postage Loan
	Name of Employer Eberle Communications	Occupation Vice President	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00		
			Transaction ID: SA19B.5134

B.	Full Name (Last, First, Middle Initial) BB&T		Date of Receipt MM / DD / YYYY 03 / 09 / 2007
	Mailing Address 1909 K St., Nw		Amount of Each Receipt this Period 2400.00
	City Washington	State DC	
	FEC ID number of contributing federal political committee.		Overdraft Protection
	Name of Employer	Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2400.00		
			Transaction ID: SA19B.5278

C.	Full Name (Last, First, Middle Initial) Alice Bransfield		Date of Receipt MM / DD / YYYY 03 / 06 / 2007
	Mailing Address 12720 Builders Rd.		Amount of Each Receipt this Period 2300.00
	City Herndon	State VA	
	FEC ID number of contributing federal political committee.		Postage Loan
	Name of Employer Retired	Occupation Retired	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00		
			Transaction ID: SA19B.5136

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

C. Form/Schedule : **SA19B**

(Current loan balance of 2300.00 has been forgiven)

Transaction ID : **SA19B.5136**

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 48 / 96
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Declan Bransfield		Date of Receipt
	Mailing Address 12720 Builders Rd.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 06 / 2007
	City	State	Zip Code
	Herndon	VA	20170
	FEC ID number of contributing federal political committee.		<input type="text"/>
Name of Employer Eberle Assoc.		Occupation President	Amount of Each Receipt this Period 2300.00
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2300.00	Postage Loan
			Transaction ID: SA19B.5135

B.	Full Name (Last, First, Middle Initial) Paul Cali		Date of Receipt
	Mailing Address 3902 Pender Spring Dr.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 06 / 2007
	City	State	Zip Code
	Fairfax	VA	22033
	FEC ID number of contributing federal political committee.		<input type="text"/>
Name of Employer American Airlines		Occupation Pilot	Amount of Each Receipt this Period 2300.00
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2300.00	Postage Loan
			Transaction ID: SA19B.5142

C.	Full Name (Last, First, Middle Initial) Bruce Eberle		Date of Receipt
	Mailing Address 1449 Montague Dr.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 06 / 2007
	City	State	Zip Code
	Vienna	VA	22181
	FEC ID number of contributing federal political committee.		<input type="text"/>
Name of Employer Eberle Communications		Occupation President	Amount of Each Receipt this Period 2300.00
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2300.00	Postage Loan
			Transaction ID: SA19B.5137

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 6900.00
TOTAL This Period (last page this line number only)	<input type="text"/>

A. Form/Schedule : **SA19B**
Transaction ID : **SA19B.5135**

(Current loan balance of 2300.00 has been forgiven)

B. Form/Schedule : **SA19B**
Transaction ID : **SA19B.5142**

(Current loan balance of 2300.00 has been forgiven)

C. Form/Schedule : **SA19B**

(Current loan balance of 2300.00 has been forgiven)

Transaction ID : **SA19B.5137**

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 51 / 96
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input type="checkbox"/> 17a <input checked="" type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Claire Eberle	Date of Receipt MM / DD / YYYY 03 / 06 / 2007
	Mailing Address 9570 Mcglinn Dr.	Amount of Each Receipt this Period 2300.00
	City State Zip Code Laconnor WA 98257	
	FEC ID number of contributing federal political committee.	Postage Loan
	Name of Employer Occupation Retired Retired	Transaction ID: SA19B.5138
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

B.	Full Name (Last, First, Middle Initial) Katherine Eberle	Date of Receipt MM / DD / YYYY 03 / 06 / 2007
	Mailing Address 1449 Montague Dr.	Amount of Each Receipt this Period 2300.00
	City State Zip Code Vienna VA 22181	
	FEC ID number of contributing federal political committee.	Postage Loan
	Name of Employer Occupation Eberle Communications Treasurer	Transaction ID: SA19B.5141
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

C.	Full Name (Last, First, Middle Initial) Robert Eberle	Date of Receipt MM / DD / YYYY 03 / 06 / 2007
	Mailing Address 9570 Mcglinn Dr.	Amount of Each Receipt this Period 2300.00
	City State Zip Code Laconnor WA 98257	
	FEC ID number of contributing federal political committee.	Postage Loan
	Name of Employer Occupation Eberle Communications Vice President	Transaction ID: SA19B.5143
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

SUBTOTAL of Receipts This Page (optional)	6900.00
TOTAL This Period (last page this line number only)	

A. Form/Schedule : **SA19B**
Transaction ID : **SA19B.5138**

(Current loan balance of 2300.00 has been forgiven)

B. Form/Schedule : **SA19B**
Transaction ID : **SA19B.5141**

(Current loan balance of 2300.00 has been forgiven)

C. Form/Schedule : **SA19B**

(Current loan balance of 2300.00 has been forgiven)

Transaction ID : **SA19B.5143**

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 54 / 96
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) William Griffiths	Date of Receipt M M / D D / Y Y Y Y Y 03 / 06 / 2007
	Mailing Address 4901 Tarheel Way	Amount of Each Receipt this Period 2006.12
	City State Zip Code Annandale VA 22003	Postage Loans
	FEC ID number of contributing federal political committee.	Transaction ID: SA19B.5145
	Name of Employer Occupation Eberle Communications CFO Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2006.12	

B.	Full Name (Last, First, Middle Initial) Elizabeth Livingstone	Date of Receipt M M / D D / Y Y Y Y Y 03 / 06 / 2007
	Mailing Address 43013 Eustis St.	Amount of Each Receipt this Period 2012.77
	City State Zip Code South Riding VA 20152	Postage Loan
	FEC ID number of contributing federal political committee.	Transaction ID: SA19B.5139
	Name of Employer Occupation Inova Health Services Nurse Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2012.77	

C.	Full Name (Last, First, Middle Initial) John Livingstone	Date of Receipt M M / D D / Y Y Y Y Y 03 / 06 / 2007
	Mailing Address 43013 Eustis St.	Amount of Each Receipt this Period 1985.14
	City State Zip Code South Riding VA 20152	Postage Loan
	FEC ID number of contributing federal political committee.	Transaction ID: SA19B.5140
	Name of Employer Occupation Integram Account Rep. Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1985.14	

SUBTOTAL of Receipts This Page (optional)	6004.03
TOTAL This Period (last page this line number only)	

A. Form/Schedule : **SA19B**

(Current loan balance of 2006.12 has been forgiven)

Transaction ID : **SA19B.5145**

**Schedule A-P
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 56 / 96
	(check only one)	
<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b
<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 19b	<input type="checkbox"/> 20a
<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Tammy Lyles-Cali	Date of Receipt
	Mailing Address 3902 Pender Spring Dr.	<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2007"/>
	City State Zip Code Fairfax VA 22033	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	<input type="text" value="2300.00"/>
	Name of Employer Occupation Eberle Communications Vice President	Postage Loan
	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text" value="2300.00"/>
		Transaction ID: SA19B.5144

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="2300.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="29104.03"/>

A. Form/Schedule : **SA19B**

(Current loan balance of 2300.00 has been forgiven)

Transaction ID : **SA19B.5144**

**Schedule A-P
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 58 / 96
	(check only one)	
<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b
<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a
<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) BB&T		Date of Receipt
	Mailing Address 1909 K St., Nw		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 31 / 2007
	City	State	Zip Code
	Washington	DC	20006
	FEC ID number of contributing federal political committee.		<input type="text"/>
Name of Employer		Occupation	Amount of Each Receipt this Period
			<input type="text"/> 2.96
Receipt For: 2008		Election Cycle-to-Date ▼	INTEREST INCOME
<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="text"/> 2402.96	Transaction ID: SA21.5133
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 2.96
TOTAL This Period (last page this line number only)	<input type="text"/> 2.96

**Schedule B-P
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Larry Allen	Transaction ID: SB23.5159 Date of Disbursement 02 / 22 / 2007
	Mailing Address 2426 19th St., NW Ste. 100	Amount of Each Disbursement this Period 10837.00
	City Washington State DC Zip Code 20009	
	Purpose of Disbursement Web Production Candidate Name JAMES S III GILMORE	101 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Larry Allen	Transaction ID: SB23.5160 Date of Disbursement 03 / 06 / 2007
	Mailing Address 2426 19th St., NW Ste. 100	Amount of Each Disbursement this Period 4112.00
	City Washington State DC Zip Code 20009	
	Purpose of Disbursement Web Production Candidate Name JAMES S III GILMORE	101 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Aristotle	Transaction ID: SB23.5192 Date of Disbursement 03 / 31 / 2007
	Mailing Address 205 Pennsylvania Ave., SE	Amount of Each Disbursement this Period 437.50
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement Credit Card Processing Fee Candidate Name JAMES S III GILMORE	101 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	15386.50
TOTAL This Period (last page this line number only)	

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) BB&T Bankcard Mailing Address 1365 Wisconsin Ave. City Washington State DC Zip Code 20007 Purpose of Disbursement Bank Fee Candidate Name JAMES S III GILMORE Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 00	Transaction ID: SB23.5198 Date of Disbursement 03 / 31 / 2007 Amount of Each Disbursement this Period 67.06 101 Category/ Type
B.	Full Name (Last, First, Middle Initial) Benjamin Bishop Mailing Address 3500 SW 12th Pl. City Des Moines State IA Zip Code 50315 Purpose of Disbursement Strategic Consulting Candidate Name JAMES S III GILMORE Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 00	Transaction ID: SB23.5164 Date of Disbursement 03 / 15 / 2007 Amount of Each Disbursement this Period 2500.00 101 Category/ Type
C.	Full Name (Last, First, Middle Initial) Tom Bunnell Mailing Address PO Box 19128 City Alexandria State VA Zip Code 22320 Purpose of Disbursement Strategic Consulting Candidate Name JAMES S III GILMORE Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 00	Transaction ID: SB23.5166 Date of Disbursement 03 / 15 / 2007 Amount of Each Disbursement this Period 3500.00 101 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

6067.06

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

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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)
JIM GILMORE FOR PRESIDENT

A. Full Name (Last, First, Middle Initial) Cox Communications Mailing Address PO Box 830217 City Baltimore State MD Zip Code 20171 Purpose of Disbursement Telephone/Internet Candidate Name JAMES S III GILMORE Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5202 Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2007
	Amount of Each Disbursement this Period 544.45
	Category/Type 101
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B. Full Name (Last, First, Middle Initial) Ms. Egan E. Crover Mailing Address P.O. Box 19128 City Alexandria State VA Zip Code 22320 Purpose of Disbursement Accounting Software Candidate Name JAMES S III GILMORE Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5167 Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2007
	Amount of Each Disbursement this Period 506.91
	Category/Type 101
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C. Full Name (Last, First, Middle Initial) Ms. Egan E. Crover Mailing Address P.O. Box 19128 City Alexandria State VA Zip Code 22320 Purpose of Disbursement Office Supplies Candidate Name JAMES S III GILMORE Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5168 Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2007
	Amount of Each Disbursement this Period 142.76
	Category/Type 101
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	1194.12
TOTAL This Period (last page this line number only) ▶	(Empty box)

**Schedule B-P
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Ms. Egan E. Crover	Transaction ID: SB23.5169 Date of Disbursement
	Mailing Address P.O. Box 19128	<input type="text" value="03"/> / <input type="text" value="15"/> / <input type="text" value="2007"/>
	City Alexandria State VA Zip Code 22320	Amount of Each Disbursement this Period
	Purpose of Disbursement Administrative Consulting	<input type="text" value="2750.00"/>
	Candidate Name JAMES S III GILMORE	<input type="text" value="101"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Ms. Egan E. Crover	Transaction ID: SB23.5170 Date of Disbursement
	Mailing Address P.O. Box 19128	<input type="text" value="03"/> / <input type="text" value="27"/> / <input type="text" value="2007"/>
	City Alexandria State VA Zip Code 22320	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel/Office Supplies	<input type="text" value="1000.00"/>
	Candidate Name JAMES S III GILMORE	<input type="text" value="101"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Mr. Peter Foster	Transaction ID: SB23.5171 Date of Disbursement
	Mailing Address 5601 Turkey Oak Road	<input type="text" value="03"/> / <input type="text" value="23"/> / <input type="text" value="2007"/>
	City Richmond State VA Zip Code 23237	Amount of Each Disbursement this Period
	Purpose of Disbursement Supplies/Advertising	<input type="text" value="325.66"/>
	Candidate Name JAMES S III GILMORE	<input type="text" value="101"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4075.66"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**Schedule B-P
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Friends of George Allen	Transaction ID: SB23.5204 Date of Disbursement 01 / 23 / 2007
	Mailing Address PO Box 6859	Amount of Each Disbursement this Period 775.00
	City Arlington State VA Zip Code 22206	
	Purpose of Disbursement Furniture Purchase	101 Category/ Type
	Candidate Name JAMES S III GILMORE	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) James Gilmore	Transaction ID: SB23.5173 Date of Disbursement 02 / 10 / 2007
	Mailing Address PO Box 19128	Amount of Each Disbursement this Period 1335.65
	City Alexandria State VA Zip Code 22320	
	Purpose of Disbursement Travel	101 Category/ Type
	Candidate Name JAMES S III GILMORE	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) James Gilmore	Transaction ID: SB23.5174 Date of Disbursement 03 / 15 / 2007
	Mailing Address PO Box 19128	Amount of Each Disbursement this Period 212.36
	City Alexandria State VA Zip Code 22320	
	Purpose of Disbursement Travel	101 Category/ Type
	Candidate Name JAMES S III GILMORE	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2323.01
TOTAL This Period (last page this line number only)	

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) James Gilmore Mailing Address PO Box 19128 City Alexandria State VA Zip Code 22320 Purpose of Disbursement Travel Candidate Name JAMES S III GILMORE Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 00	Transaction ID: SB23.5175 Date of Disbursement 03 / 15 / 2007 Amount of Each Disbursement this Period 133.92 101 Category/ Type
B.	Full Name (Last, First, Middle Initial) Iowa Christian Alliance Mailing Address PO Box 65066 City West Des Moines State IA Zip Code 50265 Purpose of Disbursement Display Table Candidate Name JAMES S III GILMORE Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 00	Transaction ID: SB23.5206 Date of Disbursement 02 / 25 / 2007 Amount of Each Disbursement this Period 500.00 101 Category/ Type
C.	Full Name (Last, First, Middle Initial) J.M. Williams & Associates LLC Mailing Address 5505 Connecticut Ave., NW #147 City Washington State DC Zip Code 20015 Purpose of Disbursement Travel Candidate Name JAMES S III GILMORE Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 00	Transaction ID: SB23.5208 Date of Disbursement 01 / 23 / 2007 Amount of Each Disbursement this Period 1413.75 101 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	2047.67
TOTAL This Period (last page this line number only) ▶	[Empty Box]

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) J.M. Williams & Associates LLC Mailing Address 5505 Connecticut Ave., NW #147 City Washington State DC Zip Code 20015 Purpose of Disbursement Travel Candidate Name JAMES S III GILMORE Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 00	Transaction ID: SB23.5209 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 0 / 2 0 0 7 Amount of Each Disbursement this Period 1259.70
B.	Full Name (Last, First, Middle Initial) J.M. Williams & Associates LLC Mailing Address 5505 Connecticut Ave., NW #147 City Washington State DC Zip Code 20015 Purpose of Disbursement Travel Candidate Name JAMES S III GILMORE Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 00	Transaction ID: SB23.5210 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 4 / 2 0 0 7 Amount of Each Disbursement this Period 10000.00
C.	Full Name (Last, First, Middle Initial) Dick Leggett Mailing Address PO Box 192 City Colonial Beach State VA Zip Code 22443 Purpose of Disbursement Strategic/Policy Consulting Candidate Name JAMES S III GILMORE Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 00	Transaction ID: SB23.5180 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 0 / 2 0 0 7 Amount of Each Disbursement this Period 2350.00

SUBTOTAL of Disbursements This Page (optional) ▶

13609.70

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

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Dick Leggett Mailing Address PO Box 192 City Colonial Beach State VA Zip Code 22443 Purpose of Disbursement Strategic/Policy Consulting Candidate Name JAMES S III GILMORE Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 00	Transaction ID: SB23.5181 Date of Disbursement 02 / 26 / 2007 Amount of Each Disbursement this Period 3500.00 101 Category/ Type
B.	Full Name (Last, First, Middle Initial) Dick Leggett Mailing Address PO Box 192 City Colonial Beach State VA Zip Code 22443 Purpose of Disbursement Strategic/Policy Consulting Candidate Name JAMES S III GILMORE Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 00	Transaction ID: SB23.5182 Date of Disbursement 03 / 15 / 2007 Amount of Each Disbursement this Period 1750.00 101 Category/ Type
C.	Full Name (Last, First, Middle Initial) Dick Leggett Mailing Address PO Box 192 City Colonial Beach State VA Zip Code 22443 Purpose of Disbursement Strategic/Policy Consulting Candidate Name JAMES S III GILMORE Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 00	Transaction ID: SB23.5183 Date of Disbursement 03 / 30 / 2007 Amount of Each Disbursement this Period 1750.00 101 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	7000.00
TOTAL This Period (last page this line number only) ▶	

**Schedule B-P
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Liberty University College Republicans	Transaction ID: SB23.5212 Date of Disbursement 02 / 22 / 2007
	Mailing Address 1900 Weeping Willow Dr. Apt. J	Amount of Each Disbursement this Period 445.00
	City Lynchburg State VA Zip Code 24501	
	Purpose of Disbursement Travel Candidate Name JAMES S III GILMORE	101 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Mr. Jesse Mallory	Transaction ID: SB23.5184 Date of Disbursement 03 / 07 / 2007
	Mailing Address P.O. Box 330043 10430 Lincoln St.	Amount of Each Disbursement this Period 417.17
	City Northglen State CO Zip Code 80233	
	Purpose of Disbursement Travel-Airfare/Lodging Candidate Name JAMES S III GILMORE	101 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Boyd Marcus	Transaction ID: SB23.5186 Date of Disbursement 02 / 10 / 2007
	Mailing Address 25 East Main St.	Amount of Each Disbursement this Period 10000.00
	City Richmond State VA Zip Code 23219	
	Purpose of Disbursement Strategic Consulting Candidate Name JAMES S III GILMORE	101 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	10862.17
TOTAL This Period (last page this line number only)	▶	

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Omni Shoreham Hotel	Transaction ID: SB23.5214 Date of Disbursement 03 / 03 / 2007
	Mailing Address 2500 Calvert St., NW	Amount of Each Disbursement this Period 1057.35
	City Washington State DC Zip Code 20008	
	Purpose of Disbursement Lodging	101 Category/ Type
	Candidate Name JAMES S III GILMORE	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District: 00	

B.	Full Name (Last, First, Middle Initial) Sam Pimm	Transaction ID: SB23.5188 Date of Disbursement 03 / 02 / 2007
	Mailing Address PO Box 68	Amount of Each Disbursement this Period 446.98
	City Starham State NH Zip Code 03885	
	Purpose of Disbursement Meeting Expense-Hospitality Suite	101 Category/ Type
	Candidate Name JAMES S III GILMORE	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District: 00	

C.	Full Name (Last, First, Middle Initial) Political Ink	Transaction ID: SB23.5276 Date of Disbursement 03 / 08 / 2007
	Mailing Address 12936 Ashtree Rd.	Amount of Each Disbursement this Period 8558.74
	City Midlothian State VA Zip Code 23114	
	Purpose of Disbursement Invitations-Printing	101 Category/ Type
	Candidate Name JAMES S III GILMORE	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District: 00	

SUBTOTAL of Disbursements This Page (optional)	▶	10063.07
TOTAL This Period (last page this line number only)	▶	

**Schedule B-P
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Property Services, Inc.	Transaction ID: SB23.5220 Date of Disbursement
	Mailing Address 6320 Augusta Dr. #1400	<input type="text" value="02"/> / <input type="text" value="01"/> / <input type="text" value="2007"/>
	City Springfield State VA Zip Code 22150	Amount of Each Disbursement this Period
	Purpose of Disbursement Office Rent	<input type="text" value="3500.00"/>
	Candidate Name JAMES S III GILMORE	<input type="text" value="101"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Property Services, Inc.	Transaction ID: SB23.5221 Date of Disbursement
	Mailing Address 6320 Augusta Dr. #1400	<input type="text" value="03"/> / <input type="text" value="07"/> / <input type="text" value="2007"/>
	City Springfield State VA Zip Code 22150	Amount of Each Disbursement this Period
	Purpose of Disbursement Office Rent	<input type="text" value="3500.00"/>
	Candidate Name JAMES S III GILMORE	<input type="text" value="101"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Anthony Surace	Transaction ID: SB23.5190 Date of Disbursement
	Mailing Address 10430 Lincoln St. Northglenn	<input type="text" value="03"/> / <input type="text" value="07"/> / <input type="text" value="2007"/>
	City Northglenn State CO Zip Code 80233	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel-Airfare	<input type="text" value="224.59"/>
	Candidate Name JAMES S III GILMORE	<input type="text" value="101"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="7224.59"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**Schedule B-P
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 70 / 96

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

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)
JIM GILMORE FOR PRESIDENT

A.	Full Name (Last, First, Middle Initial) Taste of Europe	Transaction ID: SB23.5223 Date of Disbursement 01 / 27 / 2007
	Mailing Address 827 Elm	Amount of Each Disbursement this Period 1638.40
	City Manchester State NH Zip Code 03101	
	Purpose of Disbursement Fundraising Catering	101 Category/ Type
	Candidate Name JAMES S III GILMORE	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 00	

B.	Full Name (Last, First, Middle Initial) U.S. Postmaster	Transaction ID: SB23.5225 Date of Disbursement 03 / 08 / 2007
	Mailing Address Post Office	Amount of Each Disbursement this Period 26644.59
	City Woodbridge State VA Zip Code 22191	
	Purpose of Disbursement Direct Mail Postage	101 Category/ Type
	Candidate Name JAMES S III GILMORE	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 00	

C.	Full Name (Last, First, Middle Initial) Willett Systems	Transaction ID: SB23.5227 Date of Disbursement 03 / 19 / 2007
	Mailing Address 445 N. Mechanic St.	Amount of Each Disbursement this Period 5000.00
	City Cumberland State MD Zip Code 21502	
	Purpose of Disbursement Web Development	101 Category/ Type
	Candidate Name JAMES S III GILMORE	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 00	

SUBTOTAL of Disbursements This Page (optional)	33282.99
TOTAL This Period (last page this line number only)	113136.54

Schedule C-P

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 71 / 96
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 19a <input checked="" type="checkbox"/> 19b

NAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

Transaction ID: SC/12.5134

LOAN SOURCE Full Name (Last, First, Middle Initial) Brian Anderson	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 5315 Connecticut Ave., #608	
City Washington State DC ZIP Code 20015	

Original Amount of Loan 2300.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 2300.00
------------------------------------	------------------------------------	--

TERMS

Date Incurred <table border="1"> <tr><td>M</td><td>M</td></tr> <tr><td>0</td><td>3</td></tr> </table> <table border="1"> <tr><td>D</td><td>D</td></tr> <tr><td>0</td><td>6</td></tr> </table> <table border="1"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>2</td><td>0</td><td>0</td><td>7</td></tr> </table>	M	M	0	3	D	D	0	6	Y	Y	Y	Y	2	0	0	7	Date Due Upon Demand	Interest Rate 0.0000 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
M	M																		
0	3																		
D	D																		
0	6																		
Y	Y	Y	Y																
2	0	0	7																

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)	2300.00
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-P

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 72 / 96
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 19a <input checked="" type="checkbox"/> 19b

NAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

Transaction ID: SC/12.5278

LOAN SOURCE Full Name (Last, First, Middle Initial) BB&T	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1909 K St., Nw	
City Washington State DC ZIP Code 20006	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2400.00	0.00	2400.00

TERMS

Date Incurred <input type="text"/> M <input type="text"/> M 03	Date Due <input type="text"/> D <input type="text"/> D 09	<input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 2007	Upon Demand	Interest Rate <input type="text"/> 0.0000 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" 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)	2400.00
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-P

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 73 / 96
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 19a <input checked="" type="checkbox"/> 19b

NAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

Transaction ID: SC/12.5136

LOAN SOURCE Full Name (Last, First, Middle Initial) Alice Bransfield	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 12720 Builders Rd.	
City Herndon State VA ZIP Code 20170	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2300.00	0.00	2300.00

TERMS

Date Incurred <input type="text"/> M <input type="text"/> M <input type="text"/> D <input type="text"/> D <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 06 2007	Date Due Upon Demand	Interest Rate 0.0000 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" 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)	2300.00
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.

A. Form/Schedule : **SC/12**

(Current loan balance of 2300.00 has been forgiven)

Transaction ID : **SC/12.5136**

Schedule C-P

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

LOANS

FOR LINE NUMBER:
(check only one) 19a
 19b

NAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

Transaction ID: SC/12.5135

LOAN SOURCE Full Name (Last, First, Middle Initial) Declan Bransfield	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 12720 Builders Rd.	
City Herndon State VA ZIP Code 20170	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2300.00	0.00	2300.00

TERMS

Date Incurred MM DD YY YY 03 06 2007	Date Due Upon Demand	Interest Rate 0.0000 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" 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)	▶	2300.00
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.		

A. Form/Schedule : **SC/12**

(Current loan balance of 2300.00 has been forgiven)

Transaction ID : **SC/12.5135**

Schedule C-P

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 77 / 96
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 19a <input checked="" type="checkbox"/> 19b

NAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

Transaction ID: SC/12.5142

LOAN SOURCE Full Name (Last, First, Middle Initial) Paul Cali	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 3902 Pender Spring Dr.	
City Fairfax State VA ZIP Code 22033	

Original Amount of Loan 2300.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 2300.00
------------------------------------	------------------------------------	--

TERMS

Date Incurred <table border="1"> <tr><td>M</td><td>M</td></tr> <tr><td>0</td><td>3</td></tr> </table> <table border="1"> <tr><td>D</td><td>D</td></tr> <tr><td>0</td><td>6</td></tr> </table> <table border="1"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>2</td><td>0</td><td>0</td><td>7</td></tr> </table>	M	M	0	3	D	D	0	6	Y	Y	Y	Y	2	0	0	7	Date Due Upon Demand	Interest Rate 0.0000 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
M	M																		
0	3																		
D	D																		
0	6																		
Y	Y	Y	Y																
2	0	0	7																

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)	2300.00
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.

A. Form/Schedule : **SC/12**

(Current loan balance of 2300.00 has been forgiven)

Transaction ID : **SC/12.5142**

Schedule C-P

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 79 / 96
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 19a <input checked="" type="checkbox"/> 19b

NAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

Transaction ID: SC/12.5137

LOAN SOURCE Full Name (Last, First, Middle Initial) Bruce Eberle	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1449 Montague Dr.	
City Vienna State VA ZIP Code 22181	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2300.00	0.00	2300.00

TERMS

Date Incurred <input type="text"/> M <input type="text"/> M <input type="text"/> D <input type="text"/> D <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 06 2007	Date Due Upon Demand	Interest Rate 0.0000 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" 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)	2300.00
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.

A. Form/Schedule : **SC/12**

(Current loan balance of 2300.00 has been forgiven)

Transaction ID : **SC/12.5137**

Schedule C-P

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 81 / 96
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 19a <input checked="" type="checkbox"/> 19b

NAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

Transaction ID: SC/12.5138

LOAN SOURCE Full Name (Last, First, Middle Initial) Claire Eberle	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 9570 Mcglinn Dr.	
City Laconnor State WA ZIP Code 98257	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2300.00	0.00	2300.00

TERMS

Date Incurred M M 03 D D 06 Y Y Y Y 2007	Date Due Upon Demand	Interest Rate 0.0000 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" 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)	2300.00
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.

A. Form/Schedule : **SC/12**

(Current loan balance of 2300.00 has been forgiven)

Transaction ID : **SC/12.5138**

Schedule C-P

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 83 / 96
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 19a <input checked="" type="checkbox"/> 19b

NAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

Transaction ID: SC/12.5141

LOAN SOURCE Full Name (Last, First, Middle Initial) Katherine Eberle	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1449 Montague Dr.	
City Vienna State VA ZIP Code 22181	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2300.00	0.00	2300.00

TERMS

Date Incurred <input type="text"/> M <input type="text"/> M <input type="text"/> D <input type="text"/> D <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 06 2007	Date Due Upon Demand	Interest Rate 0.0000 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" 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)	2300.00
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.

A. Form/Schedule : **SC/12**

(Current loan balance of 2300.00 has been forgiven)

Transaction ID : **SC/12.5141**

Schedule C-P

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 85 / 96
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 19a <input checked="" type="checkbox"/> 19b

NAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

Transaction ID: SC/12.5143

LOAN SOURCE Full Name (Last, First, Middle Initial) Robert Eberle	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 9570 Mcglinn Dr.	
City Laconnor State WA ZIP Code 98257	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2300.00	0.00	2300.00

TERMS

Date Incurred <input type="text"/> M <input type="text"/> M <input type="text"/> D <input type="text"/> D 03 06 2007	Date Due Upon Demand	Interest Rate 0.0000 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" 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)	2300.00
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.

A. Form/Schedule : **SC/12**

(Current loan balance of 2300.00 has been forgiven)

Transaction ID : **SC/12.5143**

Schedule C-P

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 87 / 96
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 19a <input checked="" type="checkbox"/> 19b

NAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

Transaction ID: SC/12.5145

LOAN SOURCE Full Name (Last, First, Middle Initial) William Griffiths	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 4901 Tarheel Way	
City Annandale State VA ZIP Code 22003	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2006.12	0.00	2006.12

TERMS

Date Incurred <input type="text"/> M <input type="text"/> M <input type="text"/> D <input type="text"/> D <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 06 2007	Date Due Upon Demand	Interest Rate 0.0000 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" 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)	2006.12
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.

A. Form/Schedule : **SC/12**

(Current loan balance of 2006.12 has been forgiven)

Transaction ID : **SC/12.5145**

Schedule C-P

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 89 / 96
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 19a <input checked="" type="checkbox"/> 19b

NAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

Transaction ID: SC/12.5139

LOAN SOURCE Full Name (Last, First, Middle Initial) Elizabeth Livingstone	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 43013 Eustis St.	
City South Riding State VA ZIP Code 20152	

Original Amount of Loan 2012.77	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 2012.77
------------------------------------	------------------------------------	--

TERMS

Date Incurred MM DD YY YY 03 06 2007	Date Due Upon Demand	Interest Rate 0.0000 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" 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)	2012.77
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-P

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

LOANS

FOR LINE NUMBER:
(check only one) 19a
 19b

NAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

Transaction ID: SC/12.5140

LOAN SOURCE Full Name (Last, First, Middle Initial) John Livingstone	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 43013 Eustis St.	
City South Riding State VA ZIP Code 20152	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1985.14	0.00	1985.14

TERMS

Date Incurred MM DD YY YY 03 06 2007	Date Due Upon Demand	Interest Rate 0.0000 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" 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)	▶	1985.14
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-P

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 91 / 96
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 19a <input checked="" type="checkbox"/> 19b

NAME OF COMMITTEE (In Full)
JIM GILMORE FOR PRESIDENT

Transaction ID: SC/12.5144

LOAN SOURCE Full Name (Last, First, Middle Initial) Tammy Lyles-Cali	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 3902 Pender Spring Dr.	
City Fairfax State VA ZIP Code 22033	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2300.00	0.00	2300.00

TERMS

Date Incurred <input type="text"/> M <input type="text"/> M <input type="text"/> D <input type="text"/> D <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 06 2007	Date Due Upon Demand	Interest Rate 0.0000 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" 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)	2300.00
TOTALS This Period (last page in this line only)	29104.03

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

A. Form/Schedule : **SC/12**

(Current loan balance of 2300.00 has been forgiven)

Transaction ID : **SC/12.5144**

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 93 / 96
 FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 JIM GILMORE FOR PRESIDENT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Advanced Mailing Services	Nature of Debt (Purpose): Direct Mail						
Mailing Address 14970 Farm Creek Dr.							
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">ZIP Code</td> </tr> <tr> <td>Woodbridge</td> <td>VA</td> <td>22191</td> </tr> </table>	City	State	ZIP Code	Woodbridge	VA	22191	
City	State	ZIP Code					
Woodbridge	VA	22191					

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="0.00"/>	Transaction ID: SD12.5264						
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Amount Incurred This Period</td> <td style="width: 33%;">Payment This Period</td> <td style="width: 33%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><input style="width: 100%;" type="text" value="2085.48"/></td> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="2085.48"/></td> </tr> </table>	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	<input style="width: 100%;" type="text" value="2085.48"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="2085.48"/>	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period					
<input style="width: 100%;" type="text" value="2085.48"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="2085.48"/>					

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Allied Printing Resources	Nature of Debt (Purpose): Direct Mail Printing						
Mailing Address PO Box 6506							
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">ZIP Code</td> </tr> <tr> <td>Carlstadt</td> <td>NJ</td> <td>07072</td> </tr> </table>	City	State	ZIP Code	Carlstadt	NJ	07072	
City	State	ZIP Code					
Carlstadt	NJ	07072					

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="0.00"/>	Transaction ID: SD12.5265						
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Amount Incurred This Period</td> <td style="width: 33%;">Payment This Period</td> <td style="width: 33%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><input style="width: 100%;" type="text" value="3692.58"/></td> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="3692.58"/></td> </tr> </table>	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	<input style="width: 100%;" type="text" value="3692.58"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="3692.58"/>	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period					
<input style="width: 100%;" type="text" value="3692.58"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="3692.58"/>					

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Campaign Funding Direct	Nature of Debt (Purpose): Direct Mail						
Mailing Address 1420 Spring Hill Rd., Ste. 490							
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">ZIP Code</td> </tr> <tr> <td>McLean</td> <td>VA</td> <td>22102</td> </tr> </table>	City	State	ZIP Code	McLean	VA	22102	
City	State	ZIP Code					
McLean	VA	22102					

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="0.00"/>	Transaction ID: SD12.5266						
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Amount Incurred This Period</td> <td style="width: 33%;">Payment This Period</td> <td style="width: 33%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><input style="width: 100%;" type="text" value="1000.00"/></td> <td><input style="width: 100%;" type="text" value="0.00"/></td> <td><input style="width: 100%;" type="text" value="1000.00"/></td> </tr> </table>	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	<input style="width: 100%;" type="text" value="1000.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="1000.00"/>	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period					
<input style="width: 100%;" type="text" value="1000.00"/>	<input style="width: 100%;" type="text" value="0.00"/>	<input style="width: 100%;" type="text" value="1000.00"/>					

1) SUBTOTALS This Period This Page (optional).....	<input style="width: 100%;" type="text" value="6778.06"/>
2) TOTALS This Period (last page this line number only).....	<input style="width: 100%;" type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input style="width: 100%;" type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input style="width: 100%;" type="text"/>

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 JIM GILMORE FOR PRESIDENT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Catterton Printing			Nature of Debt (Purpose): Direct Mail Prodcution
Mailing Address 100 Post Office Rd.			
City Waldorf	State MD	ZIP Code 20602	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: SD12.5267	
Amount Incurred This Period <input type="text" value="9466.47"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="9466.47"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Colortree of Virginia			Nature of Debt (Purpose): Direct Mail Prodcution
Mailing Address 8000 Villa Park Dr.			
City Richmond	State VA	ZIP Code 28990	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: SD12.5268	
Amount Incurred This Period <input type="text" value="2107.98"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2107.98"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor CP Direct			Nature of Debt (Purpose): Direct Mail
Mailing Address 4600A Boston Way			
City Lanham	State MD	ZIP Code 20706	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: SD12.5269	
Amount Incurred This Period <input type="text" value="2767.40"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2767.40"/>	

1) SUBTOTALS This Period This Page (optional).....	▶	<input type="text" value="14341.85"/>
2) TOTALS This Period (last page this line number only).....	▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	<input type="text"/>

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 JIM GILMORE FOR PRESIDENT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor EGC Business Center	Nature of Debt (Purpose): Direct Mail
Mailing Address 1420 Spring Hill Rd., #490	
City McLean State VA ZIP Code 22102	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD12.5270	
Amount Incurred This Period 2039.84	Payment This Period 0.00	Outstanding Balance at Close of This Period 2039.84

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Huckaby Davis Lisker	Nature of Debt (Purpose): Accounting/Compliance
Mailing Address 228 S. Washington St., Ste. 115	
City Alexandria State VA ZIP Code 22314	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD12.5271	
Amount Incurred This Period 11250.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 11250.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor MDI Imaging & Mail	Nature of Debt (Purpose): Direct Mail
Mailing Address 21721 Filigree Ct.	
City Ashburn State VA ZIP Code 20147	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD12.5272	
Amount Incurred This Period 3908.66	Payment This Period 0.00	Outstanding Balance at Close of This Period 3908.66

1) SUBTOTALS This Period This Page (optional).....	17198.50
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 JIM GILMORE FOR PRESIDENT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nova Label	Nature of Debt (Purpose): Direct Mail Labels
Mailing Address 4819 Lydell Rd.	
City State ZIP Code Cheverly MD 20781	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD12.5273	
Amount Incurred This Period 871.29	Payment This Period 0.00	Outstanding Balance at Close of This Period 871.29

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Omega List Co.	Nature of Debt (Purpose): Direct Mail List Rental
Mailing Address 1420 Spring Hill Rd., #490	
City State ZIP Code McLean VA 22102	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD12.5274	
Amount Incurred This Period 8101.25	Payment This Period 0.00	Outstanding Balance at Close of This Period 8101.25

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Political Ink	Nature of Debt (Purpose): Printing
Mailing Address 12936 Ashtree Rd.	
City State ZIP Code Midlothian VA 23114	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD12.5275	
Amount Incurred This Period 20177.48	Payment This Period 8558.74	Outstanding Balance at Close of This Period 11618.74

1) SUBTOTALS This Period This Page (optional).....	20591.28
2) TOTALS This Period (last page this line number only).....	58909.69
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	29104.03
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	88013.72